

QUARTERLY STATEMENT

OF THE

AMERICAN MODERN LIFE INSURANCE COMPANY

TO THE

Insurance Department

OF THE

STATE OF

**FOR THE QUARTER ENDED
MARCH 31, 2016**

LIFE AND ACCIDENT AND HEALTH

2016



LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF MARCH 31, 2016

OF THE CONDITION AND AFFAIRS OF THE

American Modern Life Insurance Company

NAIC Group Code 0869 0869 NAIC Company Code 65811 Employer's ID Number 86-6052181
(Current) (Prior)

Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio

Country of Domicile United States of America

Incorporated/Organized 12/12/1956 Commenced Business 01/03/1957

Statutory Home Office 1300 East Ninth Street, Cleveland, OH, US 44114
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 400 Robert Street North
(Street and Number)
St. Paul, MN, US 55101-2098, 651-665-3500
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 400 Robert Street North, St. Paul, MN, US 55101-2098
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 400 Robert Street North
(Street and Number)
St. Paul, MN, US 55101-2098, 651-665-5678
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.securian.com

Statutory Statement Contact Nicholas David Boehland, 651-665-5678
(Name) (Area Code) (Telephone Number)
nicholas.boehland@securian.com, 651-665-7938
(E-mail Address) (FAX Number)

OFFICERS

President & CEO William Michael Gould Treasurer David John LePlavy
Secretary Mark James Geldernick

OTHER

Barbara Ann Baumann, Second Vice President

DIRECTORS OR TRUSTEES

William Michael Gould David John LePlavy Warren John Zaccaro
Kristi Jo Nelson Gary Roger Christensen Suzette Louise Huovinen
Daniel Patrick Preiner

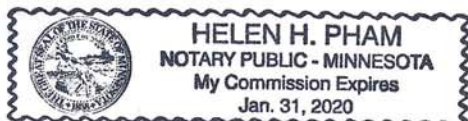
State of Minnesota SS:
County of Ramsey

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

William Michael Gould Mark James Geldernick David John LePlavy
President & CEO Secretary Treasurer

Subscribed and sworn to before me this 02 day of May 2016

Helen H. Pham
Helen H. Pham
Notary Public
January 31, 2020



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

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

ASSETS

| | Current Statement Date | | | 4 December 31 Prior Year Net Admitted Assets |
|---|------------------------|-------------------------|---|---|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds | 30,320,161 | | 30,320,161 | 30,856,652 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | | | | |
| 2.2 Common stocks | 12,407,180 | | 12,407,180 | 12,276,728 |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | | | | |
| 3.2 Other than first liens..... | | | | |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$ encumbrances) | | | | |
| 4.2 Properties held for the production of income (less \$ encumbrances) | | | | |
| 4.3 Properties held for sale (less \$ encumbrances) | | | | |
| 5. Cash (\$249,990), cash equivalents (\$) and short-term investments (\$ 1,077,235) | 1,327,225 | | 1,327,225 | 1,665,890 |
| 6. Contract loans (including \$ premium notes) | | | | |
| 7. Derivatives | | | | |
| 8. Other invested assets | | | | |
| 9. Receivables for securities | 14,250 | | 14,250 | 53,813 |
| 10. Securities lending reinvested collateral assets | | | | |
| 11. Aggregate write-ins for invested assets | | | | |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 44,068,816 | | 44,068,816 | 44,853,082 |
| 13. Title plants less \$ charged off (for Title insurers only) | | | | |
| 14. Investment income due and accrued | 202,179 | | 202,179 | 191,191 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 236,024 | | 236,024 | 298,739 |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums) | | | | |
| 15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$) | | | | |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | 593,757 | | 593,757 | 309,801 |
| 16.2 Funds held by or deposited with reinsured companies | | | | |
| 16.3 Other amounts receivable under reinsurance contracts | 788,623 | | 788,623 | 769,625 |
| 17. Amounts receivable relating to uninsured plans | | | | |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | | | | |
| 18.2 Net deferred tax asset | 1,340,027 | 861,957 | 478,070 | 482,288 |
| 19. Guaranty funds receivable or on deposit | 47,459 | 47,459 | | |
| 20. Electronic data processing equipment and software | | | | |
| 21. Furniture and equipment, including health care delivery assets (\$) | | | | |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates | | | | |
| 23. Receivables from parent, subsidiaries and affiliates | | | | |
| 24. Health care (\$) and other amounts receivable | | | | |
| 25. Aggregate write-ins for other than invested assets | 400,581 | 400,581 | | |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 47,677,465 | 1,309,997 | 46,367,469 | 46,904,726 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | | |
| 28. Total (Lines 26 and 27) | 47,677,465 | 1,309,997 | 46,367,469 | 46,904,726 |
| DETAILS OF WRITE-INS | | | | |
| 1101. | | | | |
| 1102. | | | | |
| 1103. | | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | | | | |
| 1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above) | | | | |
| 2501. Interest maintenance reserve | 205,939 | 205,939 | | |
| 2502. Miscellaneous accounts receivable | 194,642 | 194,642 | | |
| 2503. | | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | | | | |
| 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) | 400,581 | 400,581 | | |

