

STATE OF ILLINOIS
DEPARTMENT OF INSURANCE



IN THE MATTER OF THE EXAMINATION OF
THE MINNESOTA LIFE INSURANCE COMPANY
MINNESOTA MUTUAL LIFE CENTER
400 NORTH ROBERT STREET
ST PAUL, MN 55101

MARKET CONDUCT EXAMINATION WARRANT

I, the undersigned, Director of Insurance of the State of Illinois, pursuant to Sections 132, 401, 401.5, 402, 403 and 425 of the Illinois Insurance Code (215 ILCS 5/132, 5/401, 5/401.5, 5/402, 5/403, and 5/425) do hereby appoint Iain D. Johnston, Andrew R. Greene, Philip Ackerman, Erika Kruse, and Gabriela D'Adamo at Johnston Greene LLC as Examiners to assist the Illinois Department of Insurance ("Department") in the completion of the market conduct examination of The Minnesota Life Insurance Company, NAIC # 66168, (the "Company") by reviewing and completing the examination report prepared by Examiner in Charge, Max Weaver and associate Mike Hager, including the review of any objections or rebuttals submitted by the Company regarding the findings of such reports, and drafting of any related Stipulation and Consent Order for the review and approval of the Director. The costs of this examination shall be borne by the Company.

The persons so appointed shall also have the power to administer oaths and to examine any person concerning the business, conduct, or affairs of the Company.



IN TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed this Seal.

Done at the City of Chicago, this 26th day of September, 2012.

Andrew Boron

Andrew Boron

Director

STATE OF ILLINOIS



Department of Insurance

IN THE MATTER OF
THE EXAMINATION OF:

THE MINNESOTA LIFE INSURANCE COMPANY
400 NORTH ROBERT STREET
ST. PAUL, MINNESOTA 55101

MARKET CONDUCT EXAMINATION WARRANT

I, the undersigned, Director of Insurance of the State of Illinois, pursuant to Sections 5/131.21, 5/132, 5/401, 5/402, 5/403 and 5/425 of the Illinois Insurance Code (215 ILCS 5/131.21, 5/132, 5/401, 5/402 and 5/425) do hereby appoint Max Weaver, Examiner-In-Charge, Mike Hager and associates as the proper persons to examine the insurance business and affairs of The Minnesota Life Insurance Company of St. Paul, Minnesota, and to make a full and true report to me of the examination made by them of The Minnesota Life Insurance Company with a full statement of the condition and operation of the business and affairs of The Minnesota Life Insurance Company with any other information as shall in their opinion be requisite to furnish me a statement of the condition and operation of its business and affairs and the manner in which it conducts its business.

The persons so appointed shall also have the power to administer oaths and to examine any person concerning the business, conduct, or affairs of The Minnesota Life Insurance Company.

IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed the Seal of my office.

Done at the City of Springfield, this 29th day of April, 2010

Michael T. McRaith


Michael T. McRaith

Director



STATE OF ILLINOIS)
) SS
COUNTY OF SANGAMON)

I personally served a copy of the within Warrant by leaving
said copy with PAUL CASEY , at the hour of 2:30 PM
on NOVEMBER 30 , A.D., 2010.


Examiner

MINNESOTA LIFE INSURANCE COMPANY

MARKET CONDUCT EXAMINATION REPORT

DATE OF EXAMINATION: November 29, 2010 through April 15, 2011

EXAMINATION OF: Minnesota Life Insurance Company
NAIC # 869 66168

LOCATION OF EXAMINATION: 400 Robert Street North
St. Paul, Minnesota 55101

PERIOD COVERED BY EXAMINATION: January 1, 2009 through December 31, 2009
Department of Insurance Complaints
January 1, 2007 through October 31, 2010

EXAMINERS: C. Michael Hager
Max R. Weaver
Examiner-in-Charge

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I. SUMMARY

1. The Company was criticized under 215 ILCS 5/224(1)(l) for under payment of interest on one (1) life claim not paid within 15 days resulting in the under payment of interest in the amount of \$34.90 (note: payment within 15 days was the statutory requirement at the time of the MCE. The statute has since been amended to payment within 31 days).
2. The Company was criticized under 50 Ill. Adm. Code 1405.30(c) and 215 ILCS 5/143(1) for requiring the applicant to opt out of the automatic premium provision by marking the application to omit the coverage. Failure to elect on the part of the applicant shall result in no election of the automatic premium loan provision as provided for in Section 1405.40(c) of this part.
3. The Company was criticized for 50 Ill. Adm. Code 926.40 for failing to respond to an Illinois Department of Insurance ("Department") Complaint within the required 21 days.

