



# ANNUAL STATEMENT

For the Year Ended December 31, 2019

of the Condition and Affairs of the

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

NAIC Group Code..... 0, 0 (Current Period) (Prior Period)	NAIC Company Code..... 56340	Employer's ID Number..... 34-0220550
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Licensed as Business Type: Fraternal Benefit Society		
Incorporated/Organized..... January 9, 1892	Commenced Business..... October 1, 1890	
Statutory Home Office	6611 ROCKSIDE ROAD .. INDEPENDENCE .. OH .. US .. 44131 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	6611 ROCKSIDE ROAD .. INDEPENDENCE .. OH .. US .. 44131 (Street and Number) (City or Town, State, Country and Zip Code)	216-642-9406 (Area Code) (Telephone Number)
Mail Address	6611 ROCKSIDE ROAD .. INDEPENDENCE .. OH .. US .. 44131 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	6611 ROCKSIDE ROAD .. INDEPENDENCE .. OH .. US .. 44131 (Street and Number) (City or Town, State, Country and Zip Code)	216-642-9406 (Area Code) (Telephone Number)
Internet Web Site Address	WWW.FCSU.COM	
Statutory Statement Contact	KENNETH ANTHONY ARENDT (Name) FCSU@AOL.COM (E-Mail Address)	216-642-9406 (Area Code) (Telephone Number) (Extension) 216-642-4310 (Fax Number)

### OFFICERS

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

### OTHER

DIRECTORS OR TRUSTEES		
ANDREW MATHEW RAJEC	ANDREW R. HARCAR SR	KENNETH ANTHONY ARENDT
REV. THOMAS NASTA	SABINA SABADOS	THOMAS IVANEC #
JAMES MARMOL	MARTHA ZAVADA-WOJCIK	MILOS MITRO
KEVIN COLLINS #	MICHAEL LAKO	TIMOTHY GRAVES #

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

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

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

Subscribed and sworn to before me  
This \_\_\_\_\_ day of \_\_\_\_\_ FEBRUARY 2020

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

Yes [X] No [ ]

Annual Statement for the year 2019 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**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).....	375,195,522		375,195,522	353,011,701
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	5,373,038		5,373,038	2,987,141
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	98,970		98,970	371,258
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	573,086		573,086	373,070
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	357,633		357,633	991,961
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	785,946
5. Cash (\$....15,883,668, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$....4,946,478, Schedule DA).....	20,830,145		20,830,145	15,831,904
6. Contract loans (including \$.....0 premium notes).....	1,204,506		1,204,506	1,107,398
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	8,042,686		8,042,686	7,210,059
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).....	411,675,586	0	411,675,586	382,670,437
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	4,828,524		4,828,524	4,627,912
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	20,400		20,400	21,785
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....	1,946	1,946	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other-than-invested assets.....	550	550	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	416,527,006	2,496	416,524,510	387,320,134
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTAL (Lines 26 and 27).....	416,527,006	2,496	416,524,510	387,320,134

**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. Deposits 550.....	550	550	0	
2502.....			0	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	550	550	0	0

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

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$....325,561,281 (Exhibit 5, Line 9999999) less \$.....0 included in Line 6.3 (including \$.....0 Modco Reserve).....	325,561,282	315,165,261
2. Aggregate reserve for accident and health contracts (including \$.....0 Modco Reserve).....	.....	.....
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve).....	36,266,916	28,783,032
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11).....	300,000	300,000
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11).....	.....	.....
5. Policyholders' dividends/refunds to members \$.....0 and coupons \$.....0 due and unpaid (Exhibit 4, Line 10).....	400,000	.....
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$.....0 Modco).....	.....	400,000
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$.....0 Modco).....	.....	.....
6.3 Coupons and similar benefits (including \$.....0 Modco).....	.....	.....
7. Amount provisionally held for deferred dividend policies not included in Line 6).....	.....	.....
8. 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).....	53,414	47,645
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....	.....	.....
9.2 Provision for experience rating refunds, including the liability of \$.....0 accident and health experience rating refunds of which \$.....0 is for medical loss ratio rebate per the Public Health Service Act.....	.....	.....
9.3 Other amounts payable on reinsurance, including \$.....0 assumed and \$.....0 ceded.....	.....	.....
9.4 Interest Maintenance Reserve (IMR, Line 6).....	771,087	1,030,876
10. Commissions to agents due or accrued - life and annuity contracts \$.....0, accident and health \$.....0 and deposit-type contract funds \$.....0.....	32,660	14,273
11. Commissions and expense allowances payable on reinsurance assumed.....	.....	.....
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7).....	77,679	76,626
13. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves, net of reinsured allowances).....	.....	.....
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6).....	18,683	18,683
15.1 Current federal and foreign income taxes, including \$.....0 on realized capital gains (losses).....	.....	.....
15.2 Net deferred tax liability.....	.....	.....
16. Unearned investment income.....	.....	.....
17. Amounts withheld or retained by reporting entity as agent or trustee.....	6,167,377	5,791,613
18. Amounts held for agents' account, including \$.....0 agents' credit balances.....	.....	.....
19. Remittances and items not allocated.....	.....	.....
20. Net adjustment in assets and liabilities due to foreign exchange rates.....	9,511	9,511
21. Liability for benefits for employees and agents if not included above.....	.....	.....
22. Borrowed money \$.....0 and interest thereon \$.....0.....	.....	.....
23. Dividends to stockholders declared and unpaid.....	.....	.....
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR Line 16, Col. 7).....	3,993,202	2,783,323
24.02 Reinsurance in unauthorized and certified (\$.....0) companies.....	.....	.....
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....	.....	.....
24.04 Payable to parent, subsidiaries and affiliates.....	.....	.....
24.05 Drafts outstanding.....	.....	.....
24.06 Liability for amounts held under uninsured plans.....	.....	.....
24.07 Funds held under coinsurance.....	.....	.....
24.08 Derivatives.....	.....	.....
24.09 Payable for securities.....	.....	100,013
24.10 Payable for securities lending.....	.....	.....
24.11 Capital notes \$.....0 and interest thereon \$.....0.....	.....	.....
25. Aggregate write-ins for liabilities.....	724,693	424,693
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....	374,376,504	354,945,549
27. From Separate Accounts Statement.....	.....	.....
28. Total liabilities (Line 26 and 27).....	374,376,504	354,945,549
29. Common capital stock.....	.....	.....
30. Preferred capital stock.....	.....	.....
31. Aggregate write-ins for other-than-special surplus funds.....	0	0
32. Surplus notes.....	.....	.....
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1).....	.....	.....
34. Aggregate write-ins for special surplus funds.....	0	0
35. Unassigned funds (surplus).....	42,148,006	32,374,585
36. Less treasury stock, at cost:		
36.1 .....0,000 shares common (value included in Line 29 \$.....0).....	.....	.....
36.2 .....0,000 shares preferred (value included in Line 30 \$.....0).....	.....	.....
37. Surplus (Total Lines 31 + 32 + 33 + 34 + 35 - 36) (including \$.....0 in Separate Accounts Statement).....	42,148,006	32,374,585
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55).....	42,148,006	32,374,585
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3).....	416,524,510	387,320,134

**DETAILS OF WRITE-INS**

2501. Postretirement Reserve.....	413,726	413,726
2502. Security Deposits.....	10,967	10,967
2503. Convention Accrual.....	300,000	.....
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).....	724,693	424,693
3101. ....	.....	.....
3102. ....	.....	.....
3103. ....	.....	.....
3198. Summary of remaining write-ins for Line 31 from overflow page.....	0	0
3199. Totals (Lines 3101 through 3103 plus 3198) (Line 31 above).....	0	0
3401. ....	.....	.....
3402. ....	.....	.....
3403. ....	.....	.....
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0

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

## 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, less Col. 11)	18,944,367	12,068,358
2. Considerations for supplementary contracts with life contingencies.....		
3. Net investment income (Exhibit of Net Investment Income, Line 17).....	15,841,382	15,936,994
4. Amortization of Interest Maintenance Reserve (IMR) (Line 5).....	405,470	461,105
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.....	20,491	13,273
9. Totals (Lines 1 to 8.3).....	35,211,710	28,479,730
10. Death benefits.....	2,947,289	2,642,835
11. Matured endowments (excluding guaranteed annual pure endowments).....		
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8).....	15,861,490	17,516,462
13. Disability benefits and benefits under accident and health contracts.....		
14. Coupons, guaranteed annual pure endowments and similar benefits.....		
15. Surrender benefits and withdrawals for life contracts.....	525,812	572,287
16. Group conversions.....		
17. Interest and adjustments on contract or deposit-type contract funds.....	760,700	179,936
18. Payments on supplementary contracts with life contingencies.....		
19. Increase in aggregate reserves for life and accident and health contracts.....	10,396,020	2,026,057
20. Totals (Lines 10 to 19).....	30,491,311	22,937,577
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1).....	317,576	166,490
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1).....		
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Columns 1, 2, 3, 4 and 6).....	3,295,310	3,721,729
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5).....	118,288	106,341
25. Increase in loading on deferred and uncollected premiums.....		
26. Net transfers to or (from) Separate Accounts net of reinsurance.....		
27. Aggregate write-ins for deductions.....	(327,461)	(409,342)
28. Totals (Lines 20 to 27).....	33,895,024	26,522,795
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	1,316,686	1,956,935
30. Dividends to policyholders and refunds to members.....	424,834	422,699
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	891,852	1,534,236
32. Federal and foreign income taxes incurred (excluding tax on capital gains).....		
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	891,852	1,534,236
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$.....0 (excluding taxes of \$....145,681 transferred to the IMR).....	6,960,683	97,832
35. Net income (Line 33 plus Line 34).....	7,852,535	1,632,068
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2).....	32,374,585	30,782,846
37. Net income (Line 35).....	7,852,535	1,632,068
38. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0.....	3,188,390	(162,804)
39. Change in net unrealized foreign exchange capital gain (loss) .....		
40. Change in net deferred income tax.....		
41. Change in nonadmitted assets.....	2,919	2,919
42. Change in liability for reinsurance in unauthorized and certified companies.....		
43. Change in reserve on account of change in valuation basis (increase) or decrease.....		
44. Change in asset valuation reserve .....	(1,209,880)	129,710
45. Change in treasury stock, (Page 3, Lines 36.1 and 36.2 Col. 2 minus Col. 1).....		
46. Surplus (contributed to) withdrawn from Separate Accounts during period.....		
47. Other changes in surplus in Separate Accounts Statement.....		
48. Change in surplus notes.....		
49. Cumulative effect of changes in accounting principles.....		
50. Capital changes:		
50.1 Paid in.....		
50.2 Transferred from surplus (Stock Dividend).....		
50.3 Transferred to surplus.....		
51. Surplus adjustment:		
51.1 Paid in.....		
51.2 Transferred to capital (Stock Dividend).....		
51.3 Transferred from capital.....		
51.4 Change in surplus as a result of reinsurance.....		
52. Dividends to stockholders.....		
53. Aggregate write-ins for gains and losses in surplus.....	(60,543)	(10,155)
54. Net change in capital and surplus for the year (Lines 37 through 53).....	9,773,421	1,591,738
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38).....	42,148,006	32,374,585

### DETAILS OF WRITE-INS

08.301. ADVERTISING AND SUBSCRIPTION INCOME.....	3,150	3,350
08.302. RENTAL INCOME ON GROUNDS AT ESTATES, PA.....		6,000
08.303. MISCELLANEOUS INCOME .....	17,341	3,923
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).....	20,491	13,273
2701. .....		
2702. NET CHANGE IN PENSION FUND.....	(327,461)	(409,342)
2703. .....		
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above).....	(327,461)	(409,342)
5301. ACCRUAL & ASSET ADJUSTMENTS.....	(700)	(10,155)
5302. PRIOR YEAR ADJUSTMENT SCHEDULE BA SECURITIES .....	(59,843)	
5303. INCREASE IN POST RETIREMENT COST .....		
5398. Summary of remaining write-ins for Line 53 from overflow page.....	0	0
5399. Totals (Lines 5301 through 5303 plus 5398) (Line 53 above).....	(60,543)	(10,155)

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

## CASH FLOW

	1 Current Year	2 Prior Year
<b>CASH FROM OPERATIONS</b>		
1. Premiums collected net of reinsurance.....	18,951,521	12,056,516
2. Net investment income.....	16,943,051	17,357,073
3. Miscellaneous income.....	20,491	13,273
4. Total (Lines 1 through 3).....	35,915,063	29,426,863
5. Benefit and loss related payments.....	19,463,992	20,911,520
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	.....	.....
7. Commissions, expenses paid and aggregate write-ins for deductions.....	3,084,274	3,920,352
8. Dividends paid to policyholders.....	424,834	422,699
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	.....	.....
10. Total (Lines 5 through 9).....	22,973,100	25,254,571
11. Net cash from operations (Line 4 minus Line 10).....	12,941,963	4,172,292
<b>CASH FROM INVESTMENTS</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	25,126,473	26,852,197
12.2 Stocks.....	224,026	.....
12.3 Mortgage loans.....	352,288	238,506
12.4 Real estate.....	8,084,987	.....
12.5 Other invested assets.....	.....	1,622,284
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	65,167	118,456
12.7 Miscellaneous proceeds.....	.....	100,013
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	33,852,941	28,931,456
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	48,460,047	32,302,867
13.2 Stocks.....	23,500	116,313
13.3 Mortgage loans.....	80,000	.....
13.4 Real estate.....	.....	6,750
13.5 Other invested assets.....	206,718	3,858,886
13.6 Miscellaneous applications.....	.....	.....
13.7 Total investments acquired (Lines 13.1 to 13.6).....	48,770,265	36,284,816
14. Net increase (decrease) in contract loans and premium notes.....	97,108	12,443
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	(15,014,432)	(7,365,804)
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>		
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.....	6,723,173	(11,391,738)
16.5 Dividends to stockholders.....	.....	.....
16.6 Other cash provided (applied).....	347,537	(394,372)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	7,070,710	(11,786,110)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	4,998,241	(14,979,622)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	15,831,903	30,811,525
19.2 End of year (Line 18 plus Line 19.1).....	20,830,144	15,831,903