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

| | 1 Current Statement Date | 2 December 31 Prior Year |
|--|--------------------------------|--------------------------------|
| 1. Aggregate reserve for life contracts \$6,733,330 less \$ included in Line 6.3 (including \$1,158,744 Modco Reserve)..... | 6,733,330 | 7,063,737 |
| 2. Aggregate reserve for accident and health contracts (including \$1,907,158 Modco Reserve)..... | 4,744,937 | 5,021,898 |
| 3. Liability for deposit-type contracts (including \$ Modco Reserve)..... | | |
| 4. Contract claims: | | |
| 4.1 Life..... | 721,078 | 764,517 |
| 4.2 Accident and health..... | 409,721 | 433,039 |
| 5. Policyholders' dividends \$ and coupons \$ due and unpaid..... | | |
| 6. Provision for policyholders' dividends and coupons payable in following calendar year - estimated amounts: | | |
| 6.1 Dividends apportioned for payment (including \$ Modco)..... | | |
| 6.2 Dividends not yet apportioned (including \$ Modco)..... | | |
| 6.3 Coupons and similar benefits (including \$ 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 \$ discount; including \$ accident and health premiums..... | | |
| 9. Contract liabilities not included elsewhere: | | |
| 9.1 Surrender values on canceled contracts..... | | |
| 9.2 Provision for experience rating refunds, including the liability of \$ accident and health experience rating refunds of which \$ is for medical loss ratio rebate per the Public Health Service Act..... | | |
| 9.3 Other amounts payable on reinsurance, including \$ assumed and \$520,545 ceded..... | 520,545 | 672,210 |
| 9.4 Interest Maintenance Reserve..... | | |
| 10. Commissions to agents due or accrued-life and annuity contracts \$514,888 , accident and health \$386,506 and deposit-type contract funds \$ | 901,394 | 947,107 |
| 11. Commissions and expense allowances payable on reinsurance assumed..... | 623 | 840 |
| 12. General expenses due or accrued..... | 2,014,042 | 2,012,500 |
| 13. Transfers to Separate Accounts due or accrued (net) (including \$ accrued for expense allowances recognized in reserves, net of reinsured allowances)..... | | |
| 14. Taxes, licenses and fees due or accrued, excluding federal income taxes..... | 27,482 | 80,152 |
| 15.1 Current federal and foreign income taxes, including \$ on realized capital gains (losses)..... | 157,250 | 245,978 |
| 15.2 Net deferred tax liability..... | | |
| 16. Unearned investment income..... | | |
| 17. Amounts withheld or retained by company as agent or trustee..... | | |
| 18. Amounts held for agents' account, including \$ agents' credit balances..... | | |
| 19. Remittances and items not allocated..... | | 54,786 |
| 20. Net adjustment in assets and liabilities due to foreign exchange rates..... | | |
| 21. Liability for benefits for employees and agents if not included above..... | | |
| 22. Borrowed money \$ and interest thereon \$ | | |
| 23. Dividends to stockholders declared and unpaid..... | | |
| 24. Miscellaneous liabilities: | | |
| 24.01 Asset valuation reserve..... | 28,877 | 25,781 |
| 24.02 Reinsurance in unauthorized and certified (\$) companies..... | | |
| 24.03 Funds held under reinsurance treaties with unauthorized and certified (\$) reinsurers..... | | |
| 24.04 Payable to parent, subsidiaries and affiliates..... | 642,745 | 525,569 |
| 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..... | | 18,750 |
| 24.10 Payable for securities lending..... | | |
| 24.11 Capital notes \$ and interest thereon \$ | | |
| 25. Aggregate write-ins for liabilities..... | | |
| 26. Total liabilities excluding Separate Accounts business (Lines 1 to 25)..... | 16,902,024 | 17,866,863 |
| 27. From Separate Accounts Statement..... | | |
| 28. Total liabilities (Lines 26 and 27)..... | 16,902,024 | 17,866,863 |
| 29. Common capital stock..... | 2,500,000 | 2,500,000 |
| 30. Preferred capital stock..... | | |
| 31. Aggregate write-ins for other than special surplus funds..... | | |
| 32. Surplus notes..... | | |
| 33. Gross paid in and contributed surplus..... | 7,000,000 | 7,000,000 |
| 34. Aggregate write-ins for special surplus funds..... | | |
| 35. Unassigned funds (surplus)..... | 19,965,445 | 19,537,863 |
| 36. Less treasury stock, at cost: | | |
| 36.1 shares common (value included in Line 29 \$)..... | | |
| 36.2 shares preferred (value included in Line 30 \$)..... | | |
| 37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)..... | 26,965,445 | 26,537,863 |
| 38. Totals of Lines 29, 30 and 37..... | 29,465,445 | 29,037,863 |
| 39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)..... | 46,367,469 | 46,904,726 |
| DETAILS OF WRITE-INS | | |
| 2501. | | |
| 2502. | | |
| 2503. | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page..... | | |
| 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)..... | | |
| 3101. | | |
| 3102. | | |
| 3103. | | |
| 3198. Summary of remaining write-ins for Line 31 from overflow page..... | | |
| 3199. Totals (Lines 3101 through 3103 plus 3198)(Line 31 above)..... | | |
| 3401. | | |
| 3402. | | |
| 3403. | | |
| 3498. Summary of remaining write-ins for Line 34 from overflow page..... | | |
| 3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)..... | | |

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

SUMMARY OF OPERATIONS

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|--|------------------------------|----------------------------|--------------------------------------|
| 1. Premiums and annuity considerations for life and accident and health contracts | 880,549 | 894,407 | 4,248,113 |
| 2. Considerations for supplementary contracts with life contingencies | | | |
| 3. Net investment income | 195,491 | 200,691 | 800,478 |
| 4. Amortization of Interest Maintenance Reserve (IMR) | (2,563) | (442) | (742) |
| 5. Separate Accounts net gain from operations excluding unrealized gains or losses | | | |
| 6. Commissions and expense allowances on reinsurance ceded | 577,988 | 856,798 | 3,230,150 |
| 7. Reserve adjustments on reinsurance ceded | 208,461 | 594,482 | 1,517,174 |
| 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 | | | (44,983) |
| 9. Totals (Lines 1 to 8.3) | 1,859,926 | 2,545,937 | 9,750,190 |
| 10. Death benefits | 300,919 | 966,042 | 1,652,852 |
| 11. Matured endowments (excluding guaranteed annual pure endowments) | | | |
| 12. Annuity benefits | | | |
| 13. Disability benefits and benefits under accident and health contracts | 312,357 | 518,346 | 1,696,870 |
| 14. Coupons, guaranteed annual pure endowments and similar benefits | | | |
| 15. Surrender benefits and withdrawals for life contracts | | | |
| 16. Group conversions | | | |
| 17. Interest and adjustments on contract or deposit-type contract funds | | | |
| 18. Payments on supplementary contracts with life contingencies | | | |
| 19. Increase in aggregate reserves for life and accident and health contracts | (607,368) | (476,396) | (2,085,183) |
| 20. Totals (Lines 10 to 19) | 5,907 | 1,007,992 | 1,264,540 |
| 21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) | 839,251 | 1,355,509 | 4,920,700 |
| 22. Commissions and expense allowances on reinsurance assumed | 5,277 | 11,244 | 37,146 |
| 23. General insurance expenses | 458,540 | 421,440 | 1,671,967 |
| 24. Insurance taxes, licenses and fees, excluding federal income taxes | 90,838 | 83,808 | 441,784 |
| 25. Increase in loading on deferred and uncollected premiums | (7,694) | 25,470 | (9,748) |
| 26. Net transfers to or (from) Separate Accounts net of reinsurance | | | |
| 27. Aggregate write-ins for deductions | | | |
| 28. Totals (Lines 20 to 27) | 1,392,119 | 2,905,463 | 8,326,390 |
| 29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28) | 467,807 | (359,526) | 1,423,800 |
| 30. Dividends to policyholders | | | |
| 31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30) | 467,807 | (359,526) | 1,423,800 |
| 32. Federal and foreign income taxes incurred (excluding tax on capital gains) | 160,857 | (89,188) | 511,117 |
| 33. Net gain from operations after dividends to policyholders and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) | 306,950 | (270,338) | 912,683 |
| 34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$415 (excluding taxes of \$ transferred to the IMR) | (415) | 16,543 | 14,977 |
| 35. Net income (Line 33 plus Line 34) | 306,535 | (253,796) | 927,660 |
| CAPITAL AND SURPLUS ACCOUNT | | | |
| 36. Capital and surplus, December 31, prior year | 29,037,863 | 27,926,152 | 27,926,152 |
| 37. Net income (Line 35) | 306,535 | (253,796) | 927,660 |
| 38. Change in net unrealized capital gains (losses) less capital gains tax of \$ | 130,452 | (513,605) | 36,269 |
| 39. Change in net unrealized foreign exchange capital gain (loss) | | | |
| 40. Change in net deferred income tax | (1,728) | 59,782 | (18,617) |
| 41. Change in nonadmitted assets | (4,582) | (121,881) | 147,995 |
| 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 | (3,095) | (427) | 18,403 |
| 45. Change in treasury stock | | | |
| 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 | | | |
| 54. Net change in capital and surplus for the year (Lines 37 through 53) | 427,582 | (829,926) | 1,111,711 |
| 55. Capital and surplus, as of statement date (Lines 36 + 54) | 29,465,445 | 27,096,226 | 29,037,863 |
| DETAILS OF WRITE-INS | | | |
| 08.301. Miscellaneous profit | | | (44,983) |
| 08.302. | | | |
| 08.303. | | | |
| 08.398. Summary of remaining write-ins for Line 8.3 from overflow page | | | |
| 08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above) | | | (44,983) |
| 2701. | | | |
| 2702. | | | |
| 2703. | | | |
| 2798. Summary of remaining write-ins for Line 27 from overflow page | | | |
| 2799. Totals (Lines 2701 through 2703 plus 2798)(Line 27 above) | | | |
| 5301. | | | |
| 5302. | | | |
| 5303. | | | |
| 5398. Summary of remaining write-ins for Line 53 from overflow page | | | |
| 5399. Totals (Lines 5301 through 5303 plus 5398)(Line 53 above) | | | |