II. BACKGROUND

The Company was incorporated in 1880 under the law of the State of Minnesota as the Bankers Association of Minnesota, an assessment company. The Company reincorporated under the mutual plan and changed its name to The Minnesota Mutual Life Insurance Company in 1901.

On October 1, 1998, the Company reorganized, forming a mutual insurance holding company. The Company became a stock life insurance company and amended and restated its Certificate of Incorporation and Bylaws pursuant to Minnesota Statutes. The Company also changed its name to Minnesota Life Insurance Company.

Minnesota Life Insurance Company is licensed to do business in 49 states, the District of Columbia, Guam, Puerto Rico and Canada. The Company is also qualified or accredited for reinsurance in New York. The Company was licensed to do business in Illinois on January 15, 1902.

III. METHODOLOGY

The Market Conduct Examination places emphasis on evaluating an insurer's systems and procedures used in dealings with insureds and claimants.

The following categories are the general areas examined:

1. Producer Licensing and Production Analysis
2. Non-Forfeiture Analysis
3. Claims Analysis
4. Underwriting Analysis
5. Policy Forms and Advertising Material Analysis
6. Replacement Policy Analysis
7. Complaint Analysis

The review of these categories is accomplished through examination of producer files, claim files, Department and consumer complaint files, policy forms, endorsements and advertising materials. Each of these categories is examined for compliance with selected Department Rules and Regulations and applicable state laws. The Market Conduct Examination did not examine:

- a. The Company's use of the Social Security Death Master File in connection with the Company's settlement practices, procedures and policy administration relating to claims, including the Company's efforts to identify the owners and beneficiaries of proceeds, or
- b. Compliance with the Uniform Disposition of Unclaimed Property Act, 765 ILCS 1025/1, *et seq.*

The report concerns itself with improper practices performed with such frequency as to indicate general business practices. Individual criticisms are identified and communicated to the insurer but are not cited in the report if not indicative of a general trend, except if there were underpayments and/or overpayments in claim surveys or undercharges and/or overcharges in underwriting surveys.

The following methods were used to obtain the required samples and to assure a methodical selection.

Producer Licensing and Production Analysis

Populations for the producer file reviews were determined by whether or not the producers were licensed by the State of Illinois. New business listings were retrieved from Company records by selecting newly solicited insurance applications that reflected Illinois addresses for the applicants. The examination period for the producer licensing and production analysis was January 1, 2009 through December 31, 2009.

Non-Forfeiture Analysis

Listings were requested of all life policies that were cash surrendered, placed on extended term insurance status or converted to reduced paid-up insurance during the examination period. These listings were retrieved by a search of Illinois policies that were either lapsed for nonpayment of premium or were requested non-forfeiture option conversions made by policyholders. The examination period for the non-forfeiture analysis was January 1, 2009 through December 31, 2009.

Claims Analysis

Claim surveys were selected using the following criteria:

1. Paid Claims – Payments for coverage made during the examination period.
2. Denied Claims – Denial of benefits for losses not covered by policy provisions during the survey period.
3. Individual or Franchise Claims – Determine whether the contracts were issued to an individual or on a franchise basis.

All median payment periods were measured from the date all necessary proofs of loss were received to the date of payment or denial to the insured or the beneficiary. The examination period for the claims survey was January 1, 2009 through December 31, 2009.

Underwriting Analysis

Listings were requested of all life applications rejected by the Company during the survey period. These listings were retrieved by a search of Illinois life applications submitted but denied issuance by the Company.