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

20.0001 .....	.....	.....
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Annual Statement for the year 2019 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY**

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident and Health	7 Fraternal	8 Other Lines of Business	9 YRT Mortality Risk Only
1. Premiums and annuity considerations for life and accident and health contracts.....	18,944,367	1,463,796		17,480,571					
2. Considerations for supplementary contracts with life contingencies.....	0	XXX.	XXX			XXX.	XXX.		XXX.....
3. Net investment income.....	15,841,382	4,752,415		11,088,967					
4. Amortization of Interest Maintenance Reserve (IMR).....	405,470	405,470							
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0								
6. Commissions and expense allowances on reinsurance ceded.....	0								
7. Reserve adjustments on reinsurance ceded.....	0								
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0								
8.2 Charges and fees for deposit-type contracts.....	0								
8.3 Aggregate write-ins for miscellaneous income.....	20,491	20,491	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	35,211,710	6,642,172	0	28,569,538	0	0	0	0	0
10. Death benefits.....	2,947,289	2,947,289							
11. Matured endowments (excluding guaranteed annual pure endowments).....	0								
12. Annuity benefits.....	15,861,490	XXX.	XXX	15,861,490					XXX.....
13. Disability benefits and benefits under accident and health contracts.....	0								
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0								
15. Surrender benefits and withdrawals for life contracts.....	525,812	525,812							
16. Group conversions.....	0								
17. Interest and adjustments on contract or deposit-type contract funds.....	760,700			760,700					
18. Payments on supplementary contracts with life contingencies.....	0								
19. Increase in aggregate reserves for life and accident and health contracts.....	10,396,020	711,981		9,684,039					
20. Totals (Lines 10 to 19).....	30,491,311	4,185,082	0	26,306,229	0	0	XXX.	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	317,575	53,241		264,334					XXX.....
22. Commissions and expense allowances on reinsurance assumed.....	0								
23. General insurance expenses and fraternal expenses.....	3,295,311	686,350		1,601,483					
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	118,288	118,288							
25. Increase in loading on deferred and uncollected premiums.....	0								
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0								
27. Aggregate write-ins for deductions.....	(327,461)	(327,461)	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	33,895,024	4,715,499	0	28,172,046	0	0	1,007,478	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	1,316,686	1,926,673	0	397,492	0	0	(1,007,478)	0	0
30. Dividends to policyholders and refunds to members.....	424,834	424,834					XXX.....		
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	891,852	1,501,839	0	397,492	0	0	(1,007,478)	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	0								
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	891,852	1,501,839	0	397,492	0	0	(1,007,478)	0	0
34. Policies/certificates in force end of year.....	0								

**DETAILS OF WRITE-INS**

08.301. SUBSCRIPTION INCOME.....	3,150	3,150							
08.302. MISCELLANEOUS INCOME.....	17,341	17,341							
08.303. .....	0								
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	20,491	20,491	0	0	0	0	0	0	0
2701. .....	0								
2702. NET CHANGE IN PENSION FUND.....	(327,461)	(327,461)							
2703. .....	0								
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0	0	0	0	0	0	0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above).....	(327,461)	(327,461)	0	0	0	0	0	0	0

**FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)**

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life with Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (c)	11 Other Individual Life	12 YRT Mortality Risk Only
1. Premiums for life contracts (a).	1,463,796		1,463,796									
2. Considerations for supplementary contracts with life contingencies.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income.	4,752,415		4,752,415									
4. Amortization of Interest Maintenance Reserve (IMR).	405,470		405,470									
5. Separate Accounts net gain from operations excluding unrealized gains or losses.	0											
6. Commissions and expense allowances on reinsurance ceded.	0											
7. Reserve adjustments on reinsurance ceded.	0											
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.	0											
8.2 Charges and fees for deposit-type contracts.	0											
8.3 Aggregate write-ins for miscellaneous income.	.20,491	0	20,491	.0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).	6,642,172	0	6,642,172	.0	0	0	0	0	0	0	0	0
10. Death benefits.	2,947,289		2,947,289									
11. Matured endowments (excluding guaranteed annual pure endowments).	0											
12. Annuity benefits.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts.	0											
14. Coupons, guaranteed annual pure endowments and similar benefits.	0											
15. Surrender benefits and withdrawals for life contracts.	525,812		525,812									
16. Group conversions.	0											
17. Interest and adjustments on contract or deposit-type contract funds.	0											
18. Payments on supplementary contracts with life contingencies.	0											
19. Increase in aggregate reserves for life and accident and health contracts.	711,981		711,981									
20. Totals (Lines 10 to 19).	4,185,082	0	4,185,082	.0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).	.53,241		.53,241									XXX
22. Commissions and expense allowances on reinsurance assumed.	0											
23. General insurance expenses.	686,350		686,350									
24. Insurance taxes, licenses and fees, excluding federal income taxes.	118,288		118,288									
25. Increase in loading on deferred and uncollected premiums.	0											
26. Net transfers to or (from) Separate Accounts net of reinsurance.	0											
27. Aggregate write-ins for deductions.	(327,461)	0	(327,461)	.0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).	4,715,499	0	4,715,499	.0	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).	1,926,673	0	1,926,673	.0	0	0	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members.	424,834		424,834									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).	1,501,839	0	1,501,839	.0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).	0											
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).	1,501,839	0	1,501,839	.0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year.	0											

## DETAILS OF WRITE-INS

08.301. Subscription Income.	.3,150		.3,150									
08.302. Misc Income.	.17,341		.17,341									
08.303.	0											
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.	0	0	0	.0	.0	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).	.20,491	0	20,491	.0	0	0	0	0	0	0	0	0
2701.	0											
2702. Net Change Pension Fund.	(327,461)		(327,461)									
2703.	0											
2798. Summary of remaining write-ins for Line 27 from overflow page.	0	0	0	.0	.0	0	0	0	0	0	0	0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above).	(327,461)	0	(327,461)	.0	0	0	0	0	0	0	0	0

(a) Include premium amounts for preneed plans included in Line 1.

(b) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(c) Individual and Group Credit Life are combined and included on page. (indicate whether included with Individual or Group).

**FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP INSURANCE (c)**

	1 Total	2 Whole Life	3 Term Life	4 Universal Life	5 Variable Life	6 Variable Universal Life	7 Credit Life (d)	8 Other Group Life (a)	9 YRT Mortality Risk Only
1. Premiums for life contracts (b).....	0								
2. Considerations for supplementary contracts with life contingencies.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
3. Net investment income.....	0								
4. Amortization of Interest Maintenance Reserve (IMR).....	0								
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0								
6. Commissions and expense allowances on reinsurance ceded.....	0								
7. Reserve adjustments on reinsurance ceded.....	0								
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0								
8.2 Charges and fees for deposit-type contracts.....	0								
8.3 Aggregate write-ins for miscellaneous income.....	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	0	0	0	0	0	0	0	0	0
10. Death benefits.....	0								
11. Matured endowments (excluding guaranteed annual pure endowments).....	0								
12. Annuity benefits.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
13. Disability benefits and benefits under accident and health contracts.....	0								
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0								
15. Surrender benefits and withdrawals for life contracts.....	0								
16. Group conversions.....	0								
17. Interest and adjustments on contract or deposit-type contract funds.....	0								
18. Payments on supplementary contracts with life contingencies.....	0								
19. Increase in aggregate reserves for life and accident and health contracts.....	0								
20. Totals (Lines 10 to 19).....	0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	0								XXX.....
22. Commissions and expense allowances on reinsurance assumed.....	0								
23. General insurance expenses.....	0								
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	0								
25. Increase in loading on deferred and uncollected premiums.....	0								
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0								
27. Aggregate write-ins for deductions.....	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	0	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	0	0	0	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members.....	0								
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	0								
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year.....	0								

NONE

DETAILS OF WRITE-INS									
08.301.	0								
08.302.	0								
08.303.	0								
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	0	0	0	0	0	0	0	0	0
2701.	0								
2702.	0								
2703.	0								
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0	0	0	0	0	0	0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above).....	0	0	0	0	0	0	0	0	0

(a) Includes the following amounts for FEGLI/SGLI: Line 1.....0 Line 10.....0 Line 16.....0 Line 23.....0 Line 24.....0.

(b) Include premium amounts for preneed plans included in Line 1.

(c) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(d) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group)

## ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES (a)

	1 Total	2 Fixed Annuities	3 Indexed Annuities	Deferred		6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
				4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
1. Premiums for individual annuity contracts.....	17,480,571	17,480,571					
2. Considerations for supplementary contracts with life contingencies.....	0	XXX	XXX	XXX	XXX		XXX
3. Net investment income.....	11,088,967	11,088,967					
4. Amortization of Interest Maintenance Reserve (IMR).....	0						
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0						
6. Commissions and expense allowances on reinsurance ceded.....	0						
7. Reserve adjustments on reinsurance ceded.....	0						
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0						
8.2 Charges and fees for deposit-type contracts.....	0						
8.3 Aggregate write-ins for miscellaneous income.....	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	28,569,538	28,569,538	0	0	0	0	0
10. Death benefits.....	0						
11. Matured endowments (excluding guaranteed annual pure endowments).....	0						
12. Annuity benefits.....	15,861,490	15,861,490					
13. Disability benefits and benefits under accident and health contracts.....	0						
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0						
15. Surrender benefits and withdrawals for life contracts.....	0						
16. Group conversions.....	0						
17. Interest and adjustments on contract or deposit-type contract funds.....	760,700	760,700					
18. Payments on supplementary contracts with life contingencies.....	0						
19. Increase in aggregate reserves for life and accident and health contracts.....	9,684,039	9,684,039					
20. Totals (Lines 10 to 19).....	26,306,229	26,306,229	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	264,334	264,334					
22. Commissions and expense allowances on reinsurance assumed.....	0						
23. General insurance expenses.....	1,601,483	1,601,483					
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	0						
25. Increase in loading on deferred and uncollected premiums.....	0						
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0						
27. Aggregate write-ins for deductions.....	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	28,172,046	28,172,046	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	397,492	397,492	0	0	0	0	0
30. Dividends to policyholders and refunds to members.....	0						
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	397,492	397,492	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	0						
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	397,492	397,492	0	0	0	0	0
34. Policies/certificates in force end of year.....	0						

## DETAILS OF WRITE-INS

08.301. ....	0						
08.302. ....	0						
08.303. ....	0						
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	0	0	0	0	0	0	0
2701. ....	0						
2702. ....	0						
2703. ....	0						
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0	0	0	0	0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above).....	0	0	0	0	0	0	0

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

**Analysis of Operations by Lines of Business-Group Annuities**  
**NONE**

**Analysis of Operations by Lines of Business-A&H**  
**NONE**

## ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE (a)

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life with Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (b) (N/A Fraternal)	11 Other Individual Life	12 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)												
1. Reserve December 31, prior year.....	79,496,676			79,496,676								
2. Tabular net premiums or considerations.....	1,442,111			1,442,111								
3. Present value of disability claims incurred.....	0											
4. Tabular interest.....	4,024,032			4,024,032								
5. Tabular less actual reserve released.....	0											
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).....	84,962,819	0	84,962,819	0	0	0	0	0	0	0	0	0
9. Tabular cost.....	3,495,124			3,495,124								
10. Reserves released by death.....	727,402			727,402								
11. Reserves released by other terminations (net).....	531,635			531,635								
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	0											
13. Net transfers to or (from) Separate Accounts.....	0											
14. Total deductions (Lines 9 to 13).....	4,754,161	0	4,754,161	0	0	0	0	0	0	0	0	0
15. Reserve December 31, current year.....	80,208,658	0	80,208,658	0	0	0	0	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>												
16. CSA ending balance December 31, current year.....	0											
17. Amount available for policy loans based upon Line 16 CSV.....	0											

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group).

## ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP LIFE INSURANCE (a)

(N/A Fraternal)

	1 Total	2 Whole Life	3 Term Life	4 Variable Life	5 Universal Life	6 Variable Universal Life	7 Credit Life (b)	8 Other Group Life	9 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b>									
(Net of Reinsurance Ceded)									
1. Reserve December 31, prior year.....	0								
2. Tabular net premiums or considerations.....	0								
3. Present value of disability claims incurred.....	0								
4. Tabular interest.....	0								
5. Tabular less actual reserve released.....	0								
6. Increase in reserve on account of change in valuation basis.....	0								
7. Other increases (net).....	0								
8. Totals (Lines 1 to 7).....	0				0	0	0	0	0
9. Tabular cost.....	0								
10. Reserves released by death.....	0								
11. Reserves released by other terminations (net).....	0								
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	0								
13. Net transfers to or (from) Separate Accounts.....	0								
14. Total deductions (Lines 9 to 13).....	0	0	0	0	0	0	0	0	0
15. Reserve December 31, current year.....	0	0	0	0	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>									
16. CSA ending balance December 31, current year.....	0								
17. Amount available for policy loans based upon Line 16 CSV.....	0								

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group).

## ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL ANNUITIES (a)

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities without Guarantees	Life Contingent Payout (Immediate and Annuitizations)	Other Annuities
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)							
1. Reserve December 31, prior year.....	235,668,585	235,668,585					
2. Tabular net premiums or considerations.....	17,480,572	17,480,572					
3. Present value of disability claims incurred.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest.....	8,314,465	8,314,465					
5. Tabular less actual reserve released.....	(249,508)	(249,508)					
6. Increase in reserve on account of change in valuation basis.....	0						
7. Other increases (net).....	0						
8. Totals (Lines 1 to 7).....	261,214,114	261,214,114	0	0	0	0	0
9. Tabular cost.....	0						
10. Reserves released by death.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net).....	0						
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	15,861,490	15,861,490					
13. Net transfers to or (from) Separate Accounts.....	0						
14. Total deductions (Lines 9 to 13).....	15,861,490	15,861,490	0	0	0	0	0
15. Reserve December 31, current year.....	245,352,624	245,352,624	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>							
16. CSV ending balance, December 31, current year.....	0						
17. Amount available for policy loans based upon Line 16 CSV.....	0						

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

## ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP ANNUITIES (a)

(N/A Fraternal)

	1 Total	Deferred				6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
		2 Fixed Annuities	3 Indexed Annuities	4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)							
1. Reserve December 31, prior year.....	0						
2. Tabular net premiums or considerations.....	0						
3. Present value of disability claims incurred.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest.....	0						
5. Tabular less actual reserve released.....	0						
6. Increase in reserve on account of change in valuation basis.....	0						
7. Other increases (net).....	0						
8. Totals (Lines 1 to 7).....	0	0	0	0	0	0	0
9. Tabular cost.....	0						
10. Reserves released by death.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net).....	0						
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	0						
13. Net transfers to or (from) Separate Accounts.....	0						
14. Total deductions (Lines 9 to 13).....	0	0	0	0	0	0	0
15. Reserve December 31, current year.....	0	0	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>							
16. CSV ending balance, December 31, current year.....	0						
17. Amount available for policy loans based upon Line 16 CSV.....	0						

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

7.4  
NONE

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

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....464,793	.....472,440
1.1 Bonds exempt from U.S. tax.....	(a).....	.....
1.2 Other bonds (unaffiliated).....	(a).....16,516,452	.....16,709,747
1.3 Bonds of affiliates.....	(a).....	.....
2.1 Preferred stocks (unaffiliated).....	(b).....	.....
2.11 Preferred stocks of affiliates.....	(b).....	.....
2.2 Common stocks (unaffiliated).....	.....84,063	.....84,063
2.21 Common stocks of affiliates.....	.....125,000	.....125,000
3. Mortgage loans.....	(c).....17,971	.....17,971
4. Real estate.....	(d).....324,859	.....324,859
5. Contract loans.....	.....65,527	.....65,527
6. Cash, cash equivalents and short-term investments.....	(e).....298,373	.....298,373
7. Derivative instruments.....	(f).....	.....
8. Other invested assets.....	.....47,464	.....47,464
9. Aggregate write-ins for investment income.....	.....(946,134)	.....(946,134)
10. Total gross investment income.....	.....16,998,368	.....17,199,310
11. Investment expenses.....	(g).....1,230,972	.....
12. Investment taxes, licenses and fees, excluding federal income taxes.....	(g).....	.....64,079
13. Interest expense.....	(h).....	.....
14. Depreciation on real estate and other invested assets.....	(i).....62,877	.....
15. Aggregate write-ins for deductions from investment income.....	.....0	.....
16. Total deductions (Lines 11 through 15).....	.....1,357,928	.....
17. Net investment income (Line 10 minus Line 16).....	.....15,841,382	.....

**DETAILS OF WRITE-INS**

0901. PENSION FUND EXPENSE.....	.....(946,134)	.....(946,134)
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).....	.....(946,134)	.....(946,134)
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 \$....133,125 accrual of discount less \$....1,402,529 amortization of premium and less \$....414,346 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$....145,032 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 \$....62,877 depreciation on real estate and \$.....0 depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....	.....0	.....	.....0	.....	.....
1.1 Bonds exempt from U.S. tax.....	.....89,654	.....	.....89,654	.....	.....
1.2 Other bonds (unaffiliated).....	.....	.....	.....0	.....	.....
1.3 Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1 Preferred stocks (unaffiliated).....	.....	.....	.....0	.....	.....
2.11 Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2 Common stocks (unaffiliated).....	.....23,940	.....	.....23,940	.....28,369	.....
2.21 Common stocks of affiliates.....	.....	.....	.....0	.....2,534,113	.....
3. Mortgage loans.....	.....	.....	.....0	.....	.....
4. Real estate.....	.....6,927,605	.....	.....6,927,605	.....	.....
5. Contract loans.....	.....	.....	.....0	.....	.....
6. Cash, cash equivalents and short-term investments.....	.....65,167	.....	.....65,167	.....	.....
7. Derivative instruments.....	.....	.....	.....0	.....	.....
8. Other invested assets.....	.....	.....	.....0	.....625,908	.....
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	.....7,106,366	.....0	.....7,106,366	.....3,188,390	.....0

**DETAILS OF WRITE-INS**

0901. ....	.....0	.....	.....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

**FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**EXHIBIT 1 - PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**

	1 Total	2 Industrial Life	Insurance									12 Fraternal (Fraternal Benefit Societies Only)	
			Group			Accident and Health			11 Aggregate of All Other Lines of Business				
			3 Life Insurance	4 Individual Annuities	5 Credit Life (Group and Individual)	6 Life Insurance	7 Annuities	8 Group	9 Credit (Group & Individual)	10 Other			
<b>FIRST YEAR (other than single)</b>													
1. Uncollected.....	0												
2. Deferred and accrued.....	0												
3. Deferred, accrued and uncollected:													
3.1 Direct.....	0												
3.2 Reinsurance assumed.....	0												
3.3 Reinsurance ceded.....	0												
3.4 Net (Line 1 + Line 2).....	0	0	0	0	0	0	0	0	0	0	0	0	
4. Advance.....	0												
5. Line 3.4 - Line 4.....	0	0	0	0	0	0	0	0	0	0	0	0	
6. Collected during year:													
6.1 Direct.....	9,084,343			25,066	9,059,277								
6.2 Reinsurance assumed.....	0												
6.3 Reinsurance ceded.....	0												
6.4 Net.....	9,084,343	0	25,066	9,059,277	0	0	0	0	0	0	0	0	
7. Line 5 + Line 6.4.....	9,084,343	0	25,066	9,059,277	0	0	0	0	0	0	0	0	
8. Prior year (uncollected + deferred and accrued - advance).....	0												
9. First year premiums and considerations:													
9.1 Direct.....	9,084,343		25,066	9,059,277									
9.2 Reinsurance assumed.....	0												
9.3 Reinsurance ceded.....	0												
9.4 Net (Line 7 - Line 8).....	9,084,343	0	25,066	9,059,277	0	0	0	0	0	0	0	0	
10. Single premiums and considerations:													
10.1 Direct.....	1,147,462			694,966	452,496								
10.2 Reinsurance assumed.....	0												
10.3 Reinsurance ceded.....	0												
10.4 Net.....	1,147,462	0	694,966	452,496	0	0	0	0	0	0	0	0	
11. <b>RENEWAL</b>													
11. Uncollected.....	20,400			20,400									
12. Deferred and accrued.....	0												
13. Deferred, accrued and uncollected:													
13.1 Direct.....	20,400			20,400									
13.2 Reinsurance assumed.....	0												
13.3 Reinsurance ceded.....	0												
13.4 Net (Line 11 + Line 12).....	20,400	0	20,400	0	0	0	0	0	0	0	0	0	
14. Advance.....	53,414			53,414									
15. Line 13.4 - Line 14.....	(33,014)	0	(33,014)	0	0	0	0	0	0	0	0	0	
16. Collected during year:													
16.1 Direct.....	8,757,144			788,345	7,968,799								
16.2 Reinsurance assumed.....	0												
16.3 Reinsurance ceded.....	37,427			37,427									
16.4 Net.....	8,719,717	0	750,918	7,968,799	0	0	0	0	0	0	0	0	
17. Line 15 + Line 16.4.....	8,686,703	0	717,904	7,968,799	0	0	0	0	0	0	0	0	
18. Prior year (uncollected + deferred and accrued - advance).....	(25,860)		(25,860)										
19. Renewal premiums and considerations:													
19.1 Direct.....	8,749,990			781,191	7,968,799								
19.2 Reinsurance assumed.....	0												
19.3 Reinsurance ceded.....	37,427			37,427									
19.4 Net (Line 17 - Line 18).....	8,712,563	0	743,764	7,968,799	0	0	0	0	0	0	0	0	
20. <b>TOTAL</b>													
20. Total premiums and annuity considerations:													
20.1 Direct.....	18,981,795	0	1,501,223	17,480,572	0	0	0	0	0	0	0	0	
20.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0	0	
20.3 Reinsurance ceded.....	37,427	0	37,427	0	0	0	0	0	0	0	0	0	
20.4 Net (Lines 9.4 + 10.4 + 19.4).....	18,944,368	0	1,463,796	17,480,572	0	0	0	0	0	0	0	0	

**EXHIBIT 1 - PART 2 - POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)**

	1	2	Insurance								12 Fraternal (Fraternal Benefit Societies Only)	
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health				
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group & Individual)	10 Other		
	Total	Industrial Life										
<b>POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)</b>												
21. To pay renewal premiums.....	1,322		1,322									
22. All other.....	423,515		423,515									
<b>REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED</b>												
23. First year (other than single):												
23.1 Reinsurance ceded.....	0											
23.2 Reinsurance assumed.....	0											
23.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0	
24. Single:												
24.1 Reinsurance ceded.....	0											
24.2 Reinsurance assumed.....	0											
24.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0	
25. Renewal:												
25.1 Reinsurance ceded.....	0											
25.2 Reinsurance assumed.....	0											
25.3 Net ceded less assumed.....	0	0	0	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	0	0	0	
26.2 Reinsurance assumed (Page 6, Line 22).....	0	0	0	0	0	0	0	0	0	0	0	
26.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0	
<b>COMMISSIONS INCURRED (direct business only)</b>												
27. First year (other than single).....	265,704		44,100	221,604								
28. Single.....	5,627		5,627									
29. Renewal.....	46,245		3,514	42,731								
30. Deposit-type contract funds.....	0											
31. Totals (to agree with Page 6, Line 21).....	317,576	0	53,241	264,335	0	0	0	0	0	0	0	

Annual Statement for the year 2019 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**EXHIBIT 2 - GENERAL EXPENSES**

	Insurance			5	6	7	
	1 Life	Accident and Health			6	7	
		2 Cost Containment	3 All Other				
1. Rent.....	133,291				2,000	15,000	
2. Salaries and wages.....	1,148,844				52,800	36,000	
3.11 Contributions for benefit plans for employees.....	198,600					20,000	
3.12 Contributions for benefit plans for agents.....						0	
3.21 Payments to employees under non-funded benefit plans.....						0	
3.22 Payments to agents under non-funded benefit plans.....						0	
3.31 Other employee welfare.....	20,660					20,660	
3.32 Other agent welfare.....						0	
4.1 Legal fees and expenses.....	78,697					1,000	
4.2 Medical examination fees.....	7,559					7,559	
4.3 Inspection report fees.....						0	
4.4 Fees of public accountants and consulting actuaries.....	264,002					10,000	
4.5 Expense of investigation and settlement of policy claims.....						274,002	
5.1 Traveling expenses.....	74,611				5,000	22,000	
5.2 Advertising.....	27,386					1,000	
5.3 Postage, express, telegraph and telephone.....	87,597					15,000	
5.4 Printing and stationery.....	47,213					6,000	
5.5 Cost or depreciation of furniture and equipment.....	9,146					25,576	
5.6 Rental of equipment.....	25,563					25,563	
5.7 Cost or depreciation of EDP equipment and software.....	97,211					5,000	
6.1 Books and periodicals.....	4,031					2,800	
6.2 Bureau and association fees.....	12,205					2,050	
6.3 Insurance, except on real estate.....	26,366					14,255	
6.4 Miscellaneous losses.....						26,366	
6.5 Collection and bank service charges.....	24,851					0	
6.6 Sundry general expenses.....					114,324	114,324	
6.7 Group service and administration fees.....						0	
6.8 Reimbursements by uninsured plans.....						0	
7.1 Agency expense allowance.....						0	
7.2 Agents' balances charged off (less \$.....0 recovered).....						0	
7.3 Agency conferences other than local meetings.....						0	
8.1 Official publication (Fraternal Benefit Societies Only).....	XXX	XXX	XXX	XXX	XXX	135,292	
8.2 Expenses of supreme lodge meetings (Fraternal Benefit Soc. Only).....	XXX	XXX	XXX	XXX	XXX	300,000	
9.1 Real estate expenses.....					221,616	4,778	
9.2 Investment expenses not included elsewhere.....					.835,232	835,232	
9.3 Aggregate write-ins for expenses.....	0	0	0	0	0	405,982	
10. General expenses Incurred.....	2,287,833	0	0	0	1,230,972	(b) 1,007,478	
11. General expenses unpaid December 31, prior year.....						76,626	
12. General expenses unpaid December 31, current year.....						77,678	
13. Amounts receivable relating to uninsured plans, prior year.....						0	
14. Amounts receivable relating to uninsured plans, current year.....						0	
15. General expenses paid during year (Lines 10+11-12-13+14).....	2,287,833	0	0	0	1,230,972	1,006,426	
<b>DETAILS OF WRITE-INS</b>							
09.301. Scholarships, Donations, Athletics, Fraternal.....						405,982	
09.302. ....						0	
09.303. ....						0	
09.398. Summary of remaining write-ins for Line 9.3 from overflow page.....	0	0	0	0	0	0	
09.399. Totals (Lines 09.301 through 09.303 plus 09.398)(Line 9.3 above).....	0	0	0	0	0	405,982	

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

(b) Show the distribution of this amount in the following categories (Fraternal Benefit Societies Only):

1. Charitable \$....376,797; 2. Institutional \$.....0; 3. Recreational and Health \$....21,157; 4. Educational \$....186,384  
 5. Religious \$....8,060; 6. Membership \$....415,081; 7. Other \$.....0; 8. Total \$....1,007,479

### EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)

	Insurance			4	5	6
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes.....				.64,079		64,079
2. State insurance department licenses and fees.....	24,742					24,742
3. State taxes on premiums.....						0
4. Other state taxes, including \$.....0 for employee benefits.....	2,933					2,933
5. U.S. Social Security taxes.....	90,613					90,613
6. All other taxes.....						0
7. Taxes, licenses and fees incurred.....	118,288	0	0	.64,079	0	182,367
8. Taxes, licenses and fees unpaid December 31, prior year.....						18,683
9. Taxes, licenses and fees unpaid December 31, current year.....						18,683
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9).....	118,288	0	0	.64,079	0	182,367