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

CASH FLOW

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| Cash from Operations | | | |
| 1. Premiums collected net of reinsurance | 799,293 | 1,048,278 | 4,253,259 |
| 2. Net investment income | 196,064 | 213,194 | 855,060 |
| 3. Miscellaneous income | 760,848 | 994,296 | 4,613,804 |
| 4. Total (Lines 1 to 3) | 1,756,205 | 2,255,768 | 9,722,123 |
| 5. Benefit and loss related payments | 963,989 | 1,249,362 | 3,454,854 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 1,569,436 | 1,814,832 | 6,852,698 |
| 8. Dividends paid to policyholders | | | |
| 9. Federal and foreign income taxes paid (recovered) net of \$415 tax on capital gains (losses) | 250,000 | | 211,059 |
| 10. Total (Lines 5 through 9) | 2,783,425 | 3,064,194 | 10,518,611 |
| 11. Net cash from operations (Line 4 minus Line 10) | (1,027,220) | (808,426) | (796,488) |
| Cash from Investments | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 12.1 Bonds | 524,930 | 611,375 | 1,357,862 |
| 12.2 Stocks | | | |
| 12.3 Mortgage loans | | | |
| 12.4 Real estate | | | |
| 12.5 Other invested assets | | | |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | | | |
| 12.7 Miscellaneous proceeds | 20,813 | 19,500 | (1,313) |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 545,743 | 630,875 | 1,356,549 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds | | | 254,923 |
| 13.2 Stocks | | | |
| 13.3 Mortgage loans | | | |
| 13.4 Real estate | | | |
| 13.5 Other invested assets | | | |
| 13.6 Miscellaneous applications | | | |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | | | 254,923 |
| 14. Net increase (or decrease) in contract loans and premium notes | | | |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | 545,743 | 630,875 | 1,101,626 |
| Cash from Financing and Miscellaneous Sources | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes | | | |
| 16.2 Capital and paid in surplus, less treasury stock | | | |
| 16.3 Borrowed funds | | | |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | | | |
| 16.5 Dividends to stockholders | | | |
| 16.6 Other cash provided (applied) | 142,812 | 10,228 | (7,606) |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) | 142,812 | 10,228 | (7,606) |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) | (338,665) | (167,323) | 297,532 |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year | 1,665,890 | 1,368,357 | 1,368,357 |
| 19.2 End of period (Line 18 plus Line 19.1) | 1,327,225 | 1,201,034 | 1,665,890 |

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

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

EXHIBIT 1

DIRECT PREMIUMS AND DEPOSIT-TYPE CONTRACTS

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| 1. Industrial life | | | |
| 2. Ordinary life insurance | | | |
| 3. Ordinary individual annuities | | | |
| 4. Credit life (group and individual) | 1,379,953 | 2,046,010 | 7,496,874 |
| 5. Group life insurance | | | |
| 6. Group annuities | | | |
| 7. A & H - group | | | |
| 8. A & H - credit (group and individual) | 1,194,022 | 1,563,943 | 5,576,931 |
| 9. A & H - other | | | |
| 10. Aggregate of all other lines of business | | | |
| 11. Subtotal | 2,573,975 | 3,609,953 | 13,073,805 |
| 12. Deposit-type contracts | | | |
| 13. Total | 2,573,975 | 3,609,953 | 13,073,805 |
| DETAILS OF WRITE-INS | | | |
| 1001. | | | |
| 1002. | | | |
| 1003. | | | |
| 1098. Summary of remaining write-ins for Line 10 from overflow page | | | |
| 1099. Totals (Lines 1001 through 1003 plus 1098)(Line 10 above) | | | |

NOTES TO FINANCIAL STATEMENTS

(1) Summary of Significant Accounting Policies

A. Accounting Practices

The accompanying statutory financial statements of American Modern Life Insurance Company (the Company) have been prepared in accordance with accounting practices prescribed or permitted by the Ohio Department of Insurance (ODOI). The ODOI recognizes statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under the Ohio Insurance Law. Prescribed statutory accounting practices are those practices that are incorporated directly or by reference in state laws, regulations and general administrative rules applicable to all insurance enterprises domiciled in a particular state. Permitted statutory accounting practices include practices not prescribed by the domiciliary state, but allowed by the domiciliary state regulatory authority. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures* manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state has adopted the prescribed accounting practices as stated in NAIC SAP, without modification. The Company has no material statutory accounting practices that differ from those of the state of Ohio or the NAIC accounting practices.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Ohio is show below:

| | <u>03/31/2016</u> | <u>12/31/2015</u> |
|---|-------------------|-------------------|
| 1. Net Income, Ohio State basis: | \$ 306,535 | \$ 927,660 |
| 2. State Prescribed Practices (Income): None | - | - |
| 3. State Permitted Practices (Income): None | - | - |
| 4. Net Income, NAIC SAP: | \$ 306,535 | \$ 927,660 |
| 5. Statutory Surplus, Ohio State basis: | \$ 29,465,445 | \$ 29,037,863 |
| 6. State Prescribed Practices (Surplus): None | - | - |
| 7. State Permitted Practices (Surplus): None | - | - |
| 8. Statutory Surplus, NAIC SAP | \$ 29,465,445 | \$ 29,037,863 |

B. Use of Estimates

No significant change

C. Accounting Policy

No significant change

(2) Accounting Changes and Corrections of Errors

Not applicable

(3) Business Combinations and Goodwill

Not applicable

(4) Discontinued Operations

Not applicable

(5) Investments

A. Not applicable

B. Not applicable

C. Not applicable

NOTES TO FINANCIAL STATEMENTS

(5) Investments (Continued)