Policy Forms and Advertising Material Analysis

The Company was requested to provide specimen copies of all policy forms and samples of all advertising material in use during the survey period. The examination period for the policy forms and advertising material review was January 1, 2009 through December 31, 2009.

Replacement Policy Analysis

The Company was requested to provide listings of all annuity and life policies, internal and external, transacted during the survey period. A sample of each category was compiled and the policy files were requested for review to determine compliance with Department Rules and Regulations and applicable State laws. The

examination period for the replacement policy analysis was January 1, 2009 through December 31, 2009.

Complaints

The Company was requested to provide all files relating to complaints that were received by the Department as well as those received directly by the Company from the insured or his/her representative. A copy of the Company's complaint register was also reviewed.

Median periods were measured from the date of notification of the complaint to the date of response to the Department.

The examination period for the complaint analysis was January 1, 2007 through October 31, 2010.

SELECTION OF SAMPLE

SURVEY	POPULATION	# REVIEWED	%REVIEWED
Producer Licensing and Production Analysis			
Terminated Producers	166	166	100
Producer Production	373/4642	373/4642	100
Non-Forfeiture Analysis			
Life Cash Surrender	770	106	14
Extended Term Insurance and Reduced Paid-Up	144	85	59
Annuity Cash Surrender	274	85	31
Approved Individual Waiver of Premium	4	4	100
Approved Group Waiver of Premium	36	36	100
Rejected Group Waiver of Premium	3	3	100
Claims Analysis			
Paid Individual Life	70	70	100
Paid Group Life	3610	92	3
Denied Group Accidental Death and Dismemberment	18	18	100
Annuity Death Settlements	21	21	100
Paid Group Credit Life	240	105	44
Denied Group Credit Life	45	45	100
Paid Group Disability	23	23	100
Paid Group Credit Disability	778	105	13
Denied Group Credit Disability	49	49	100
Paid Group Mortgage Disability	3	3	100
Denied Group Mortgage Disability	1	1	100
Underwriting Analysis			
Declined Individual Life Applications	39	39	100
Declined Group Life Applications	1926	116	6

Policy Forms and Advertising Material Analysis			
Policy and Advertising Review	173	173	100
Replacement Policy Analysis			
Internal and External Life Replacements	264	132	50
Internal and External Annuity Replacements	33	33	100
Complaint Analysis			
Department of Insurance Complaints	31	31	100
Consumer Complaints	79	79	100

IV. FINDINGS

A. Producer Licensing and Production Analysis

1. Terminated Producer

A review of 166 terminated producer files revealed no producers were terminated for cause during the survey.

2. Producer Production

A review of 4642 producer production files period resulted in one (1) general criticism. The criticism was made under Sections 1405.30(c) of the Illinois Administrative Code and 143(1) of the Illinois Insurance Code for using life application forms that do not meet current standards. The life application instructs the applicant to mark the application to omit the automatic premium option. Failure to elect on the part of an applicant shall result in no election of the automatic premium loan provision as provided for in Section 1405.40(c) of the Illinois Administrative Code.

B. Non-Forfeiture Analysis

1. Life Cash Surrender

A review of 106 of 770 life cash surrender policy files produced one (1) general criticism. The criticism was made under Sections 1405.30(c) of the Illinois Administrative Code and 143(1) of the Illinois Insurance Code for using life application forms that do not meet current standards. The life application instructs the applicant to mark the application to omit the automatic premium provision. Failure to elect on the part of an applicant shall result in no election of the automatic premium loan provision as provided for in Section 1405.40(c) of the Illinois Administrative Code. Of the 106 cash surrender policy files reviewed, 100% contained applications in violation, 24 files or 23% contained no evidence of acceptance or rejection of the automatic provision, and nine (9) of the 24 policies or 38% contained premium loans at the time of surrender.

The median for surrender was 10 days.