### EXHIBIT 4 - DIVIDENDS OR REFUNDS

	1 Life	2 Accident and Health
1. Applied to pay renewal premiums.....		1,322
2. Applied to shorten the endowment or premium-paying period.....		
3. Applied to provide paid-up additions.....		406,945
4. Applied to provide paid-up annuities.....		
5. Total Lines 1 through 4.....		408,267
6. Paid-in cash.....		4,715
7. Left on deposit.....		11,854
8. Aggregate write-ins for dividend or refund options.....		0
9. Total Lines 5 through 8.....		424,837
10. Amount due and unpaid.....		400,000
11. Provision for dividends or refunds payable in the following calendar year.....		
12. Terminal dividends.....		
13. Provision for deferred dividend contracts.....		
14. Amount provisionally held for deferred dividend contracts not included in Line 13.....		
15. Total Lines 10 through 14.....		400,000
16. Total from prior year.....		400,000
17. Total dividends or refunds (Lines 9 + 15 - 16).....		424,837

**DETAILS OF WRITE-INS**

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

Annual Statement for the year 2019 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS**

1 Valuation Standard	2 Total	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
<b>Life Insurance:</b>					
0100001. AE 4%, 3.5%, 3%.....	15,307		15,307		
0100002. AM(5) 3%.....	424,305		424,305		
0100003. 41 CSO 2.5%.....	6,174		6,174		
0100004. 58 CSO 3% & 4.5%.....	2,760,480		2,760,480		
0100005. 80 CSO 4.5%.....	19,068,000		19,068,000		
0100006. 80 CSO 5%.....	1,516,621		1,516,621		
0100007. 80 CSO 5.5%.....	40,523,162		40,523,162		
0100008. 80 CSO 6%.....	7,967,736		7,967,736		
0100009. 2001 CSO 4.5%.....	195,541		195,541		
0100010. 2001 CSO 4.0%.....	5,268,435		5,268,435		
0100011. 2001 CSO 3.5%.....	2,245,156		2,245,156		
0100012. UNEARNED PREMIUM RESERVE.....	212,318		212,318		
0100013. REINSURANCE RESERVE CREDIT.....	(29,261)		(29,261)		
0199997. Totals (Gross).....	80,173,974	0	80,173,974	0	0
0199999. Totals (Net).....	80,173,974	0	80,173,974	0	0
<b>Annuities (excluding supplementary contracts with life contingencies):</b>					
0200001. SPDA, FPDA.....	236,114,536	XXX	236,114,536	XXX	
0200002. SPIA.....	823,382	XXX	823,382	XXX	
0200003. HOME OFFICE PENSION.....	8,414,706	XXX	8,414,706	XXX	
0299997. Totals (Gross).....	245,352,624	XXX	245,352,624	XXX	0
0299999. Totals (Net).....	245,352,624	XXX	245,352,624	XXX	0
<b>Disability - Active Lives:</b>					
0500001. DIS ACTIVE.....	30,000		30,000		
0599997. Totals (Gross).....	30,000	0	30,000	0	0
0599999. Totals (Net).....	30,000	0	30,000	0	0
<b>Disability - Disabled Lives:</b>					
0600001. DIS DISABLED 52 DIS & 58 CSO 2.5%.....	4,683		4,683		
0699997. Totals (Gross).....	4,683	0	4,683	0	0
0699999. Totals (Net).....	4,683	0	4,683	0	0
9999999. Totals (Net) - Page 3, Line 1.....	325,561,281	0	325,561,281	0	0

Annual Statement for the year 2019 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**EXHIBIT 5 - INTERROGATORIES**

1.1 Has the reporting entity ever issued both participating and non-participating contracts?  
 1.2 If not, state which kind is issued

Yes [ ] No [X]

2.1 Does the reporting entity at present issue both participating and non-participating contracts?  
 2.2 If not, state which kind is issued

Yes [ ] No [X]

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?  
 If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.

Yes [X] No [ ]

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

Yes [ ] No [X]

4.1 Amount of insurance:

\$.....

4.2 Amount of reserve:

\$.....

4.3 Basis of reserve:

4.4 Basis of regular assessments:

4.5 Basis of special assessments:

4.6 Assessments collected during year:

\$.....

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

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

Yes [ ] No [X]

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

\$.....

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

\$.....

Attach statement of methods employed in their valuation.

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

Yes [ ] No [X]

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

\$.....

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

7.3 State the amount of reserves established for this business:

\$.....

7.4 Identify where the reserves are reported in the blank.

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

Yes [ ] No [X]

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

\$.....

8.2 State the amount of reserves established for this business:

\$.....

8.3 Identify where the reserves are reported in the blank:

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

Yes [ ] No [X]

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

\$.....

9.2 State the amount of reserves established for this business:

\$.....

9.3 Identify where the reserves are reported in the blank:

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

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

**NONE**

## EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS - ACCIDENT AND HEALTH (a)

	1	Comprehensive		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health
<b>ACTIVE LIFE RESERVE</b>													
1. Unearned premium reserves.....	0												
2. Additional contract reserves (b).....	0												
3. Additional actuarial reserves - Asset/Liability analysis.....	0												
4. Reserve for future contingent benefits.....	0												
5. Reserve for rate credits.....	0												
6. Aggregate write-ins for reserves.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Totals (Gross).....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Reinsurance ceded.....	0												
9. Totals (Net).....	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CLAIM RESERVE</b>													
10. Present value of amounts not yet due on claims.....	0												
11. Additional actuarial reserves - Asset/Liability analysis.....	0												
12. Reserve for future contingent benefits.....	0												
13. Aggregate write-ins for reserves.....	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Gross).....	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Reinsurance ceded.....	0												
16. Totals (Net).....	0	0	0	0	0	0	0	0	0	0	0	0	0
17. TOTALS (Net).....	0	0	0	0	0	0	0	0	0	0	0	0	0
18. TABULAR FUND INTEREST.....	0												

NONE

## DETAILS OF WRITE-INS

0601.....	0												
0602.....	0												
0603.....	0												
0698. Summary of remaining write-ins for Line 6 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....	0	0	0	0	0	0	0	0	0	0	0	0	0
1301.....	0												
1302.....	0												
1303.....	0												
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0	0
1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above).....	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

Annual Statement for the year 2019 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**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 the beginning of the year before reinsurance.....	28,783,032		2,264,675		271,597	26,246,760
2. Deposits received during the year.....	9,449,793		1,422,210		27,583	8,000,000
3. Investment earnings credited to the account.....	0					
4. Other net change in reserves.....	641,658		641,658			
5. Fees and other charges assessed.....	0					
6. Surrender charges.....	0					
7. Net surrender or withdrawal payments.....	2,607,566		760,700		12,914	1,833,952
8. Other net transfers to or (from) Separate Accounts.....	0					
9. Balance at the end of current year before reinsurance (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7 - 8).....	36,266,916	0	3,567,843	0	286,265	32,412,808
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 the current year after reinsurance (Lines 9 + 13).....	36,266,916	0	3,567,843	0	286,265	32,412,808

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

## PART 1 - Liability End of Current Year

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct.....	276,635			276,635							
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	276,635	0	276,635	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	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 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	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0
3. Incurred but unreported:											
3.1 Direct.....	23,365			23,365							
3.2 Reinsurance assumed.....	0										
3.3 Reinsurance ceded.....	0										
3.4 Net.....	23,365	0	(b) 23,365	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0
4. Totals:											
4.1 Direct.....	300,000	0	300,000	0	0	0	0	0	0	0	0
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
4.4 Net.....	300,000	(a) 0	(a) 300,000	0	0	0	(a) 0	0	0	0	0

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

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

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

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

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

## PART 2 - Incurred During the Year

	1 Total	2 Industrial Life (a)	Ordinary			6 Supplementary Contracts	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct.....	18,808,779		2,947,289	15,861,490							
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	(d) 18,808,779	0	2,947,289	15,861,490	0	0	0	0	0	0	0
2. Liability December 31, current year from Part 1:											
2.1 Direct.....	300,000	0	300,000	0	0	0	0	0	0	0	0
2.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
2.4 Net.....	300,000	0	300,000	0	0	0	0	0	0	0	0
3. Amounts recoverable from reinsurers Dec. 31, current year.....	0										
4. Liability December 31, prior year:											
4.1 Direct.....	300,000		300,000								
4.2 Reinsurance assumed.....	0										
4.3 Reinsurance ceded.....	0										
4.4 Net.....	300,000	0	300,000	0	0	0	0	0	0	0	0
5. Amounts recoverable from reinsurers Dec. 31, prior year.....	0										
6. Incurred benefits:											
6.1 Direct.....	18,808,779	0	2,947,289	15,861,490	0	0	0	0	0	0	0
6.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
6.4 Net.....	18,808,779	0	2,947,289	15,861,490	0	0	0	0	0	0	0

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

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

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

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

Annual Statement for the year 2019 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**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.....			0
21. Furniture and equipment, including health care delivery assets.....	1,946	4,865	2,919
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0
23. Receivables from parent, subsidiaries and affiliates.....			0
24. Health care and other amounts receivable.....			0
25. Aggregate write-ins for other-than-invested assets.....	550	550	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	2,496	5,415	2,919
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	2,496	5,415	2,919

**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. Deposits 550.....	550	550	0
2502.....			0
2503.....			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	550	550	0

## NOTES TO FINANCIAL STATEMENTS

### Note 1 – Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

	SSAP #	F/S Page	F/S Line #	2019	2018
<b>NET INCOME</b>					
(1) Company state basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ 7,852,535	\$ 1,632,068
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 7,852,535	\$ 1,632,068
<b>SURPLUS</b>					
(5) Company state basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 42,148,006	\$ 32,374,585
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 42,148,006	\$ 32,374,585

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

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

#### C. Accounting Policy

Life premiums are recognized as income over the premium paying period of the related policies. Annuity considerations are recognized as revenue when received. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. The amount of dividends to be paid to policy holders is determined annually by the Society's Board of Directors. The aggregate amount of policyholders' dividends is related to actual interest, mortality, morbidity, and expense experience for the year and judgment as to the appropriate level of statutory surplus to be retained by the Society. In addition, the Society uses the following accounting policies:

- (1) Basis for Short-Term Investments  
Short-term investments are stated at amortized cost.
- (2) Basis for Bonds and Amortization Schedule  
Bonds: Not backed by other loans at amortized cost using the interest method: loan-backed bonds and structured securities at amortized cost using the interest method including anticipate prepayments at the date of purchase; significant changes in estimated cash flows from the original purchase assumptions are accounted for using the composite method. Bonds rated NAIC Class 6 are valued at market.
- (3) Basis for Common Stocks  
At market value, except that investments in stocks of uncombined subsidiaries and affiliates in which the Society has an interest of 20% or more are carried on the equity basis.
- (4) Basis for Preferred Stocks  
Cost or Amortized Value in accordance with NAIC procedure.
- (5) Basis for Mortgage Loans  
Mortgage Loan or Real Estate: Aggregate unpaid balance. Other Investments: Equity basis.
- (6) Basis for Loan-Backed Securities and Adjustment Methodology  
Loan backed securities are handled the same as bonds as described in item C(2) above.
- (7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities  
The Society has a wholly-owned subsidiary; Jednota, Inc.
- (8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities  
The Society has ownership interests in joint ventures as shown on Schedule BA Part 1.
- (9) Accounting Policies for Derivatives  
The Society has no derivatives.
- (10) Anticipated Investment Income Used in Premium Deficiency Calculation  
The Society does not calculate Premium Deficiency.
- (11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses  
The Society has neither Individual Accident and Health Contracts; nor Group Accident and Health Contracts. The Society is not currently marketing individual accident and health contracts.
- (12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period  
The Society has not modified its capitalization policy from the prior period.
- (13) Method Used to Estimate Pharmaceutical Rebate Receivables

## **NOTES TO FINANCIAL STATEMENTS**

The Society does not participate in Pharmaceutical Rebate Receivables.

**D. Going Concern**

After carefully evaluating the Society's ability to continue as a going concern, Society management was not aware of any conditions or events which raised substantial doubts concerning the Society's ability to continue as a going concern as of the date of the filing of this statement.

**Note 2 – Accounting Changes and Correction of Errors**

DURING THE CURRENT YEAR'S FINANCIAL STATEMENT PREPARATION THERE WERE NO ADJUSTMENTS

**Note 3 – Business Combinations and Goodwill**

A.- D. THE SOCIETY HAS NEITHER BUSINESS COMBINATIONS NOR TAKEN CREDIT FOR GOODWILL.

**Note 4 – Discontinued Operations**

A.- D. Discontinued Operation Disposed of or Classified as Held for Sale

THE SOCIETY HAS NOT DISCONTINUED OPERATIONS.

**Note 5 – Investments**

A. Mortgage Loans, including Mezzanine Real Estate Loans

THE SOCIETY ISSUED ONE MORTGAGE LOAN IN 2019 FOR \$80,000.

(1) Maximum and Minimum Lending Rates

(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:

	Current Year	Prior Year
	\$	\$
(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total		
(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in which the Insurer is a Participant or Co-Lender in a Mortgage Loan Agreement: NONE		
(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: NONE		
(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: NONE		
(7) Allowances for Credit Losses: NONE		
(8) Mortgage Loans Derecognized as a Result of Foreclosure: NONE		
(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  
Repurchase Transactions – Cash Taker – Overview of Secured Borrowing Transactions 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

**NOTES TO FINANCIAL STATEMENTS**

(1 - 5) 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. 5GI Securities NONE
- P. Short Sales NONE
- Q. Prepayment Penalty and Acceleration Fees NONE

**Note 6 – Joint Ventures, Partnerships and Limited Liability Companies**

- A. Investments in Joint Ventures, Partnerships and Limited Liability Companies that Exceed 10% of Ownership  
THE SOCIETY HAS NO INVESTMENTS IN JOINT VENTURES, PARTNERSHIPS, OR LIMITED LIABILITY COMPANIES.
- B. Investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies

**Note 7 – Investment Income**

- A. The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued:  
MORTGAGE LOANS; ON LOANS IN FORECLOSURE OR DELINQUENT FOR MORE THAN 90 DAYS.  
BONDS: WHERE THE COLLECTION OF INTEREST IS UNCERTAIN AND/OR THE BOND IS IN DEFAULT.  
REAL ESTATE: WHERE RENT IS IN ARREARS THREE OR MORE MONTHS.
- B. The total amount excluded:  
-0-

**Note 8 – Derivative Instruments**

A - H. THE SOCIETY HAS NO DERIVATIVE INSTRUMENTS AS OF DECEMBER 31, 2019.