D. Loan-Backed Securities

- 1) Prepayment assumptions for single class and multi-class mortgage-backed/asset-backed securities were obtained from Bloomberg when available. Other payment speed assumptions for a small number of holdings were reviewed with the appropriate affiliated company analyst by evaluating the underlying collateral.
- 2) There were no other than temporary impairments (OTTI) recorded as of March 31, 2016 due to management's intent to sell or inability to hold a security until recovery.
- 3) As of March 31, 2016, the Company did not hold any securities for which an OTTI has previously been recognized.
- 4) All impaired securities (fair value is less than cost or amortized cost) for which an OTTI has not been recognized in earnings as a realized loss (including securities with a recognized OTTI for non-interest related declines when a non-recognized interest related impairment remains) as of March 31, 2016:

| | <u>Aggregate</u> | <u>Less than 12 months</u> | <u>12 Months or longer</u> |
|---|------------------|----------------------------|----------------------------|
| A. Gross Unrealized Losses | \$ (116) | \$ (116) | \$ - |
| B. Fair Value of Securities with Unrealized Losses | \$ 5,364 | \$ 5,364 | \$ - |

- 5) In determining whether a decline in value is other than temporary, the Company considers several factors including, but not limited to the following: the extent and duration of the decline in value; the Company's inability or lack of intent to retain the investment for a period of time sufficient to recover the amortized cost basis; and the performance of the security's underlying collateral and projected future cash flows. In projecting future cash flows, the Company incorporates inputs from third-party sources and applies reasonable judgment in developing assumptions used to estimate the probability and timing of collecting all contractual cash flows.

E. Not applicable

F. Not applicable

G. Not applicable

H. No significant change

I. Not Applicable

J. Not applicable

K. Not applicable

(6) Joint Ventures, Partnerships and Limited Liability Companies

Not applicable

(7) Investment Income

None

(8) Derivative Instruments

Not applicable

(9) Income Taxes

No significant change

(10) Information Concerning Parent, Subsidiaries and Affiliates

No significant change

(11) Debt

Not applicable

(12) Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

Not applicable

NOTES TO FINANCIAL STATEMENTS

(13) Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No significant change

(14) Contingencies

No significant change

(15) Leases

Not applicable

(16) Information About Financial Instruments With Off-Balance Sheet Risk And Financial Instruments With Concentrations of Credit Risk

No significant change

(17) Sale Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

Not applicable

(18) Gain or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans

Not applicable

(19) Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable

(20) Fair Value Measurements

The fair value of the Company's financial assets and financial liabilities has been determined using available market information as of March 31, 2016. Although the Company is not aware of any factors that would significantly affect the fair value of financial assets and financial liabilities, such amounts have not been comprehensively revalued since those dates. Therefore, estimates of fair value subsequent to the valuation dates may differ significantly from the amounts presented herein. Considerable judgment is required to interpret market data to develop the estimates of fair value. The use of different market assumptions and/or estimation methodologies may have a material effect on the estimated fair value amounts.

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (exit price) in an orderly transaction between market participants at the measurement date. In determining fair value, the Company primarily uses the market approach which utilizes prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities. To a lesser extent, the Company also uses the income approach which uses discounted cash flows to determine fair value. When applying either approach, the Company maximizes the use of observable inputs and minimizes the use of unobservable inputs. Observable inputs reflect the assumptions market participants would use in valuing a financial instrument based on market data obtained from sources independent of the Company. Unobservable inputs reflect the Company's estimates about the assumptions market participants would use in valuing financial assets and financial liabilities based on the best information available in the circumstances.

The Company is required to categorize its financial assets and financial liabilities carried at fair value on the statutory statements of admitted assets, liabilities and capital and surplus according to a three-level hierarchy. A level is assigned to each financial asset and financial liability based on the lowest level input that is significant to the fair value measurement in its entirety. The levels of fair value hierarchy are as follows:

Level 1 – Fair value is based on unadjusted quoted prices for identical assets or liabilities in an active market. The types of assets and liabilities utilizing Level 1 valuations generally include money-market funds.

Level 2 – Fair value is based on significant inputs, other than quoted prices included in Level 1, that are observable in active markets for identical or similar assets and liabilities.

Level 3 – Fair value is based on at least one or more significant unobservable inputs. These inputs reflect the Company's assumptions about the inputs market participants would use in pricing the assets or liabilities.

The Company uses prices and inputs that are current as of the measurement date. In periods of market disruption, the ability to observe prices and inputs may be reduced, which could cause an asset or liability to be reclassified to a lower level.

Inputs used to measure fair value of an asset or liability may fall into different levels of the fair value hierarchy. In these situations, the Company will determine the level in which the fair value falls based upon the lowest level input that is significant to the determination of the fair value.

NOTES TO FINANCIAL STATEMENTS

(20) Fair Value Measurements (Continued)

The following table summarizes the Company's financial assets and financial liabilities measured at fair value as of March 31, 2016.

| | Level 1 | Level 2 | Level 3 | Total |
|------------------------|---------------------|-------------|-------------|---------------------|
| Short-term investments | <u>\$ 1,077,235</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ 1,077,235</u> |
| Total assets | <u>\$ 1,077,235</u> | <u>\$ -</u> | <u>\$ -</u> | <u>\$ 1,077,235</u> |

1. There were no transfers between Level 1 and Level 2 for the period ending March 31, 2016.
2. The Company did not have any Level 3 assets as of March 31, 2016.
3. Transfers of securities among levels occur at the beginning of the reporting period.
4. Not applicable – no Level 2 or Level 3 assets or liabilities.
5. Not applicable – no derivative assets or liabilities.

B. Not applicable

C. The following table summarizes by level of fair value hierarchy the aggregate fair value of all financial assets held by the Company as of March 31, 2016:

| Type of financial instrument | Aggregate fair value | Admitted assets | Level 1 | Level 2 | Level 3 | Not practicable carrying value |
|------------------------------|----------------------|----------------------|----------------------|----------------------|-------------|--------------------------------|
| Assets: | | | | | | |
| Bonds | \$ 32,496,541 | \$ 30,320,161 | \$ 17,336,389 | \$ 15,160,152 | \$ - | \$ - |
| Short-term | <u>1,077,235</u> | <u>1,077,235</u> | <u>1,077,235</u> | <u>-</u> | <u>-</u> | <u>-</u> |
| Total assets | <u>\$ 33,573,776</u> | <u>\$ 31,397,396</u> | <u>\$ 18,413,624</u> | <u>\$ 15,160,152</u> | <u>\$ -</u> | <u>\$ -</u> |

D. Not applicable

(21) Other Items

No significant change

(22) Events Subsequent

Not applicable

(23) Reinsurance

No significant change

(24) Retrospectively Rated Contracts

Not applicable

NOTES TO FINANCIAL STATEMENTS

(25) Change in Incurred Losses and Loss Adjustment Expenses.