2. Extended Term Insurance and Reduced Paid-Up

A review of 85 of the 144 of the extended term and reduced paid-up policy files produced two (2) criticisms. A general criticism was made under Section 1405.30(c) of the Illinois Administrative Code and Section 143(1) of the Illinois Insurance Code for using life application forms that do not meet current standards. The application instructs the applicant to mark the

application to omit the automatic premium loan provision. Failure to elect on the part of the applicant shall result in no election of the automatic loan provision as provided for in Section 1405.40(c) of the Illinois Administrative Code. An individual criticism was made under Section 234.1 of the Illinois Insurance Code for failure to provide all of the available options to the insured prior to enactment of the non-forfeiture provision.

No median could be established.

3. Annuity Cash Surrenders

A review of 85 of the 274 of the annuity cash surrender policy files produced no criticisms.

The median for surrender was two (2) days.

4. Approved Individual Waiver of Premium

A review of all four (4) approved waiver of premium policy files produced no criticisms.

No median could be established.

5. Approved Group Waiver of Premium

A review of all 36 approved group waiver of premium policy files produced no criticisms.

No median could be established.

6. Rejected Group Waiver of Premium

A review of all three (3) rejected group waiver of premium claim files produced no criticisms.

No median could be established.

C. Claims Analysis

1. Paid Individual Life

The review of all 70 paid individual life claim files produced one (1) criticism. An individual criticism was made under Section 224(1)(l) of the Illinois Insurance Code for an underpayment in the amount of \$34.90.

The median for payment was three (3) days.

2. **Paid Group Life**

A review of 92 of the 3610 paid group life claim files produced no criticisms.

The median for payment was five (5) days.

3. **Denied Group Accidental Death and Dismemberment**

A review of all 18 denied group accidental death and dismemberment claim files produced no criticisms.

The median for denial was one (1) day.

4. **Annuity Death Settlements**

A review of all 21 annuity death settlement files produced no criticisms.

The median for payment was four (4) days.

5. **Paid Group Credit Life**

A review of 105 of the 240 paid group credit life claim files produced no criticisms.

The median for payment was one (1) day.

6. **Denied Group Credit Life**

A review of all 45 denied group credit life claim files produced no criticisms.

The median for denial was one (1) day.

7. **Paid Group Disability**

A review of all 23 paid group disability claim files produced no criticisms.

The median for payment was nine (9) days; the mean was eleven (11) days.

8. **Paid Group Credit Disability**

A review of 105 of the 778 paid group credit disability claim files produced no criticisms.

The median for payment was four (4) days; the mean was eight (8) days.

9. Denied Group Credit Disability

A review of all 49 denied group credit disability claim files produced no criticisms

The median for denial was ten (10) days.

10. Paid Group Mortgage Disability

A review of all three (3) paid group mortgage disability claim files produced no criticisms.

No median could be established.

11. Denied Group Mortgage Disability

A review of the one (1) denied group mortgage disability claim file produced no criticisms.

No median could be established.

D. Underwriting Analysis

1. Declined Individual Life Applications

A review of all 39 declined individual life applications produced no criticisms.

The median for declination was 45 days.

2. Declined Group Life Applications

A review of 116 of the 1926 declined group life applications produced no criticisms.

The median for declination was ten (10) days.

E. Policy Forms and Advertising Material Analysis

1. Policy Forms and Advertising Review

A review of the policy forms and advertising materials produced one (1) general criticism. The criticism was made under Section 1405.30(c) of the Illinois Administrative Code and Section 143(1) of the Illinois Insurance

Code for use of application forms not meeting the current standards. The application forms instruct the applicant to mark the application to omit the automatic premium loan provision. Failure to elect on the part of the applicant shall result in no election of the automatic premium loan provision as provided for in Section 1405.40(c) of the Illinois Administrative Code.

F. Replacement Policy Analysis

1. Internal and External Life Replacement

A review of 132 of the 264 internal and external life replacement files resulted in a general criticism. The review revealed 43, or 33%, of the replacements were criticized under Sections 1405.30(c) of the Illinois Administrative Code and 143(1) of the Illinois Insurance Code for using application forms that do not meet the current standards. The application forms instruct the applicant to mark the application to omit the automatic premium provision. Failure to elect on the part of the applicant shall result in no election of the automatic premium provision as provided for in Section 1405.40(c) of the Illinois Administrative Code.