**Note 9 – Income Taxes**

A. - I. THE SOCIETY, AS A FRATERNAL BENEFIT SOCIETY, IS NOT SUBJECT TO INCOME TAXES.

**Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

A.- O. THE SOCIETY IS NOT DIRECTLY OR INDIRECTLY OWNED OR CONTROLLED BY ANY OTHER COMPANY, CORPORATION, GROUP OF COMPANIES, PARTNERSHIPS, OR INDIVIDUAL.

**Note 11 – Debt**

- A. Debt Including Capital Notes  
THE SOCIETY HAS NO DEBT OR BORROWED MONEY AS OF DECEMBER 31, 2019.
- B. FHLB (Federal Home Loan Bank) Agreements

## (1) Information on the Nature of the Agreement

The Company is a member of the Federal Home Loan Bank (FHLB) of Cincinnati. Through its membership, the Company has conducted business activity (borrowings) with the FHLB. It is part of the Company's strategy to utilize these funds in an investment spread strategy, consistent with its other investment spread operations. The Company has determined the actual/estimated maximum borrowing capacity as \$9,103,835. The Company calculated this amount in accordance with current FHLB capital stock.

## (2) FHLB Capital Stock

## a. Aggregate Totals

## 1. Current Year

	1 Total 2 + 3	2 General Account	3 Separate Accounts

**NOTES TO FINANCIAL STATEMENTS**

(a) Membership Stock – Class A	\$ 619,712	\$ 619,712	\$
(b) Membership Stock – Class B			
(c) Activity Stock	1,013,988	1,013,988	
(d) Excess Stock			
(e) Aggregate Total (a+b+c+d)	\$ 1,633,700	\$ 1,633,700	\$
(f) Actual or estimated borrowing capacity as determined by the insurer	32,413,615	XXX	XXX

## 2. Prior Year-End

	1 Total 2 + 3	2 General Account	3 Separate Accounts
(a) Membership Stock – Class A	\$ 475,148	\$ 475,148	\$
(b) Membership Stock – Class B			
(c) Activity Stock	1,049,903	1,049,903	
(d) Excess Stock	85,149	85,149	
(e) Aggregate Total (a+b+c+d)	\$ 1,610,200	\$ 1,610,200	\$
(f) Actual or estimated borrowing capacity as determined by the insurer	38,392,305	XXX	XXX

11B(2)a1(f) should be equal to or greater than 11B(4)a1(d).

11B(2)a2(f) should be equal to or greater than 11B(4)a2(d).

## b. Membership Stock (Class A and B) Eligible for Redemption and Not Eligible for Redemption

Membership Stock	1 Current Year Total (2+3+4+5+6)	2 Not Eligible for Redemption	Eligible for Redemption			
			3 Less than 6 Months	4 6 Months to Less Than 1 Year	5 1 to Less Than 3 Years	6 3 to 5 Years
1. Class A	\$ 619,712	\$ 619,712	\$	\$	\$	\$
2. Class B	\$	\$	\$	\$	\$	\$

11B(2)B1 current year total (column 1) should equal 11B(2)a1(a) total (column 1).

11B(2)B2 current year total (column 1) should equal 11B(2)a1(b) total (column 1).

## (3) Collateral Pledged to FHLB

## a. Amount Pledged as of Reporting Date

	1 Fair Value	2 Carrying Value	3 Aggregate Total Borrowing
1. Current Year Total General and Separate Accounts Total Collateral Pledged (Lines 2+3)	\$ 46,181,867	\$ 44,136,375	\$ 32,413,615
2. Current Year General Account Total Collateral Pledged	46,181,867	44,136,375	32,413,615
3. Current Year Separate Accounts Total Collateral Pledged			
4. Prior Year-End Total General and Separate Accounts Total Collateral Pledged	\$ 46,594,691	\$ 45,440,156	\$ 26,247,567

11B(3)a1 (columns 1, 2 and 3) should be equal to or less than 11B(3)b1 (columns 1, 2 and 3, respectively).

11B(3)a2 (columns 1, 2 and 3) should be equal to or less than 11B(3)b2 (columns 1, 2 and 3, respectively).

11B(3)a3 (columns 1, 2 and 3) should be equal to or less than 11B(3)b3 (columns 1, 2 and 3, respectively).

11B(3)a4 (columns 1, 2 and 3) should be equal to or less than 11B(3)b4 (columns 1, 2 and 3, respectively).

## b. Maximum Amount Pledged During Reporting Period

	1 Fair Value	2 Carrying Value	3 Amount of Borrowed at Time of Maximum Collateral
1. Current Year Total General and Separate Accounts Maximum Collateral Pledged (Lines 2+3)	\$ 46,594,691	\$ 45,440,156	\$ 32,413,615
2. Current Year General Account Maximum Collateral Pledged	46,594,691	45,440,156	32,413,615
3. Current Year Separate Accounts Maximum Collateral Pledged			
4. Prior Year-End Total General and Separate Accounts Maximum Collateral Pledged	\$ 46,594,691	\$ 45,440,156	\$ 26,247,567

## (4) Borrowing from FHLB

## a. Amount as of the Reporting Date

## 1. Current Year

	1 Total 2 + 3	2 General Account	3 Separate Accounts	4 Funding Agreements Reserves Established
(a) Debt	\$	\$	\$	XXX
(b) Funding Agreements				\$
(c) Other	32,413,615	32,413,615		XXX
(d) Aggregate Total (a+b+c)	\$ 32,413,615	\$ 32,413,615	\$	\$

**NOTES TO FINANCIAL STATEMENTS**

## 2. Prior Year-End

	1 Total 2 + 3	2 General Account	3 Separate Accounts	4 Funding Agreements Reserves Established
(a) Debt	\$	\$	\$	XXX
(b) Funding Agreements				\$
(c) Other	26,247,567	26,247,567		XXX
(d) Aggregate Total (a+b+c)	\$ 26,247,567	\$ 26,247,567	\$ 26,247,567	\$

## b. Maximum Amount During Reporting Period (Current Year)

	1 Total 2 + 3	2 General Account	3 Separate Accounts
1. Debt	\$	\$	\$
2. Funding Agreements			
3. Other	32,582,812	32,582,812	
4. Aggregate Total (Lines 1+2+3)	\$ 32,582,812	\$ 32,582,812	\$ 32,582,812

11B(4)b4 (columns 1, 2 and 3) should be equal to or greater than 11B(4)a1(d) (columns 1, 2 and 3, respectively).

## c. FHLB – Prepayment Obligations

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

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

## A. Defined Benefit Plan

## (1) Change in Benefit Obligation

	Overfunded		Underfunded	
	2019	2018	2019	2018
a. Pension Benefits				
1. Benefit obligation at beginning of year	\$ 7,829,027	\$ 7,342,623	\$	\$
2. Service cost	175,423	153,989		
3. Interest cost	338,356	323,668		
4. Contribution by plan participants				
5. Actuarial gain (loss)	336,791	346,631		
6. Foreign currency exchange rate changes				
7. Benefits paid	618,673	283,860		
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits	8,060,924	7,829,027		
10. Benefit obligation at end of year	\$	\$ 54,024	\$	\$
	Overfunded		Underfunded	
b. Postretirement Benefits	2019	2018	2019	2018
1. Benefit obligation at beginning of year	\$ 413,726	\$ 386,419	\$	\$
2. Service cost	9,179	8,053		
3. Interest cost	20,933	20,287		
4. Contribution by plan participants				
5. Actuarial gain (loss)	30	14,267		
6. Foreign currency exchange rate changes				
7. Benefits paid	15,300	15,300		
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$ 428,568	\$ 413,726	\$	\$
	Overfunded		Underfunded	
c. Special or Contractual Benefits per SSAP No. 11	2019	2018	2019	2018
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				

**NOTES TO FINANCIAL STATEMENTS**

	Overfunded		Underfunded	
	2019	2018	2019	2018
10. Benefit obligation at end of year	\$	\$	\$	\$

## (2) Change in Plan Assets

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
	2019	2018	2019	2018	2019	2018
a. Fair value of plan assets at beginning of year	\$ 8,087,245	\$ 7,677,903	\$	\$	\$	\$
b. Actual return on plan assets	346,134	343,202				
c. Foreign currency exchange rate changes						
d. Reporting entity contribution	600,000	350,000				
e. Plan participants' contributions						
f. Benefits paid	618,673	283,860				
g. Business combinations, divestitures and settlements						
h. Fair value of plan assets at end of year	\$ 8,414,706	\$ 8,087,245	\$	\$	\$	\$

## (3) Funded Status

	Pension Benefits		Postretirement Benefits	
	2019	2018	2019	2018
a. Components				
1. Prepaid benefit costs	\$ 1,662,363	\$ 1,225,914	\$	\$
2. Overfunded plans assets	\$ (1,308,581)	\$ (967,696)	\$	\$
3. Accrued benefit costs	\$	\$	\$ 378,888	\$ 351,663
4. Liability for pension benefits	\$	\$	\$ 49,680	\$ 62,063
b. Assets and liabilities recognized				
1. Assets (nonadmitted)	\$ 353,782	\$ 258,218	\$	\$
2. Liabilities recognized	\$	\$	\$ 428,568	\$ 413,726
c. Unrecognized liabilities	\$	\$	\$	\$

## (4) Components of Net Periodic Benefit Cost

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
	2019	2018	2019	2018	2019	2018
a. Service cost	\$ 175,423	\$ 153,989	\$ 9,179	\$ 8,053	\$	\$
b. Interest cost	338,356	323,668	20,933	19,500		
c. Expected return on plan assets	(363,476)	(346,631)		788		
d. Transition asset or obligation						
e. Gains and losses	13,248		12,413	2,288		
f. Prior service cost or credit						
g. Gain or loss recognized due to a settlement curtailment						
h. Total net periodic benefit cost	\$ 163,551	\$ 131,026	\$ 42,525	\$ 30,629	\$	\$

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

	Pension Benefits		Postretirement Benefits	
	2019	2018	2019	2018
a. Items not yet recognized as a component of net periodic cost – prior year	\$ (967,696)	\$ (671,660)	\$ 62,063	\$ 50,084
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	(340,885)	(296,036)	30	14,267
f. Net gain and loss recognized			(12,413)	(2,288)

**NOTES TO FINANCIAL STATEMENTS**

	Pension Benefits		Postretirement Benefits	
	2019	2018	2019	2018
g. Items not yet recognized as a component of net periodic cost – current period	\$ (1,308,581)	\$ (967,696)	\$ 49,680	\$ 62,063

(6) Amounts in Unassigned Funds (Surplus) That Have Not Yet Been Recognized as Components of Net Periodic Benefit Cost

	Pension Benefits		Postretirement Benefits	
	2019	2018	2019	2018
a. Net transition asset or obligation	\$	\$	\$	\$
b. Net prior service cost or credit	\$	\$	\$	\$
c. Net recognized gains and losses	\$ (1,308,581)	\$ (967,696)	\$ 49,680	\$ 62,063

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

	2019	2018
a. Weighted-average discount rate	0.5%	0.5%
b. Expected long-term rate of return on plan assets	0.5%	0.5%
c. Rate of compensation increase	0.3%	0.3%
d. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)	%	%
Weighted-average assumptions used to determine projected benefit obligations as of December 31		
e. Weighted-average discount rate	0.5%	0.5%
f. Rate of compensation increase	0.3%	0.3%
g. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)	%	%

(8) Accumulated Benefit Obligation for Defined Benefit Pension Plans

\$7,449,573 IN 2018 - \$7,079,654 in 2017

(9) For Postretirement Benefits Other Than Pensions, the Assumed Health Care Cost Trend Rate(s)  
N/A

(10) 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. 2020	\$ 469,380
b. 2021	\$ 457,584
c. 2022	\$ 486,601
d. 2023	\$ 569,234
e. 2024	\$ 558,169
f. 2025 through 20	\$ 2,794,255

f. years 2025 thru 2029

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

The Society does not have any regulatory contribution requirements for 2019, however, the Society currently intends to make voluntary contributions to the defined benefit pension plan in an amount that is considered appropriate.

(12) Amounts and Types of Securities Included in Plan Assets

The amount of pension fund invested in the Employer's Group Annuity is: 2018=\$8,087,245, 2019 = \$8,414,706

(13) Alternative Method Used to Amortize Prior Service Amounts or Net Gains and Losses

(14) Substantive Comment Used to Account for Benefit Obligation

(15) Cost of Providing Special or Contractual Termination Benefits Recognized

(16) Reasons for Significant Gains/Losses Related to Changes in Defined Benefit Obligation and any Other Significant Change in the Benefit Obligations or Plan Assets Not Otherwise Apparent

(17) Accumulated Postretirement and Pension Benefit Obligation and Fair Value of Plan Assets for Defined Postretirement and Pension Benefit Plans

(18) Full Transition Surplus Impact of SSAP 102

B. Investment Policies and Strategies

**NOTES TO FINANCIAL STATEMENTS**

## C. Fair Value of Plan Assets

## (1) Fair Value Measurements of Plan Assets at Reporting Date

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
	\$	\$	\$	\$
Total Plan Assets	\$	\$	\$	\$

Allocation estimate based on beginning of year pattern. End of year pattern not available before completion of report.

## (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

## F. Multiemployer Plans

## G. Consolidated/Holding Company Plans

## H. Postemployment Benefits and Compensated Absences

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

## (1 - 3) NONE

## **NOTES TO FINANCIAL STATEMENTS**

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

(1 - 13) THE SOCIETY IS A FRATERNAL BENEFIT SOCIETY AND ISSUES NO STOCK.

### **Note 14 – Liabilities, Contingencies and Assessments**

A.- F. THE SOCIETY HAS NO LIABILITIES, CONTINGENCIES, OR ASSESSMENTS.

### **Note 15 – Leases**

A.- B. THE SOCIETY DOES NOT HAVE ANY MATERIAL LEASE OBLIGATIONS AT THIS TIME

### **Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**

1.- 4. THE SOCIETY HAD NO OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCERN OF CREDIT RISKS.

### **Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**

A. - C. NONE

### **Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans**

A.- C. NONE

### **Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**

THE SOCIETY HAS NO DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS.