Activity in the liability for unpaid accident and health claims and claim adjustment expenses is summarized as follows:

| | <u>Current Year</u> | <u>Prior Year</u> |
|-------------------------------|---------------------|---------------------|
| Balance at January 1 | \$ 4,851,355 | \$ 6,765,228 |
| Less: reinsurance recoverable | <u>2,831,669</u> | <u>3,963,326</u> |
| Net balance at January 1 | 2,019,686 | 2,801,902 |
| Incurred related to: | | |
| Current year | 353,579 | 1,006,643 |
| Prior years | <u>(214,043)</u> | <u>(127,583)</u> |
| Total incurred | 139,536 | 879,060 |
| Paid related to: | | |
| Current year | 10,043 | 247,706 |
| Prior years | <u>325,632</u> | <u>1,413,570</u> |
| Total paid | 335,675 | 1,661,276 |
| Net balance at end of period | 1,823,547 | 2,019,686 |
| Plus: reinsurance recoverable | <u>2,534,864</u> | <u>2,831,669</u> |
| Balance at end of period | <u>\$ 4,358,411</u> | <u>\$ 4,851,355</u> |

(26) Intercompany Pooling Arrangements

Not applicable

(27) Structured Settlements

Not applicable

(28) Health Care Receivables

Not applicable

(29) Participating Policies

Not applicable

(30) Premium Deficiency Reserves

Not applicable

(31) Reserves for Life Contracts and Deposit-Type Contracts

Not applicable

(32) Analysis of Annuity Actuarial Reserves and Deposit Liabilities by Withdrawal Characteristics

Not applicable

(33) Premium and Annuity Considerations Deferred and Uncollected

Not applicable

(34) Separate Accounts

Not applicable

(35) Loss/Claim Adjustment Expenses

No significant change

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 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 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 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No []
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
N/A
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [] N/A [X]
If yes, attach an explanation.
N/A
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2012
- 6.2 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. 12/31/2012
- 6.3 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). 05/07/2014
- 6.4 By what department or departments?
The Company has been examined as part of a group level examination by the Minnesota Department of Commerce with California Department of Insurance, Ohio Department of Insurance and Arkansas Department of Insurance participating.
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 7.1 Has this 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]
- 7.2 If yes, give full information:
N/A
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
N/A
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [X] No []
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal 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 |
|--|-----------------------------|----------|----------|-----------|----------|
| Securian Financial Services, Inc. | St. Paul, MN | NO | NO | NO | YES |
| Securian Trust Company N.A. | St. Paul, MN | NO | YES | NO | NO |
| C.R.I. Securities LLC | St. Paul, MN | NO | NO | NO | YES |
| H. Beck, Inc. | Rockville, MD | NO | NO | NO | YES |
| Asset Allocation & Management Company, LLC | Chicago, IL | NO | NO | NO | YES |

GENERAL INTERROGATORIES

- 9.1 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 [] No []
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:
N/A
- 9.2 Has the code of ethics for senior managers been amended? Yes [] No []
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
N/A
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No []
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).
N/A

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No []
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No []
- 11.2 If yes, give full and complete information relating thereto:
N/A
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$
13. Amount of real estate and mortgages held in short-term investments: \$
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No []
- 14.2 If yes, please complete the following:
- | | 1
Prior Year-End
Book/Adjusted
Carrying Value | 2
Current Quarter
Book/Adjusted
Carrying Value |
|---|--|---|
| 14.21 Bonds | \$ | \$ |
| 14.22 Preferred Stock | \$ | \$ |
| 14.23 Common Stock | \$ 12,276,728 | \$ 12,407,180 |
| 14.24 Short-Term Investments | \$ | \$ |
| 14.25 Mortgage Loans on Real Estate | \$ | \$ |
| 14.26 All Other | \$ | \$ |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | \$ 12,276,728 | \$ 12,407,180 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |
- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No []
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []
If no, attach a description with this statement.
N/A

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY
GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2\$
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2\$
- 16.3 Total payable for securities lending reported on the liability page\$

17. 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 []
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

| 1 Name of Custodian(s) | 2 Custodian Address |
|---|---|
| State Street Bank & Trust Company | 801 Pennsylvania Ave, Kansas City, MO 64105 |

- 17.2 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) |
|--------------|------------------|------------------------------|
| | | |

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]

- 17.4 If yes, give full information relating thereto:

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

- 17.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

| 1 Central Registration Depository | 2 Name(s) | 3 Address |
|--------------------------------------|--|---|
| 109905 | Advantus Capital Management, Inc. | 400 Robert Street North, St. Paul, MN 55101 |

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

- 18.2 If no, list exceptions:

N/A

GENERAL INTERROGATORIES

PART 2 - LIFE & HEALTH

| | | |
|------|--|------------------|
| 1. | Report the statement value of mortgage loans at the end of this reporting period for the following categories: | 1 Amount |
| 1.1 | Long-Term Mortgages In Good Standing | |
| 1.11 | Farm Mortgages | \$ |
| 1.12 | Residential Mortgages | \$ |
| 1.13 | Commercial Mortgages | \$ |
| 1.14 | Total Mortgages in Good Standing | \$ _____ |
| 1.2 | Long-Term Mortgages In Good Standing with Restructured Terms | |
| 1.21 | Total Mortgages in Good Standing with Restructured Terms | \$ _____ |
| 1.3 | Long-Term Mortgage Loans Upon which Interest is Overdue more than Three Months | |
| 1.31 | Farm Mortgages | \$ |
| 1.32 | Residential Mortgages | \$ |
| 1.33 | Commercial Mortgages | \$ |
| 1.34 | Total Mortgages with Interest Overdue more than Three Months | \$ _____ |
| 1.4 | Long-Term Mortgage Loans in Process of Foreclosure | |
| 1.41 | Farm Mortgages | \$ |
| 1.42 | Residential Mortgages | \$ |
| 1.43 | Commercial Mortgages | \$ |
| 1.44 | Total Mortgages in Process of Foreclosure | \$ |
| 1.5 | Total Mortgage Loans (Lines 1.14 + 1.21 + 1.34 + 1.44) (Page 2, Column 3, Lines 3.1 + 3.2) | \$ _____ |
| 1.6 | Long-Term Mortgages Foreclosed, Properties Transferred to Real Estate in Current Quarter | |
| 1.61 | Farm Mortgages | \$ |
| 1.62 | Residential Mortgages | \$ |
| 1.63 | Commercial Mortgages | \$ |
| 1.64 | Total Mortgages Foreclosed and Transferred to Real Estate | \$ _____ |
| 2. | Operating Percentages: | |
| 2.1 | A&H loss percent | 28.000 % |
| 2.2 | A&H cost containment percent | % |
| 2.3 | A&H expense percent excluding cost containment expenses | 73.000 % |
| 3.1 | Do you act as a custodian for health savings accounts? | Yes [] No [X] |
| 3.2 | If yes, please provide the amount of custodial funds held as of the reporting date | \$ |
| 3.3 | Do you act as an administrator for health savings accounts? | Yes [] No [X] |
| 3.4 | If yes, please provide the balance of the funds administered as of the reporting date | \$ |

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

| 1 NAIC Company Code | 2 ID Number | 3 Effective Date | 4 Name of Reinsurer | 5 Domiciliary Jurisdiction | 6 Type of Reinsurance Ceded | 7 Type of Reinsurer | 8 Certified Reinsurer Rating (1 through 6) | 9 Effective Date of Certified Reinsurer Rating |
|------------------------------|-------------------|------------------------|------------------------|----------------------------------|--------------------------------------|------------------------|--|---|
| NONE | | | | | | | | |