2. Internal and External Annuity Replacement

A review of all 33 annuity replacement policy files produced no criticisms.

G. Complaint Analysis

1. Department of Insurance Complaints

A review of all 31 Department complaints produced two (2) criticisms. Two (2) individual criticisms were made under Section 926.40 of the Illinois Administrative Code for failing to respond to the complainant within the required 21 days.

The median for response was 20 days.

2. Consumer Complaints

A review of all 79 consumer complaint files produced no criticisms.

The median for response was twelve (12) days.

V. TECHNICAL APPENDICES

None

STATE OF ILLINOIS)
) ss
COUNTY OF COOK)

Max R. Weaver, being first duly sworn upon his oath, deposes and says:

That he was appointed by the Director of Insurance of the State of Illinois (the "Director") as Examiner-In Charge to examine the insurance business and affairs of:

Minnesota Life Insurance Company
NAIC # 869 66168

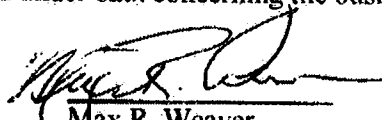
That, as Examiner-In-Charge, he was directed to make a full and true report to the Director of the examination with a full statement of the condition and operation of the business and affairs of the Companies with any other information as shall in the opinion of the Examiner-In-Charge be requisite to furnish the Director with a statement of the condition and operation of the Companies' business and affairs and the manner in which the Companies conduct their business;

That neither he nor any other persons designated as examiners nor any members of their immediate families is an officer of, connected with, or financially interested in the Companies nor any of the Companies' affiliates other than as policyholders, and that neither he nor any other persons designated as examiners nor any members of their immediate families is financially interested in any other corporation or person affected by the examination;

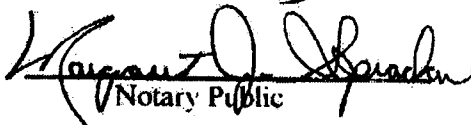
That an examination was made of the affairs of the Companies pursuant to the authority vested in the Examiner-In-Charge by the Director of Insurance of the State of Illinois;

That he was the Examiner-in-Charge of said examination and the attached report of examination is a full and true statement of the condition and operation of the insurance business and affairs of the Companies for the period covered by the Report as determined by the examiners;

That the Report contains only facts ascertained from the books, papers, records, or documents, and other evidence obtained by investigation and examined or ascertained from the testimony of officers or agents or other persons examined under oath concerning the business, affairs, conduct, and performance of the Companies.


Max R. Weaver
Examiner-In-Charge

Subscribed and sworn to before me
this 17 day of January, 2013.


Notary Public





Illinois Department of Insurance

PAT QUINN
Governor

ANDREW BORON
Director

January 24, 2012

Robert Senkler
President
Minnesota Life Insurance Company
400 Robert Street North
St. Paul, Minnesota 55101

*sent via USPS certified mail
return receipt requested*

Re: Market Conduct Examination Report

Dear Mr. Senkler:

A Market Conduct Examination of your company was conducted by an authorized examiner designated by the Director of Insurance pursuant to Illinois Insurance Code Sections 132, 401, 402, 403 and 425 of the Illinois Insurance Code. The examination covered the period January 1, 2009 through December 31, 2009 for general matters and January 1, 2007 through October 31, 2010 for Department of Insurance Complaints.

As required by Illinois Insurance Code Section 132, the Director must notify the company made the subject of any market conduct examination of the contents of the verified examination report before filing it and making the report public of any matters relating thereto, and must afford the company an opportunity to demand a hearing with reference to the facts and other evidence therein contained. A copy of the examination report is accordingly enclosed with this letter as well as a Stipulation and Consent Agreement. The company may request a hearing within 10 days after receipt of the examination report by giving the Director written notice of the request, together with a statement of its objections. The examination report will generally not be filed until hearing is completed.