### **Note 20 – Fair Value Measurements**

#### A. 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 STOCK	\$ 1,678,940	\$	\$	\$	\$ 1,678,940
PARENT SUBSIDIARY	\$ 3,694,098	\$	\$	\$	\$ 3,694,098
Total	\$ 5,373,038	\$	\$	\$	\$ 5,373,038
Liabilities at Fair Value					
	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

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

Description	Beginning Balance at 1/1/2019	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 12/31/2019
a. Assets	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Liabilities	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

##### (3) Policies when Transfers Between Levels are Recognized

NONE

##### (4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

NONE

##### (5) Fair Value Disclosures

NONE

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

NONE

#### C. Fair Value Level

NONE

**NOTES TO FINANCIAL STATEMENTS**

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
	\$	\$	\$	\$	\$	\$	\$

D. NONE  
Not Practicable to Estimate Fair Value

NONE

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
	\$			

E. NONE  
NAV Practical Expedient Investments

NONE

**Note 21 – Other Items**

A.- H. THE SOCIETY HAS NO OTHER ITEMS THAT REQUIRE REPORTING

**Note 22 – Events Subsequent**

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

Subsequent events have been considered through DEC 31 2019 for these statutory financial statements which are to be issued on DEC 31 2019 .

A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?

Yes [ ] No [ X ]

	2019	2018
B. ACA fee assessment payable for the upcoming year	\$	\$
C. ACA fee assessment paid		
D. Premium written subject to ACA 9010 assessment		
E. Total adjusted capital before surplus adjustment (Five-Year Historical Line 30)	\$	
F. Total adjusted capital after surplus adjustment (Five-Year Historical Line 30 minus 22B above)	\$	
G. Authorized control level (Five-Year Historical Line 31)	\$	

H. Would reporting the ACA assessment as of December 31, 2019 have triggered an RBC action level (YES/NO)?

Yes [ ] No [ X ]

**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

## NOTES TO FINANCIAL STATEMENTS

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. \$

(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? \$

**B. Uncollectible Reinsurance**

None

(1) The Company has written off in the current year reinsurance balances due from the entities listed below, the amount of: \$

a. Claims incurred	\$
b. Claims adjustment expenses incurred	\$
c. Premiums earned	\$
d. Other	\$
Entity	Amount
	\$

**C. Commutation of Ceded Reinsurance Reflected in Income and Expenses**

None

The Company has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

(1) Claims incurred	\$
(2) Claims adjustment expenses incurred	\$
(3) Premiums earned	\$
(4) Other	\$
Entity	Amount
	\$

**D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation**      **NONE**

**E. Reinsurance of variable annuity contracts/certificates with an affiliated captive reinsurer**

None

**F. Reinsurance Agreement with Affiliated Captive Reinsurer**

None

**G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework**

None

**Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination**

A.- E. THE SOCIETY HAS NO RETROSPECTIVELY RATED CONTRACTS OR CONTRACTS SUBJECT TO REDETERMINATION

**Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**

A.- B. THE SOCIETY HAS NO CHANGE IN INCURRED LOSSES OR LOSS ADJUSTMENT EXPENSES.

**Note 26 – Intercompany Pooling Arrangements**

A.- G. THE SOCIETY HAS NO INTERCOMPANY POOLING ARRANGEMENTS.

**Note 27 – Structured Settlements**      **NONE**

**Note 28 – Health Care Receivables**

A.- B. THE SOCIETY HAS NO HEALTH CARE RECEIVABLES.

**Note 29 – Participating Policies**

100% OF PERMANENT POLICIES ARE PARTICIPATING.

THE PORTFOLIO AVERAGE METHOD IS APPLIED, RECOGNIZING PLAN OF INSURANCE, AMOUNT OF INSURANCE, YEAR OF ISSUE, AND AGE AT ISSUE.  
THE SOCIETY HAS PAID DIVIDENDS IN THE AMOUNT SHOWN ON EXHIBIT 4 TO POLICYHOLDERS.

**Note 30 – Premium Deficiency Reserves**

1. Liability carried for premium deficiency reserve: \$0
2. Date of most recent evaluation of this liability:

**NOTES TO FINANCIAL STATEMENTS**

3. Was anticipated investment income utilized in the calculation? Yes [ ] No [ ]

**Note 31 – Reserves for Life Contracts and Annuity Contracts**

THE SOCIETY AUTHORIZES DEDUCTIONS OF DEFERRED FRACTIONAL PREMIUM UPON DEATH OF THE INSURED AND RETURNS ANY PORTION OF THE FRACTIONAL PREMIUM BEYOND THE DATE OF DEATH. SURRENDER VALUES ARE NOT PROMISED IN EXCESS OF THE REGULARLY COMPUTED RESERVES.

## (1) Reserve Practices

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

## (2) Valuation of Substandard Policies

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

## (3) Amount of Insurance Where Gross Premiums are Less than the Net Premiums

As of December 31, of the current year, the Society had no insurance-in-force for which the gross premiums are less than the net premium according to the standard valuation set by the State of Ohio.

## (4) Method Used to Determine Tabular Interest, Reserves Released, and Cost

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

## (5) Method of Determination of Tabular Interest on Funds not Involving Life Contingencies

The Tabular Cost (Page 7, Line 9) has been determined by formula as described in the instructions for Page 7. For the determination of Tabular Interest on funds not involving life contingencies under page 7, Annuity, Line 3, for each valuation rate of interest, the Tabular Interest is calculated as one-hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and the end of the year of valuation. The total amount of all such products is entered under Page 7, Line 3.

## (6) Details for Other Changes

Not applicable.

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

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

A. INDIVIDUAL ANNUITIES:	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
1. Subject to Discretionary Withdrawal:					
(a) With market value adjustment	\$	\$	\$	\$	%
(b) At book value less current surrender charge of 5% or more	19,336,439			19,336,439	7.8%
(c) At fair value					%
(d) Total with market value adjustment or at fair value (total of a through c)	\$ 19,336,439	\$	\$	\$ 19,336,439	7.8%
(e) At book value without adjustment (minimal or no charge or adjustment)	217,064,362			217,064,362	87.1%
2. Not subject to discretionary withdrawal	12,805,931			12,805,931	5.1%
3. Total (gross: direct + assumed)	249,206,732			249,206,732	100.0%
4. Reinsurance ceded					
5. Total (net)* (3) - (4)	\$ 249,206,732	\$	\$	\$ 249,206,732	
6. Amount included in A(1)b above that will move to A(1)e in the year after the statement date	\$	\$	\$	\$	

**NOTES TO FINANCIAL STATEMENTS**

B. GROUP ANNUITIES:	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
1. Subject to Discretionary Withdrawal:					
(a) With market value adjustment	\$	\$	\$	\$	%
(b) At book value less current surrender charge of 5% or more					%
(c) At fair value					%
(d) Total with market value adjustment or at fair value (total of a through c)	\$	\$	\$	\$	%
(e) At book value without adjustment (minimal or no charge or adjustment)					%
2. Not subject to discretionary withdrawal					%
3. Total (gross: direct + assumed)					%
4. Reinsurance ceded					
5. Total (net) (3) - (4)	\$	\$	\$	\$	
6. Amount included in B(1)b above that will move to B(1)e in the year after the statement date	\$	\$	\$	\$	

C. DEPOSIT-TYPE CONTRACTS (no life contingencies)	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
1. Subject to Discretionary Withdrawal:					
(a) With market value adjustment	\$	\$	\$	\$	%
(b) At book value less current surrender charge of 5% or more					%
(c) At fair value					%
(d) Total with market value adjustment or at fair value (total of a through c)	\$	\$	\$	\$	%
(e) At book value without adjustment (minimal or no charge or adjustment)					%
2. Not subject to discretionary withdrawal					%
3. Total (gross: direct + assumed)					%
4. Reinsurance ceded					
5. Total (net) (3) - (4)	\$	\$	\$	\$	
6. Amount included in C(1)b above that will move to C(1)e in the year after the statement date	\$	\$	\$	\$	

## D. Life and Accident &amp; Health Annual Statement:

(1) Exhibit 5, Annuities section, Total (net)	\$ 245,352,624
(2) Exhibit 5, Supplementary contracts with life contingencies section, Total (net)	
(3) Exhibit 7, Deposit-type contracts, Line 14, Column 1	36,266,905
(4) Subtotal	\$ 281,619,529
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	\$

**NOTES TO FINANCIAL STATEMENTS**

(12) Combined Total	\$ 281,619,529
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**Note 33 – Analysis of Life Actuarial Reserves by Withdrawal Characteristics**

A. Subject to discretionary withdrawal, surrender values, or policy loans:

	General Account			Separate Account-		Guaranteed and	Nonguaranteed
	Account Value	Cash Value	Reserve	Account Value	Cash Value	Reserve	
(1) Term Policies with Cash Value	\$	\$	\$	\$	\$	\$	
(2) Universal Life							
(3) Universal Life with Secondary Guarantees							
(4) Indexed Universal Life							
(5) Indexed Universal Life with Secondary Guarantees							
(6) Indexed Life							
(7) Other Permanent Cash Value Life Insurance							
(8) Variable Life							
(9) Variable Universal Life							
(10) Miscellaneous Reserves							

B. Not subject to discretionary withdrawal or no cash values:

(1) Term Policies without Cash Value	XXX	XXX	\$	XXX	XXX	\$
(2) Accidental Death Benefits	XXX	XXX		XXX	XXX	
(3) Disability – Active Lives	XXX	XXX		XXX	XXX	
(4) Disability – Disabled Lives	XXX	XXX		XXX	XXX	
(5) Miscellaneous Reserves	XXX	XXX		XXX	XXX	

C. Total (gross: direct + assumed)	\$	\$	\$	\$	\$	\$
D. Reinsurance Ceded						
E. Total (net) (c) (D)	\$	\$	\$	\$	\$	\$

F. Amount

Life & Accident & Health Annual Statement:	
(1) Exhibit 5, Life Insurance Section, Total (net)	\$ 80,173,974
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)	
(3) Exhibit 5, Disability – Active Lives Section, Total (net)	30,000
(4) Exhibit 5, Disability – Disabled Lives Section, Total (net)	4,683
(5) Exhibit 5, Miscellaneous Reserves Section, Total (net)	
(6) Subtotal	\$ 80,208,657
Separate Accounts Annual Statement	
(7) Exhibit 3, Line 0199999, Column 2	\$
(8) Exhibit 3, Line 0499999, Column 2	
(9) Exhibit 3, Line 0599999, Column 2	
(10) Subtotal (Lines (7) through (9))	\$
(11) Combined Total ((6) and (10))	\$ 80,208,657

**Note 34 – Premium and Annuity Considerations Deferred and Uncollected**

Not Applicable

**Note 35 – Separate Accounts**

A. Separate Account Activity

THE SOCIETY DOES NOT HAVE ANY SEPARATE ACCOUNT ACTIVITY.

**Note 36 – Loss/Claim Adjustment Expenses**

Not Required.

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

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

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

1.3 State regulating? STATE OF OHIO

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. 08/18/2017

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. 12/31/2016

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). 12/15/2017

3.4 By what department or departments? STATE OF OHIO, DEPT. OF INSURANCE

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

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

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

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

4.12 renewals? Yes [ ] No [X]

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

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

4.22 renewals? Yes [ ] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [X]  
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? HOSACK, SPECHT, MUETZEL, & WOOD, LLP 2 PENN CENTER WEST STE 326, PITTSBURGH PA 15276

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:

## GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES

10.5	Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?	Yes [X]	No [ ]	N/A [ ]	
10.6	If the 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?	<u>EDWARD F COWMAN, FSA, MAA MILLER &amp; NEWBERG INC. 8717 WEST 110TH ST, SUITE 530 OVERLAND PARK KS 66210</u>			
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes [ ]	No [X]		
12.11	Name of real estate holding company				
12.12	Number of parcels involved	<hr/> 0			
12.13	Total book/adjusted carrying value	\$ 0			
12.2	If yes, provide explanation				
13.	<b>FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:</b>				
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 [ ]		
14.11	(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;				
14.11	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;				
14.11	(c) Compliance with applicable governmental laws, rules and regulations;				
14.11	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and				
14.11	(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	
				\$	
<b>BOARD OF DIRECTORS</b>					
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 [ ]		
<b>FINANCIAL</b>					
19.	Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?	Yes [ ]	No [X]		
20.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):				
20.11	To directors or other officers	\$	0		
20.12	To stockholders not officers	\$	0		
20.13	Trustees, supreme or grand (Fraternal only)	\$	0		
20.2	Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):				
20.21	To directors or other officers	\$	0		
20.22	To stockholders not officers	\$	0		
20.23	Trustees, supreme or grand (Fraternal only)	\$	0		
21.1	Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reporting in the statement?	Yes [ ]	No [X]		
21.2	If yes, state the amount thereof at December 31 of the current year:				
21.21	Rented from others	\$	0		
21.22	Borrowed from others	\$	0		
21.23	Leased from others	\$	0		
21.24	Other	\$	0		
22.1	Does this statement include payments for assessments as described in the <i>Annual Statement Instructions</i> 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]		

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

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

\$ \_\_\_\_\_ 0

**INVESTMENT**

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?

Yes [X] No [ ]

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

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

24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the *Risk-Based Capital Instructions*?

Yes [ ] No [ ] N/A [X]

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

\$ \_\_\_\_\_ 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:

\$ \_\_\_\_\_ 0

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:

\$ \_\_\_\_\_ 0

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

\$ 1,633,700

25.28 On deposit with states

\$ 165,000

25.29 On deposit with other regulatory bodies

\$ \_\_\_\_\_ 0

25.30 Pledged as collateral – excluding collateral pledged to an FHLB

\$ \_\_\_\_\_ 0

25.31 Pledged as collateral to FHLB – including assets backing funding agreements

\$ 46,181,867

25.32 Other

\$ \_\_\_\_\_ 0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$ _____

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes [ ] No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes [ ] No [ ] N/A [X]

If no, attach a description with this statement.

**Lines 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:**

26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?

Yes [ ] No [xX]

26.4 If the response to 26.3 is yes, does the reporting entity utilize:

Yes [ ] No [ ]

26.41 Special accounting provision of SSAP No. 108

Yes [ ] No [ ]

26.42 Permitted accounting practice

Yes [ ] No [ ]

26.43 Other accounting guidance

Yes [ ] No [ ]

26.5 By responding yes to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guidance Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

Yes [ ] No [ ]

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 *Financial Condition Examiners Handbook*?