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY
SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Current Year To Date - Allocated by States and Territories

| 1 States, Etc. | Active Status | Life Contracts | | Direct Business Only | | | |
|--|---------------|------------------------------|-----------------------------|--|---------------------------|--------------------------------|-----------------------------|
| | | 2 Life Insurance Premiums | 3 Annuity Considerations | 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 |
| 1. Alabama | AL | L | 37,498 | | 45 | 37,543 | |
| 2. Alaska | AK | L | | | | | |
| 3. Arizona | AZ | L | 4,249 | | 3,405 | 7,654 | |
| 4. Arkansas | AR | L | 24,732 | | 20,710 | 45,442 | |
| 5. California | CA | L | 26,245 | | 19,174 | 45,419 | |
| 6. Colorado | CO | L | 13,625 | | 16,519 | 30,144 | |
| 7. Connecticut | CT | L | 10,563 | | 14,453 | 25,016 | |
| 8. Delaware | DE | L | | | | | |
| 9. District of Columbia | DC | L | | | | | |
| 10. Florida | FL | L | | | | | |
| 11. Georgia | GA | L | 11,025 | | 2,899 | 13,924 | |
| 12. Hawaii | HI | L | | | | | |
| 13. Idaho | ID | L | 15,217 | | 14,401 | 29,618 | |
| 14. Illinois | IL | L | 39,756 | | 16,822 | 56,578 | |
| 15. Indiana | IN | L | 52,141 | | 73,558 | 125,699 | |
| 16. Iowa | IA | L | 18,345 | | 22,442 | 40,787 | |
| 17. Kansas | KS | L | 4,617 | | 2,423 | 7,040 | |
| 18. Kentucky | KY | L | 11,253 | | | 11,253 | |
| 19. Louisiana | LA | L | | | | | |
| 20. Maine | ME | L | | | | | |
| 21. Maryland | MD | L | | | | | |
| 22. Massachusetts | MA | L | | | | | |
| 23. Michigan | MI | L | 41,504 | | 22,280 | 63,784 | |
| 24. Minnesota | MN | L | 49,225 | | 44,102 | 93,327 | |
| 25. Mississippi | MS | L | 8,451 | | 3,675 | 12,126 | |
| 26. Missouri | MO | L | 507,156 | | 354,043 | 861,199 | |
| 27. Montana | MT | L | 3,647 | | 2,645 | 6,292 | |
| 28. Nebraska | NE | L | 11,661 | | 14,214 | 25,875 | |
| 29. Nevada | NV | L | 4,055 | | 2,616 | 6,671 | |
| 30. New Hampshire | NH | N | | | | | |
| 31. New Jersey | NJ | N | | | | | |
| 32. New Mexico | NM | L | | | | | |
| 33. New York | NY | L | 99,978 | | 30,836 | 130,814 | |
| 34. North Carolina | NC | L | | | | | |
| 35. North Dakota | ND | L | 1,812 | | 6,485 | 8,297 | |
| 36. Ohio | OH | L | 301,781 | | 364,849 | 666,630 | |
| 37. Oklahoma | OK | L | | | | | |
| 38. Oregon | OR | L | 42,360 | | 42,728 | 85,088 | |
| 39. Pennsylvania | PA | L | 8,341 | | 2,205 | 10,546 | |
| 40. Rhode Island | RI | L | | | | | |
| 41. South Carolina | SC | L | | | | | |
| 42. South Dakota | SD | L | 3,859 | | 2,671 | 6,530 | |
| 43. Tennessee | TN | L | 26,885 | | 9,600 | 36,485 | |
| 44. Texas | TX | L | 682 | | 5 | 687 | |
| 45. Utah | UT | L | 4,658 | | 2,621 | 7,279 | |
| 46. Vermont | VT | L | | | | | |
| 47. Virginia | VA | L | (62) | | (191) | (253) | |
| 48. Washington | WA | L | 51,562 | | 48,731 | 100,293 | |
| 49. West Virginia | WV | L | 5,905 | | (985) | 4,920 | |
| 50. Wisconsin | WI | L | 13,085 | | 31,292 | 44,377 | |
| 51. Wyoming | WY | L | 1,791 | | 2,044 | 3,835 | |
| 52. American Samoa | AS | N | | | | | |
| 53. Guam | GU | N | | | | | |
| 54. Puerto Rico | PR | N | | | | | |
| 55. U.S. Virgin Islands | VI | N | | | | | |
| 56. Northern Mariana Islands | MP | N | | | | | |
| 57. Canada | CAN | N | | | | | |
| 58. Aggregate Other Aliens | OT | XXX | | | | | |
| 59. Subtotal | (a) | 49 | 1,457,602 | | 1,193,317 | 2,650,919 | |
| 90. Reporting entity contributions for employee benefits plans | XXX | | | | | | |
| 91. Dividends or refunds applied to purchase paid-up additions and annuities | XXX | | | | | | |
| 92. Dividends or refunds applied to shorten endowment or premium paying period | XXX | | | | | | |
| 93. Premium or annuity considerations waived under disability or other contract provisions | XXX | | | | | | |
| 94. Aggregate or other amounts not allocable by State | XXX | | | | | | |
| 95. Totals (Direct Business) | XXX | | 1,457,602 | | 1,193,317 | 2,650,919 | |
| 96. Plus Reinsurance Assumed | XXX | | 9,711 | | 18,369 | 28,080 | |
| 97. Totals (All Business) | XXX | | 1,467,313 | | 1,211,686 | 2,678,999 | |
| 98. Less Reinsurance Ceded | XXX | | 1,022,503 | | 857,204 | 1,879,707 | |
| 99. Totals (All Business) less Reinsurance Ceded | XXX | | 444,810 | | 354,482 | 799,292 | |
| DETAILS OF WRITE-INS | | | | | | | |
| 58001. ZZZ Other Alien | XXX | | | | | | |
| 58002. | XXX | | | | | | |
| 58003. | XXX | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | XXX | | | | | | |
| 58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above) | XXX | | | | | | |
| 9401. | XXX | | | | | | |
| 9402. | XXX | | | | | | |
| 9403. | XXX | | | | | | |
| 9498. Summary of remaining write-ins for Line 94 from overflow page | XXX | | | | | | |
| 9499. Totals (Lines 9401 through 9403 plus 9498)(Line 94 above) | XXX | | | | | | |