Companies that do not demand a formal hearing may submit their rebuttal with respect to any matters in the examination report. The rebuttal will be considered by the Director before the examination report is filed. Please provide any rebuttals, or the signed Stipulation and Consent Agreement, to the undersigned by close of business on February 15, 2013. In the event that the company elects to sign the Stipulation and Consent Agreement, please sign and return both copies. The Director will sign both copies and a fully executed copy will be returned to you for your records. As detailed in the Stipulation and Consent Agreement, once a fully executed copy is returned to you for your records, the company must pay a civil forfeiture of \$5,000.00 within fifteen days after receipt and must submit proof of compliance with the Director's orders thirty (30) days thereafter.

Once the report of examination has been filed, the exam report, the company's rebuttal, if any, and corresponding Orders (if applicable) are public documents under the Freedom of Information Act (5 ILCS 140/1 *et al.*) and may be posted on the Department's website. In the event of a formal hearing, the record of the hearing, the Hearing Officer Recommendations and the Director's final Order are also public documents and may be posted on the Department's website.

Please contact me if you have any questions. I may be reached at 312-814-2435.

Sincerely,



Helen C. Gibbons
Staff Attorney

Cc: Paul F Casey, CIA, CFE, FLMI
Audit Manager - Enterprise Operations, Internal Audit
Securian Financial Group
400 Robert Street North
9-3076
St. Paul, MN 55101-2098

This Market Conduct Examination was conducted pursuant to Sections 5/132, 5/401, 5/402, 5/403 and 5/425 of the Illinois Insurance Code (215 ILCS 5/132, 5/401, 5/402, 5/403 and 5/425). It was conducted in accordance with standard procedures of the Market Conduct Examination Section by duly qualified examiners of the Illinois Department of Insurance.

This report is divided into five parts. They are as follows: Summary, Background, Methodology, Findings and Technical Appendices. All files reviewed were reviewed on the basis of the files' contents at the time of the examination. Unless otherwise noted, all overcharges (underwriting) and/or underpayments (claims) were reimbursed during the course of the examination.

No company, corporation, or individual shall use this report or any statement, excerpt, portion, or section thereof for any advertising, marketing or solicitation purpose. Any company, corporation or individual action contrary to the above shall be deemed a violation of Section 149 of the Illinois Insurance Code (215 ILCS 5/149).

The Examiner-in-Charge was responsible for the conduct of this examination. The Examiner-in-Charge did approve of each criticism contained herein and has sworn to the accuracy of this report.

**Helen C. Gibbons
Staff Attorney**



IN THE MATTER OF:

Minnesota Life Insurance Company
400 Robert Street North
St. Paul, Minnesota 55101

STIPULATION AND CONSENT ORDER

WHEREAS, the Director (the "Director") of the Illinois Department of Insurance (the "Department") is a duly authorized and appointed official of the State of Illinois, having authority and responsibility for the enforcement of the insurance laws of this State; and

WHEREAS, Minnesota Life Insurance Company (the "Company") is authorized under the insurance laws of this State and by the Director as a foreign stock company, to engage in the business of soliciting, selling and issuing insurance policies; and

WHEREAS, a Market Conduct Examination ("Examination") of the Company was conducted by duly qualified examiners of the Department pursuant to Sections 131.21, 132, 401, 402 and 425 of the Illinois Insurance Code (215 ILCS 5/131.21, 5/132, 5/401, 5/402 and 5/425); and

WHEREAS, the Department examiners have filed an examination report as an official document of the Department as a result of the Examination (the "Report"); and

WHEREAS, the Report cited various areas in which the Company was not in compliance with the Illinois Insurance Code (215 ILCS 5/1 *et seq.*) and Department Regulations (50 Ill. Adm. Code 101 *et seq.*); and

WHEREAS, nothing herein contained, nor any action taken by the Company in connection with this Stipulation and Consent Order, shall constitute, or be construed as, an admission of fault, liability or wrongdoing of any kind whatsoever by the Company; and

WHEREAS, the Company is aware of and understands its various rights in connection with the Examination and Report, including the right to counsel, notice, hearing and appeal under Sections 132, 401, 402, 407 and 407.2 of the Illinois Insurance Code and 50 Ill. Adm. Code 2402; and