Yes [X] No [ ]

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

1 Name of Custodian(s)	2 Custodian's Address
KEYBANK, NA	127 PUBLIC SQUARE, CLEVELAND, OHIO 44114

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

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

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

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes [ ] No [ X ]

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

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

28.05 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").

1 Name of Firm or Individual	2 Affiliation

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 invested assets?

Yes [ ] No [ X ]

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 invested assets?

Yes [ ] No [ X ]

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 [ ] No [ X ]

29.2 If yes, complete the following schedule:

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

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

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

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

		1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	\$ 380,141,999	\$ 404,989,905	\$ 24,847,906
30.2	Preferred Stocks	\$ 0	\$ 0	\$ 0
30.3	Totals	\$ 380,141,999	\$ 404,989,905	\$ 24,847,906

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

**SVO AVS SERVICE, BROKERS, AND TRADE PUBLICATIONS**

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

Yes [ X ] No [ ]

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

Yes [ X ] No [ ]

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

32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC 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.

Has the reporting entity self-designated 5GI securities?

Yes [ ] No [ X ]

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.

Has the reporting entity self-designated PLGI securities?

Yes [ ] No [ X ]

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

35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- The shares were purchased prior to January 1, 2019.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- The fund only or predominantly holds bonds in its portfolio.
- The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?

Yes [ ] No [ X ]

**OTHER**

36.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ \_\_\_\_\_ 0

36.2 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
	\$

37.1 Amount of payments for legal expenses, 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 payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
	\$

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

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

1 Name	2 Amount Paid
	\$

**GENERAL INTERROGATORIES****PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES****Life, Accident and Health Companies/Fraternal Benefit Societies:**

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [ ]	No [ X ]
1.2	If yes, indicate premium earned on U.S. business only.	\$	0
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$	0
1.3	Reason for excluding:		
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$	0
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$	0
1.6	Individual policies:		
	Most current three years:		
1.61	Total premium earned	\$	0
1.62	Total incurred claims	\$	0
1.63	Number of covered lives	\$	0
	All years prior to most current three years:		
1.64	Total premium earned	\$	0
1.65	Total incurred claims	\$	0
1.66	Number of covered lives	\$	0
1.7	Group policies:		
	Most current three years:		
1.71	Total premium earned	\$	0
1.72	Total incurred claims	\$	0
1.73	Number of covered lives	\$	0
	All years prior to most current three years:		
1.74	Total premium earned	\$	0
1.75	Total incurred claims	\$	0
1.76	Number of covered lives	\$	0
2.	Health Test:		
		1 Current Year	2 Prior Year
2.1	Premium Numerator	\$ 0	\$ 0
2.2	Premium Denominator	\$ 18,944,367	\$ 0
2.3	Premium Ratio (2.1/2.2)	0.0%	0.0%
2.4	Reserve Numerator	\$ 0	\$ 0
2.5	Reserve Denominator	\$ 325,861,281	\$ 0
2.6	Reserve Ratio (2.4/2.5)	0.0%	0.0%
3.1	Does the reporting entity have Separate Accounts?	Yes [ ]	No [ X ]
3.2	If yes, has a Separate Accounts statement been filed with this Department	Yes [ ]	No [ ]
3.3	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?	\$ 0	
3.4	State the authority under which Separate Accounts are maintained:		
3.5	Was any of the reporting entity's Separate Accounts business reinsured as of December 31?	Yes [ ]	No [ X ]
3.6	Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31?	Yes [ ]	No [ X ]
3.7	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)?"	\$ 0	
4.	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:		
4.1	Amount of loss reserves established by these annuities during the current year:	\$ 0	
4.2	List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.		

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

5.1	Do you act as a custodian for health savings accounts?	Yes [ ]	No [ X ]
5.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$ 0	
5.3	Do you act as an administrator for health savings accounts?	Yes [ ]	No [ X ]
5.4	If yes, please provide the balance of the funds administered as of the reporting date.	\$ 0	
6.1	Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?	Yes [ ]	No [ ]

**GENERAL INTERROGATORIES****PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

6.2 If the answer to 6.1 is yes, please provide the following:

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
			\$	\$	\$	\$

7. Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).

7.1 Direct premiums written	\$	0
7.2 Total incurred claims	\$	0
7.3 Number of covered lives	\$	0
<b>*Ordinary Life Insurance Includes</b>		
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)		

8. Is the reporting entity licensed or charted, registered, qualified, eligible or writing business in at least two states?

Yes [X] No [ ]

8.1 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 entity?

Yes [ ] No [ ]

**Life, Accident and Health Companies Only:**

9.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)?

Yes [ ] No [X]

9.2 Net reimbursement of such expenses between reporting entities:

9.21 Paid	\$	0
9.22 Received	\$	0

10.1 Does the reporting entity write any guaranteed interest contracts?

Yes [ ] No [X]

10.2 If yes, what amount pertaining to these items is included in:

10.21 Page 3, Line 1	\$	0
10.22 Page 4, Line 1	\$	0

11. For stock reporting entities only:

11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity:	\$	0
--	----	---

12. Total dividends paid stockholders since organization of the reporting entity:

12.11 Cash	\$	0
12.12 Stock	\$	0

13.1 Does the reporting entity reinsure any Workers' Compensation Carve-Out business defined as:

Yes [ ] No [X]

Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.

13.2 If yes, has the reporting entity completed the *Workers' Compensation Carve-Out Supplement* to the Annual Statement?

Yes [ ] No [X]

13.3 If 13.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

	1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
13.31 Earned premium	\$ 0	\$ 0	\$ 0
13.32 Paid claims	\$ 0	\$ 0	\$ 0
13.33 Claim liability and reserve (beginning of year)	\$ 0	\$ 0	\$ 0
13.34 Claim liability and reserve (end of year)	\$ 0	\$ 0	\$ 0
13.35 Incurred claims	\$ 0	\$ 0	\$ 0

13.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) are:

	Attachment Point	1 Earned Premium	2 Claim Liability and Reserve
13.41 <\$25,000		\$ 0	\$ 0
13.42 \$25,000 — 99,999		\$ 0	\$ 0
13.43 \$100,000 — 249,999		\$ 0	\$ 0
13.44 \$250,000 — 999,999		\$ 0	\$ 0
13.45 \$1,000,000 or more		\$ 0	\$ 0

13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools?

\$ 0

**Fraternal Benefit Societies Only:**

14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government?

Yes [X] No [ ]

15. How often are meetings of the subordinate branches required to be held?

ANNUALLY

16. How are the subordinate branches represented in the supreme or governing body?

THEY ARE REPRESENTED BY ELECTED DELEGATES

17. What is the basis of representation in the governing body?

**GENERAL INTERROGATORIES****PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**EACH LODGE HAVING 50 MEMBERS IS ENTITLED TO ONE DELEGATE & AN ADDITIONAL DELEGATE FOR EACH 100 MEMBERS OVER 50.

18.1 How often are regular meetings of the governing body held?  
QUADRENALLY

18.2 When was the last regular meeting of the governing body held? 08/04/2018

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

18.4 How many members of the governing body attended the last regular meeting? 321

18.5 How many of the same were delegates of the subordinate branches? 291

19. How are the expenses of the governing body defrayed?  
FROM THE GENERAL FUND OF THE SOCIETY

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

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

22. What are the limiting ages for admission?  
80 YEARS

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

24. Is a medical examination required before issuing a benefit certificate to applicants? Yes [X] No [ ]

25. 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]

26.1 Are notices of the payments required sent to the members? Yes [X] No [ ] N/A [ ]

26.2 If yes, do the notices state the purpose for which the money is to be used? Yes [X] No [ ]

27. What proportion of first and subsequent year's payments may be used for management expenses?  
 27.11 First Year  
 27.12 Subsequent Years %  
%

28.1 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]

28.2 If so, what amount and for what purpose? \$

29.1 Does the reporting entity pay an old age disability benefit? Yes [ ] No [X]

29.2 If yes, at what age does the benefit commence?

30.1 Has the constitution or have the laws of the reporting entity been amended during the year? Yes [ ] No [X]

30.2 If yes, when?

31. 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 [ ]

32.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? Yes [ ] No [X]

32.2 If so, was an additional reserve included in Exhibit 5? Yes [ ] No [X] N/A [ ]

32.3 If yes, explain

33.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? Yes [ ] No [X]

33.2 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]

34. 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]

35.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? Yes [ ] No [X]

35.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus?

Date	Outstanding Lien Amount
	\$

**FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**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 2019	2 2018	3 2017	4 2016	5 2015
<b>Life Insurance in Force (Exhibit of Life Insurance)</b>					
1. Ordinary - whole life and endowment (Line 34, Col. 4).....	321,743				
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4).....					
3. Credit life (Line 21, Col. 6).....					
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4).....					
5. Industrial (Line 21, Col. 2).....					
6. FEGLI/SGLI (Lines 43 & 44, Col. 4).....					
7. Total (Line 21, Col. 10).....	321,743	0	0	0	0
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated.....				XXX	XXX
<b>New Business Issued (Exhibit of Life Insurance)</b>					
8. Ordinary - whole life and endowment (Line 34, Col. 2).....	4,375				
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2).....					
10. Credit life (Line 2, Col. 6).....					
11. Group (Line 2, Col. 9).....					
12. Industrial (Line 2, Col. 2).....					
13. Total (Line 2, Col. 10).....	4,375	0	0	0	0
<b>Premium Income - Lines of Business (Exhibit 1-Part 1)</b>					
14. Industrial life (Line 20.4, Col. 2).....					
15.1 Ordinary life insurance (Line 20.4, Col. 3).....	1,463,796				
15.2 Ordinary individual annuities (Line 20.4, Col. 4).....	17,480,572				
16. Credit life (group and individual) (Line 20.4, Col. 5).....					
17.1 Group life insurance (Line 20.4, Col. 6).....					
17.2 Group annuities (Line 20.4, Col. 7).....					
18.1 A&H - group (Line 20.4, Col. 8).....					
18.2 A&H - credit (group and individual) (Line 20.4, Col. 9).....					
18.3 A&H - other (Line 20.4, Col. 10).....					
19. Aggregate of all other lines of business (Line 20.4, Col. 11).....					
20. Total.....	18,944,368	0	0	0	0
<b>Balance Sheet (Pages 2 and 3)</b>					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....	416,524,510	387,320,134	395,957,087	382,380,128	366,868,306
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26).....	374,376,504	354,945,549	365,174,241	354,280,731	340,470,890
23. Aggregate life reserves (Page 3, Line 1).....	325,561,282	315,165,261	313,139,204	302,291,581	287,620,117
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1.....				XXX	XXX
24. Aggregate A&H reserves (Page 3, Line 2).....					
25. Deposit-type contract funds (Page 3, Line 3).....	36,266,916	28,783,032	39,687,240	41,098,805	44,046,110
26. Asset valuation reserve (Page 3, Line 24.01).....	3,993,202	2,783,323	2,913,033	2,607,558	2,191,650
27. Capital (Page 3, Lines 29 & 30).....					
28. Surplus (Page 3, Line 37).....	42,148,006	32,374,585	30,782,846	28,099,397	26,397,416
<b>Cash Flow (Page 5)</b>					
29. Net cash from operations (Line 11).....	12,941,963	4,172,292	14,498,333	17,716,516	15,390,930
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital.....	46,341,220	35,357,908	33,895,879	30,856,955	28,789,066
31. Authorized control level risk-based capital.....	3,612,742	3,750,003	3,387,634	3,587,097	3,373,467
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0</b>					
32. Bonds (Line 1).....	91.1	92.3	89.1	90.6	93.2
33. Stocks (Lines 2.1 and 2.2).....	1.3	0.8	0.7	0.6	0.6
34. Mortgage loans on real estate (Lines 3.1 and 3.2).....	0.0	0.1	0.2	0.2	0.3
35. Real estate (Line 4.1, 4.2 and 4.3).....	0.2	0.6	0.6	0.6	0.7
36. Cash, cash equivalents and short-term investments (Line 5).....	5.1	4.1	7.9	6.3	3.4
37. Contract loans (Line 6).....	0.3	0.3	0.3	0.3	0.3
38. Derivatives (Line 7).....					
39. Other invested assets (Line 8).....	2.0	1.9	1.4	1.3	1.5
40. Receivables for securities (Line 9).....					0.0
41. Securities lending reinvested collateral assets (Line 10).....					
42. Aggregate write-ins for invested assets (Line 11).....					
43. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0

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

(continued)