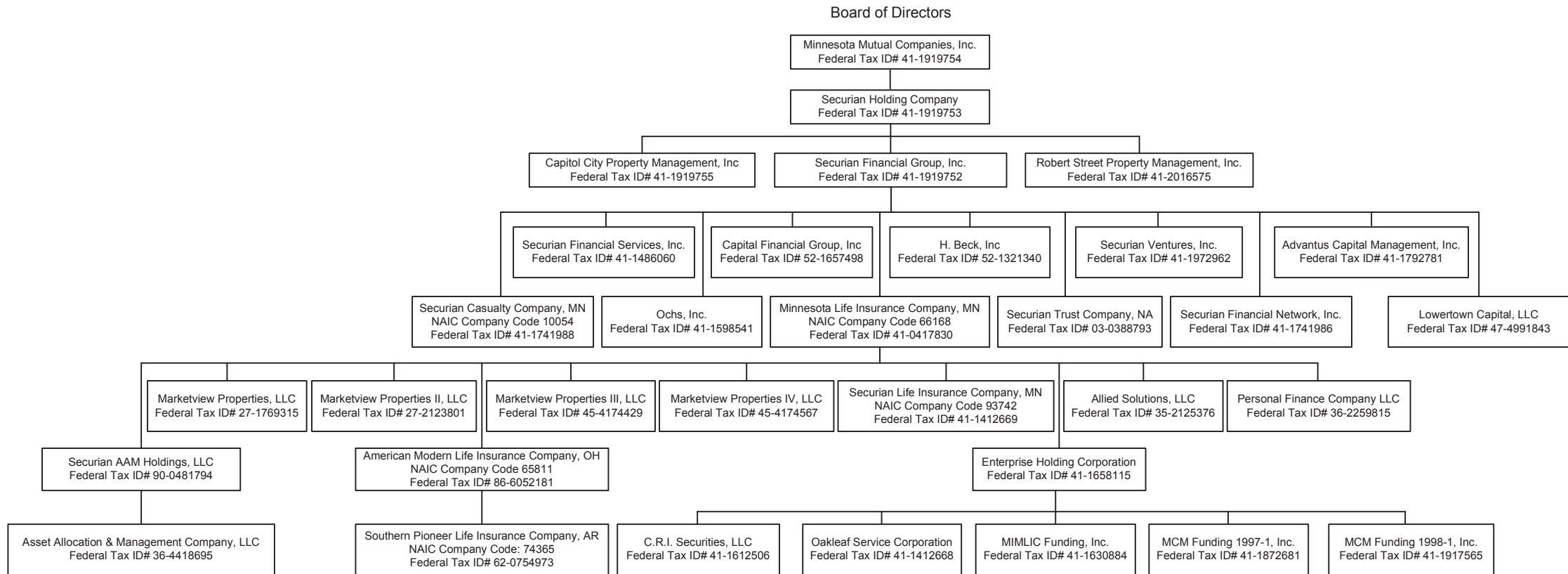
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
 PART 1 – ORGANIZATIONAL CHART
 Organization Chart of Minnesota Mutual Companies, Inc., Subsidiaries, and Affiliates

Policyholders of Minnesota Mutual Companies, Inc.



STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|------------|------------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|---|--|--|---|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| 0869 | Minnesota Mutual Group | 66168 | 41-0417830 | | | | MINNESOTA LIFE INSURANCE COMPANY | MN | UDP | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 36-2259815 | | | | PERSONAL FINANCE COMPANY, LLC | DE | NIA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1412668 | | | | OAKLEAF SERVICE CORPORATION | MN | NIA | ENTERPRISE HOLDING CORPORATION | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1792781 | | | | ADVANTUS CAPITAL MANAGEMENT, INC. | MN | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1486060 | | | | SECURIAN FINANCIAL SERVICES, INC. | MN | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1612506 | | | | C.R.I. SECURITIES, LLC | MN | NIA | ENTERPRISE HOLDING CORPORATION | Ownership | 50.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | 1 |
| 0869 | Minnesota Mutual Group | 93742 | 41-1412669 | | | | SECURIAN LIFE INSURANCE COMPANY | MN | IA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| 0869 | Minnesota Mutual Group | 10054 | 41-1741988 | | | | SECURIAN CASUALTY COMPANY | MN | IA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1741986 | | | | SECURIAN FINANCIAL NETWORK, INC. | MN | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1630884 | | | | MIMLIC FUNDING, INC. | MN | NIA | ENTERPRISE HOLDING CORPORATION | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1872681 | | | | MCM FUNDING 1997-1, INC. | MN | NIA | ENTERPRISE HOLDING CORPORATION | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1917565 | | | | MCM FUNDING 1998-1, INC. | MN | NIA | ENTERPRISE HOLDING CORPORATION | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1919755 | | | | CAPITOL CITY PROPERTY MANAGEMENT, INC. | MN | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1919754 | | | | MINNESOTA MUTUAL COMPANIES, INC. | MN | UIP | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1919753 | | | | SECURIAN HOLDING COMPANY | DE | UIP | MINNESOTA MUTUAL COMPANIES, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1919752 | | | | SECURIAN FINANCIAL GROUP, INC. | DE | UIP | SECURIAN HOLDING COMPANY | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 03-0388793 | 3089752 | | | SECURIAN TRUST COMPANY, NA | | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1972962 | | | | SECURIAN VENTURES, INC. | MN | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-2016575 | | | | ROBERT STREET PROPERTY MANAGEMENT, INC. | MN | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 35-2125376 | | | | ALLIED SOLUTIONS, LLC | IN | NIA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1658115 | | | | ENTERPRISE HOLDING COMPANY | MN | NIA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 52-1657498 | | | | CAPITAL FINANCIAL GROUP, INC. | MD | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 52-1321340 | | | | H. BECK, INC. | MD | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 41-1598541 | | | | OCHS, INC. | MN | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 90-0481794 | | | | SECURIAN AAM HOLDINGS LLC | DE | NIA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | 100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
|------------|------------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|---|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | * |
| | | | 36-4418695 | | | | ASSET ALLOCATION & MANAGEMENT COMPANY LLC | IL | NIA | SECURIAN AAM HOLDINGS LLC | Ownership | .66.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| .0869 | Minnesota Mutual Group | .65811 | 86-6052181 | | | | AMERICAN MODERN LIFE INSURANCE COMPANY | OH | RE | MINNESOTA LIFE INSURANCE COMPANY | Ownership | .100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| .0869 | Minnesota Mutual Group | .74365 | 62-0754973 | | | | SOUTHERN PIONEER LIFE INSURANCE COMPANY | AR | DS | AMERICAN MODERN LIFE INSURANCE COMPANY | Ownership | .100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 27-1769315 | | | | MARKETVIEW PROPERTIES, LLC | MN | NIA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | .100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 27-2123801 | | | | MARKETVIEW PROPERTIES II, LLC | MN | NIA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | .100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 45-4174429 | | | | MARKETVIEW PROPERTIES III, LLC | MN | NIA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | .100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 45-4174567 | | | | MARKETVIEW PROPERTIES IV, LLC | MN | NIA | MINNESOTA LIFE INSURANCE COMPANY | Ownership | .100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |
| | | | 47-4991843 | | | | LOWERTOWN CAPITAL, LLC | DE | NIA | SECURIAN FINANCIAL GROUP, INC. | Ownership | .100.000 | POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC. | |