WHEREAS, the Company understands and agrees that by entering into this Stipulation and Consent Order, it waives any and all rights to notice and hearing; and

WHEREAS, the Company and the Director, for the purpose of resolving all matters raised by the Report and in order to avoid any further administrative action, hereby enter into this Stipulation and Consent Order;

NOW, THEREFORE, IT IS agreed by and between the Company and the Director as follows:

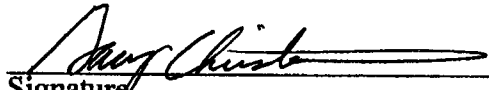
1. That the Examination indicated various areas in which the Company was not in compliance with provisions of the Illinois Insurance Code and/or Department Regulations; and
2. That the Director and the Company consent to this order requiring the Company to take certain actions to come into compliance with provisions of the Illinois Insurance Code and/or Department Regulations.

THEREFORE, IT IS HEREBY ORDERED by the undersigned Director that the Company shall:

1. Institute and maintain procedures to comply with 215 ILCS 5/224(1)(I) of the Illinois Insurance Code by paying interest on life claims that are not paid within 31 days from the latest of the following to occur: (a) the date that due proof of death is received by the Company; (b) the date that the Company receives sufficient information to determine its liability, the extent of the liability, and the appropriate payee legally entitled to the proceeds; or (c) the date that legal impediments to payment of proceeds that depend on the action of parties other than the Company are resolved and sufficient evidence of the same is provided to the Company. For purposes of this Order, legal impediments include, but are not limited to, (i) the establishment of guardianships and conservatorships, (ii) the appointment and qualification of trustees, executors, and administrators, and (iii) the submission of information required to satisfy State and federal reporting requirements.
2. Institute and maintain procedures to comply with 50 Ill. Adm. Code 1405.30(c) and 215 ILCS 5/143(l) to make the election of the automatic premium loan provision an elective option on the application forms.
3. Institute and maintain procedures to comply with 50 Ill. Adm. Code 926.40 by responding to Illinois Department of Insurance Complaints within the required twenty-one (21) days.
4. Submit to the Director proof of compliance with the above three (3) Orders within thirty (30) days of the execution of these Orders.
5. Pay to the Director of Insurance, State of Illinois, a civil forfeiture in the amount of Five Thousand and No/100 Dollars (\$5,000.00) to be paid within fifteen (15) days of receipt of these Orders.

NOTHING contained herein shall prohibit the Director from taking any and all appropriate regulatory action as set forth in the Illinois Insurance Code, including but not limited to levying additional forfeitures, should the Company violate any of the provisions of this Stipulation and Consent Order or any provisions of the Illinois Insurance Code or Department Regulations.

On behalf of Minnesota Life Insurance Company:


Signature

Gary R. Christensen

Name

Vice President and General Counsel
Title

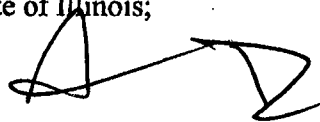
Subscribed and sworn to before me this
8th day of February A.D. 2013.


Notary Public



DATE 2/19/13

DEPARTMENT OF INSURANCE of the
State of Illinois;



Andrew Boron
Director



Illinois Department of Insurance

PAT QUINN
Governor

ANDREW BORON
Director

May 2, 2013

Paul Casey
Audit Manager
Securian Financial Group
Minnesota Life Insurance Company
400 Robert Street North
Mail Station: 9-3076
St. Paul, Minnesota 55101

*sent via USPS certified mail
return receipt requested*

Re: Market Conduct Examination Report

Dear Mr. Casey:

Please be advised that the Department has reviewed the proof of compliance contained in your March 15, 2013 correspondence. The proof of compliance submitted on behalf of Minnesota Life Insurance Company is sufficient.

Accordingly, the Department is closing its files on this exam. As mentioned in my previous correspondence, this exam will be made public by posting on the Department's website as authorized by 215 ILCS 5/132. Thank you so much for your attention to this exam and professional conduct during this process.

Please contact me if you have any questions. I may be reached at 312-814-2435.

Sincerely,

Helen C. Gibbons
Staff Attorney
312-814-2435