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
44. Affiliated bonds (Sch. D Summary, Line 12, Col. 1).....					
45. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1).....					
46. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1).....	3,694,098	1,159,985	1,014,480	776,316	662,075
47. Affiliated short-term investments (subtotal included in Sch. DA, Verif., Col. 5, Line 10).....					
48. Affiliated mortgage loans on real estate .....					
49. All other affiliated.....					
50. Total of above Lines 44 to 49.....	3,694,098	1,159,985	1,014,480	776,316	662,075
51. Total investment in parent included in Lines 44 to 49 above.....					
<b>Total Nonadmitted and Admitted Assets</b>					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	2,496	5,415	8,334	11,253	14,172
53. Total admitted assets (Page 2, Line 28, Col. 3).....	416,524,510	387,320,134	395,957,087	382,380,128	366,868,306
<b>Investment Data</b>					
54. Net investment income (Exhibit of Net Investment Income).....	15,841,382	15,936,994	15,764,562	15,527,524	15,210,049
55. Realized capital gains (losses) (Page 4, Line 34, Column 1).....	6,960,683	97,832	(151,690)	(164,465)	(638,711)
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1).....	3,188,390	(162,804)	784,400	358,567	409,181
57. Total of above Lines 54, 55 and 56.....	25,990,455	15,872,022	16,397,272	15,721,626	14,980,519
<b>Benefits and Reserve Increase (Page 6)</b>					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 & 8).....	19,334,591	20,731,584	18,718,486	17,462,952	16,101,327
59. Total contract/certificate benefits - A&H (Lines 13 & 14, Col. 6).....					
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2).....	711,981	506,515	1,084,854	1,122,171	1,183,440
61. Increase in A&H reserves (Line 19, Col. 6).....					
62. Dividends to policyholders and refunds to members (Line 30, Col 1).....	424,834	422,699	420,527	413,708	411,659
<b>Operating Percentages</b>					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22, & 23 less Line (6) / (Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.00).....	19.1	32.2	17.2	14.9	17.8
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.00.....	0.4	2.0	2.0	1.8	
65. A&H loss percent (Schedule H, Part 1, Lines 5 & 6, Col. 2).....					2.3
66. A&H cost containment percent (Schedule H, Part 1, Line 4, Col. 2).....					
67. A&H expense percent excluding cost containment expenses (Schedule H, Part 1, Line 10, Col. 2).....					
<b>A&amp;H Claim Reserve Adequacy</b>					
68. Incurred losses on prior years' claims - group health (Sch. H, Part 3, Line 3.1, Col. 2).....					
69. Prior years' claim liability and reserve - group health (Sch. H, Part 3, Line 3.2, Col. 2).....					
70. Incurred losses on prior years' claims - health other than group (Sch. H, Part 3, Line 3.1, Col. 1 less Col. 2).....					
71. Prior years' claim liability and reserve - health other than group (Sch. H, Part 3, Line 3.2, Col. 1 less Col. 2).....					
<b>Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33)</b>					
72. Industrial life (Page 6.1, Col. 2).....					
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12).....	1,501,839				
74. Ordinary - individual annuities (Page 6, Col. 4).....	397,492				
75. Ordinary - supplementary contracts.....	XXX				
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7).....					
77. Group life (Page 6.2, Col. 1 less Col. 7 less Col. 9).....					
78. Group annuities (Page 6, Col. 5).....					
79. A&H - group (Page 6.5, Col. 3).....					
80. A&H - credit (Page 6.5, Col. 10).....					
81. A&H - other (Page 6.5, Col. 1 less Cols. 3 and 10).....					
82. Aggregate of all other lines of business (Page 6, Col. 8).....					
83. Fraternal (Page 6, Col. 7).....	(1,007,478)				
84. Total (Page 6, Col. 1).....	891,852	0	0	0	0

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

Yes  No

If no, please explain:

## EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group			10 Total Amount of Insurance	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	Number of		9 Amount of Insurance		
							7 Policies	8 Certificates			
1. In force end of prior year.....			52,964	325,351						325,351	
2. Issued during year.....			331	4,375						4,375	
3. Reinsurance assumed.....										0	
4. Revived during year.....			90	984						984	
5. Increased during year (net).....			123	2,663						2,663	
6. Subtotals, Lines 2 to 5.....	0	0	544	8,022	0	0	0	0	0	8,022	
7. Additions by dividends during year.....	XXX		XXX		XXX		XXX	XXX		0	
8. Aggregate write-ins for increases.....	0	0	0	0	0	0	0	0	0	0	
9. Totals (Lines 1 and 6 to 8).....	0	0	53,508	333,373	0	0	0	0	0	333,373	
<b>Deductions during year:</b>											
10. Death.....			.977	2,554			XXX			2,554	
11. Maturity.....							XXX			0	
12. Disability.....							XXX			0	
13. Expiry.....			.459	6,860						6,860	
14. Surrender.....			.304	1,151						1,151	
15. Lapse.....										0	
16. Conversion.....			73	1,065			XXX	XXX	XXX	1,065	
17. Decreased (net).....										0	
18. Reinsurance.....										0	
19. Aggregate write-ins for decreases.....	0	0	0	0	0	0	0	0	0	0	
20. Totals (Lines 10 to 19).....	0	0	1,813	11,630	0	0	0	0	0	11,630	
21. In force end of year (b) (Line 9 minus Line 20).....	0	0	51,695	321,743	0	0	0	0	0	321,743	
22. Reinsurance ceded end of year.....	XXX		XXX	11,096	XXX		XXX	XXX		11,096	
23. Line 21 minus Line 22.....	XXX	0	XXX	310,647	XXX	(a) 0	XXX	XXX	0	310,647	

## DETAILS OF WRITE-INS

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

Life Accident and Health Companies Only:

(a) Group \$.....0; Individual \$.....0.

Fraternal Benefit Societies Only:

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates.....0, amount, \$.....0.

Additional accidental death benefits included in life certificates were in amount \$.....0. Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [ ] No [ ]

If not, how are such expenses met?.....

**FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**EXHIBIT OF LIFE INSURANCE**

(\$000 Omitted for Amounts of Life Insurance) (Continued)

## ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends.....	....XXX	.....	....XXX.....	.....
25. Other paid-up insurance.....	.....	.....	.....	.....
26. Debit ordinary insurance.....	....XXX	....XXX.....	.....	.....

## ADDITIONAL INFORMATION ON ORDINARY INSURANCE

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
Term Insurance Excluding Extended Term Insurance				
27. Term policies-decreasing.....	.....	.....	.....	.....
28. Term policies-other.....	.....	.....	.....	.....
29. Other term insurance-decreasing.....	....XXX	.....	....XXX.....	.....
30. Other term insurance.....	....XXX	.....	....XXX.....	.....
31. Totals (Lines 27 to 30).....	.....0	.....0	.....0	.....0
Reconciliation to Lines 2 and 21:				
32. Term additions.....	....XXX	.....	....XXX.....	.....
33. Totals, extended term insurance.....	....XXX	....XXX.....	.....	.....
34. Totals, whole life and endowment.....	....331	....4,375	....51,695	....321,743
35. Totals (Lines 31 to 34).....	....331	....4,375	....51,695	....321,743

## CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial.....	.....	.....	.....	.....
37. Ordinary.....	.....	.....4,375	.....	....321,743
38. Credit Life (Group and Individual).....	.....	.....	.....	.....
39. Group.....	.....	.....	.....	.....
40. Totals (Lines 36 to 39).....	.....0	....4,375	.....0	....321,743

## ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	Credit Life		Group	
	1 Number of Individual Policies and Group Certificates	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
41. Amount of insurance included in Line 2 ceded to other companies.....	....XXX	.....	....XXX.....	.....
42. Number in force end of year if the number under shared groups is counted on a pro-rata basis.....	.....	....XXX.....	.....	....XXX.....
43. Federal Employees' Group Life Insurance included in Line 21.....	.....	.....	.....	.....
44. Servicemen's Group Life Insurance included in Line 21.....	.....	.....	.....	.....
45. Group Permanent Insurance included in Line 21.....	.....	.....	.....	.....

## ADDITIONAL ACCIDENTAL DEATH BENEFITS

46. Amount of additional accidental death benefits in force end of year under ordinary policies.....	.....
--	-------

## BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Income, Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Children, etc., policies and riders included above.
47.1 _____
47.2 _____

## POLICIES WITH DISABILITY PROVISIONS

Disability Provision	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium.....	.....	.....	.....	.....	.....	.....	.....	.....
49. Disability Income.....	.....	.....	.....	.....	.....	.....	.....	.....
50. Extended Benefits.....	.....	.....	....XXX.....	....XXX.....	.....	.....	.....	.....
51. Other.....	.....	.....	.....	.....	.....	.....	.....	.....
52. Total.....	.....0	....(a).....0	.....0	....(a).....0	.....0	....(a).....0	.....0	....(a).....0

(a) See the Annual Audited Financial Reports section of the Annual Statement Instructions.

**EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE  
AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS,  
ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES**

**SUPPLEMENTARY CONTRACTS**

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year.....				
2. Issued during year.....				
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....	0	0	0	0
Deductions during year:				
6. Decreased (net).....				
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	0	0	0	0
9. In force end of year.....	0	0	0	0
10. Amount on deposit.....		(a).....		(a).....
11. Income now payable.....				
12. Amount of income payable.....	(a).....	(a).....	(a).....	(a).....

**ANNUITIES**

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year.....	.89	5,810		
2. Issued during year.....	.23	326		
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....	112	6,136	0	0
Deductions during year:				
6. Decreased (net).....	.6	328		
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	6	328	0	0
9. In force end of year.....	106	5,808	0	0
Income now payable:				
10. Amount of income payable.....	(a).....91,665	XXX.....	XXX.....	(a).....
Deferred fully paid:				
11. Account balance.....	XXX.....	(a).....3,302,228	XXX.....	(a).....
Deferred not fully paid:				
12. Account balance.....	XXX.....	(a).....235,613,056	XXX.....	(a).....

**ACCIDENT AND HEALTH INSURANCE**

	Group		Credit		Other	
	1 Certificates	2 Premiums in force	3 Policies	4 Premiums in force	5 Policies	6 Premiums in force
1. In force end of prior year.....						
2. Issued during year.....						
3. Reinsurance assumed.....						
4. Increased during year (net).....		XXX.....		XXX.....		XXX.....
5. Total (Lines 1 to 4).....	0	XXX.....	0	XXX.....	0	XXX.....
Deductions during year:						
6. Conversions.....		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
7. Decreased (net).....		XXX.....		XXX.....		XXX.....
8. Reinsurance ceded.....		XXX.....		XXX.....		XXX.....
9. Totals (Lines 6 to 8).....	0	XXX.....	0	XXX.....	0	XXX.....
10. In force end of year.....	0	(a).....	0	(a).....	0	(a).....

**DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS**

			1 Deposit Funds Contracts	2 Dividend Accumulations Contracts	
	2	1		2	1
1. In force end of prior year.....				2,264,675	.271,597
2. Issued during year.....				671,858	.27,583
3. Reinsurance assumed.....					
4. Increased during year (net).....				760,700	
5. Total (Lines 1 to 4).....				3,697,233	.299,180
Deductions during year:					
6. Decreased (net).....				129,401	.12,914
7. Reinsurance ceded.....					
8. Totals (Lines 6 and 7).....				129,401	.12,914
9. In force end of year.....				3,567,832	.286,265
10. Amount of account balance.....				(a).....3,567,832	(a)......286,265

(a) See the Annual Audited Financial Reports section of the Annual Statement Instructions.

Annual Statement for the year 2019 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**  
**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)**

Allocated by States and Territories

States, Etc.	Active Status (a)	1	Direct Business Only				
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama.....	AL	N				0	
2. Alaska.....	AK	N				0	
3. Arizona.....	AZ	L		636,608		.636,608	
4. Arkansas.....	AR	N				0	
5. California.....	CA	N				0	
6. Colorado.....	CO	L	14			14	
7. Connecticut.....	CT	L	18,850	370,211		.389,060	
8. Delaware.....	DE	N				0	
9. District of Columbia.....	DC	N				0	
10. Florida.....	FL	L	8,702	.89,460		.98,162	
11. Georgia.....	GA	L	10			10	
12. Hawaii.....	HI	N				0	
13. Idaho.....	ID	N				0	
14. Illinois.....	IL	L	.58,646	4,222,179		.4,280,824	
15. Indiana.....	IN	L	6,951	.65,243		.72,193	
16. Iowa.....	IA	L	210	1,763,644		.1,763,854	
17. Kansas.....	KS	N				0	
18. Kentucky.....	KY	L		1,700		1,700	
19. Louisiana.....	LA	N				0	
20. Maine.....	ME	N				0	
21. Maryland.....	MD	L	9,423	.400		.9,823	
22. Massachusetts.....	MA	L	3,401	.6,700		.10,101	
23. Michigan.....	MI	L	.37,003	.564,488		.601,491	
24. Minnesota.....	MN	L	79,694	814,170		.893,864	
25. Mississippi.....	MS	N				0	
26. Missouri.....	MO	L	472	.25,494		.25,966	
27. Montana.....	MT	N				0	
28. Nebraska.....	NE	L	531	.243,773		.244,304	
29. Nevada.....	NV	L	237			.237	
30. New Hampshire.....	NH	N				0	
31. New Jersey.....	NJ	L	.67,278	468,393		.535,671	
32. New Mexico.....	NM	N				0	
33. New York.....	NY	L	.62,521	800,433		.862,954	
34. North Carolina.....	NC	L		1,500		1,500	
35. North Dakota.....	ND	N				0	
36. Ohio.....	OH	L	263,826	1,918,015		.2,181,841	
37. Oklahoma.....	OK	N				0	
38. Oregon.....	OR	N				0	
39. Pennsylvania.....	PA	L	.460,421	4,637,242		.5,097,663	
40. Rhode Island.....	RI	N				0	
41. South Carolina.....	SC	L		.5,100		.5,100	
42. South Dakota.....	SD	N				0	
43. Tennessee.....	TN	L				0	
44. Texas.....	TX	L	136			.136	
45. Utah.....	UT	N				0	
46. Vermont.....	VT	N				0	
47. Virginia.....	VA	L	14,149	.5,200		.19,349	
48. Washington.....	WA	N				0	
49. West Virginia.....	WV	L	3,943	.37,000		.40,943	
50. Wisconsin.....	WI	L	5,016	.803,619		.808,635	
51. Wyoming.....	WY	N				0	
52. American Samoa.....	AS	N				0	
53. Guam.....	GU	N				0	
54. Puerto Rico.....	PR	N				0	
55. US Virgin Islands.....	VI	N				0	
56. Northern Mariana Islands.....	MP	N				0	
57. Canada.....	CAN	N				0	
58. Aggregate Other Alien.....	OT	XXX	.0	0	.0	0	0
59. Subtotal.....		XXX	1,101,433	17,480,571	.0	.0	.0
60. Reporting entity contributions for employee benefit plans.....		XXX					
61. Dividends or refunds applied to purchase paid-up additions and annuities.....		XXX	406,945			.406,945	
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	1,508,378	17,480,571	.0	.0	.0
66. Plus reinsurance assumed.....		XXX				0	
67. Totals (All Business).....		XXX	1,508,378	17,480,571	.0	.0	.0
68. Less reinsurance ceded.....		XXX	.37,427				.37,427
69. Totals (All Business) less reinsurance ceded.....		XXX	1,470,951	17,480,571	(c)	.0	.0

DETAILS OF WRITE-INS

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

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 27  
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..... 30

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

(c) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9, and 10, 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**

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Holding Company System Annual Regulation Statement

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

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

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

September 29, 1986

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

Organizational Chart

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

Subsidiaries: JEDNOTA Properties, INC.  
JEDNOTA General Company

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