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

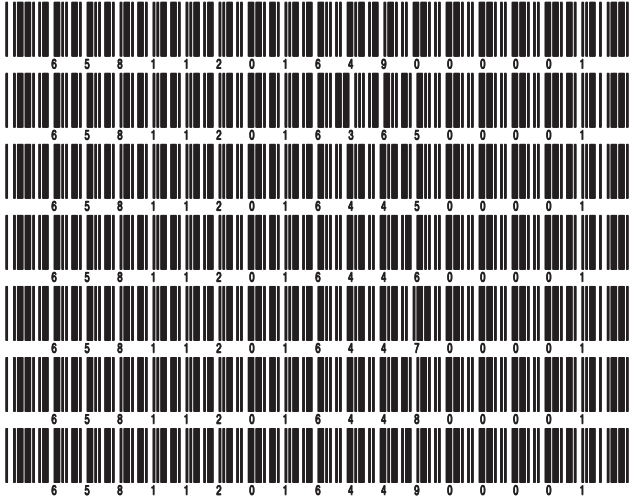
| | Response |
|--|----------|
| 1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? | NO |
| 2. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? | NO |
| 3. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC? | NO |
| 4. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC? | NO |
| 5. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC? | NO |
| 6. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC? | NO |
| 7. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC? | NO |

Explanation:

1. Not applicable
2. Not applicable
3. Not applicable
4. Not applicable
5. Not applicable
6. Not applicable
7. Not applicable

Bar Code:

1. Trusteed Surplus Statement [Document Identifier 490]
2. Medicare Part D Coverage Supplement [Document Identifier 365]
3. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
4. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]
5. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
6. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
7. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]



NONE

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

SCHEDULE A - VERIFICATION

Real Estate

| | 1 Year to Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year | | |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Current year change in encumbrances | | |
| 4. Total gain (loss) on disposals | | |
| 5. Deduct amounts received on disposals | | |
| 6. Total foreign exchange change in book/adjusted carrying value | | |
| 7. Deduct current year's other than temporary impairment recognized | | |
| 8. Deduct current year's depreciation | | |
| 9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) | | |
| 10. Deduct total nonadmitted amounts | | |
| 11. Statement value at end of current period (Line 9 minus Line 10) | | |

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

| | 1 Year to Date | 2 Prior Year Ended December 31 |
|---|-------------------|--------------------------------------|
| 1. Book value/recorded investment excluding accrued interest, December 31 of prior year | | |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | | |
| 4. Accrual of discount | | |
| 5. Unrealized valuation increase (decrease) | | |
| 6. Total gain (loss) on disposals | | |
| 7. Deduct amounts received on disposals | | |
| 8. Deduct amortization of premium and mortgage interest points and commitment fees | | |
| 9. Total foreign exchange change in book value/recorded investment excluding accrued interest | | |
| 10. Deduct current year's other than temporary impairment recognized | | |
| 11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | | |
| 12. Total valuation allowance | | |
| 13. Subtotal (Line 11 plus Line 12) | | |
| 14. Deduct total nonadmitted amounts | | |
| 15. Statement value at end of current period (Line 13 minus Line 14) | | |

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

| | 1 Year to Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year | | |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | | |
| 4. Accrual of discount | | |
| 5. Unrealized valuation increase (decrease) | | |
| 6. Total gain (loss) on disposals | | |
| 7. Deduct amounts received on disposals | | |
| 8. Deduct amortization of premium and depreciation | | |
| 9. Total foreign exchange change in book/adjusted carrying value | | |
| 10. Deduct current year's other than temporary impairment recognized | | |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | | |
| 12. Deduct total nonadmitted amounts | | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | | |

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

| | 1 Year to Date | 2 Prior Year Ended December 31 |
|---|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 43,133,380 | 44,132,720 |
| 2. Cost of bonds and stocks acquired | | 254,923 |
| 3. Accrual of discount | 7,822 | 32,052 |
| 4. Unrealized valuation increase (decrease) | 130,452 | 18,787 |
| 5. Total gain (loss) on disposals | | 128,696 |
| 6. Deduct consideration for bonds and stocks disposed of | 524,930 | 1,357,860 |
| 7. Deduct amortization of premium | 19,382 | 75,938 |
| 8. Total foreign exchange change in book/adjusted carrying value | | |
| 9. Deduct current year's other than temporary impairment recognized | | |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | 42,727,342 | 43,133,380 |
| 11. Deduct total nonadmitted amounts | | |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 42,727,342 | 43,133,380 |

STATEMENT AS OF MARCH 31, 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

| NAIC Designation | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|-------------------------------------|---|--|--|--|---|--|---|---|
| BONDS | | | | | | | | |
| 1. NAIC 1 (a) | 28,936,322 | 755,483 | 455,485 | (508,597) | 28,727,723 | | | 28,936,322 |
| 2. NAIC 2 (a) | 2,632,639 | | 460,000 | 497,036 | 2,669,675 | | | 2,632,639 |
| 3. NAIC 3 (a) | | | | | | | | |
| 4. NAIC 4 (a) | | | | | | | | |
| 5. NAIC 5 (a) | | | | | | | | |
| 6. NAIC 6 (a) | | | | | | | | |
| 7. Total Bonds | 31,568,961 | 755,483 | 915,485 | (11,561) | 31,397,398 | | | 31,568,961 |
| PREFERRED STOCK | | | | | | | | |
| 8. NAIC 1 | | | | | | | | |
| 9. NAIC 2 | | | | | | | | |
| 10. NAIC 3 | | | | | | | | |
| 11. NAIC 4 | | | | | | | | |
| 12. NAIC 5 | | | | | | | | |
| 13. NAIC 6 | | | | | | | | |
| 14. Total Preferred Stock | | | | | | | | |
| 15. Total Bonds and Preferred Stock | 31,568,961 | 755,483 | 915,485 | (11,561) | 31,397,398 | | | 31,568,961 |

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ 1,077,235 ; NAIC 2 \$; NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

S102

SCHEDULE DA - PART 1

Short-Term Investments

| | 1 | 2 | 3 | 4 | 5 |
|----------------|---------------------------------|-----------|-------------|------------------------------------|--|
| | Book/Adjusted Carrying Value | Par Value | Actual Cost | Interest Collected Year-to-Date | Paid for Accrued Interest Year-to-Date |
| 9199999 Totals | 1,077,235 | xxx | 1,077,235 | 299 | |

SCHEDULE DA - VERIFICATION

Short-Term Investments

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year To Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | 712,308 | 1,469,785 |
| 2. Cost of short-term investments acquired | 755,482 | 2,019,023 |
| 3. Accrual of discount | | |
| 4. Unrealized valuation increase (decrease) | | |
| 5. Total gain (loss) on disposals | | |
| 6. Deduct consideration received on disposals | 390,555 | 2,776,500 |
| 7. Deduct amortization of premium | | |
| 8. Total foreign exchange change in book/adjusted carrying value | | |
| 9. Deduct current year's other than temporary impairment recognized | | |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | 1,077,235 | 712,308 |
| 11. Deduct total nonadmitted amounts | | |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 1,077,235 | 712,308 |

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

N O N E

Schedule E - Verification - Cash Equivalents

N O N E

Schedule A - Part 2 - Real Estate Acquired and Additions Made

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired

N O N E

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open

N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter

N O N E

Medicare Part D Coverage Supplement

N O N E

Trusted Surplus - Cover

N O N E

Trusted Surplus Statement - Assets

N O N E

Trusted Surplus Statement - Liabilities and Trusted Surplus

N O N E

Trusted Surplus Overflow Page

N O N E