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## AMENDED FILING EXPLANATION

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This amendment, filed on March 23, 2012, revises the Accident and Health Insurance section of Page 27 of the Annual Statement ("Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values In Force for Supplementary Contracts, Annuities, Accident & Health and Other Policies") for Great American Life Insurance Company (NAIC # 63312). This amended filing includes corrected policy counts in Column 5 (Lines 7 & 10) and corrected premiums in force in Column 6 (Line 10) for Ordinary Accident & Health Insurance.



# ANNUAL STATEMENT

For the Year Ended December 31, 2011

of the Condition and Affairs of the

## GREAT AMERICAN LIFE INSURANCE COMPANY

NAIC Group Code.....0084, 0084  
(Current Period) (Prior Period)

Organized under the Laws of Ohio

Incorporated/Organized..... December 29, 1961

Statutory Home Office

NAIC Company Code..... 63312

Employer's ID Number..... 13-1935920

State of Domicile or Port of Entry Ohio

Country of Domicile US

Commenced Business..... August 13, 1963

Main Administrative Office

301 East Fourth Street..... Cincinnati ..... OH ..... 45202  
(Street and Number) (City or Town, State and Zip Code)

513-357-3300-

(Area Code) (Telephone Number)

Mail Address

301 East Fourth Street..... Cincinnati ..... OH ..... 45202  
(Street and Number) (City or Town, State and Zip Code)

Primary Location of Books and Records

Post Office Box 5420..... Cincinnati ..... OH ..... 45201  
(Street and Number or P. O. Box) (City or Town, State and Zip Code)

513-357-3300-

(Area Code) (Telephone Number)

Internet Web Site Address

301 East Fourth Street..... Cincinnati ..... OH ..... 45202  
(Street and Number) (City or Town, State and Zip Code)

Statutory Statement Contact

Brian Patrick Sponaugle  
(Name)  
bsponaugle@gafri.com  
(E-Mail Address)

513-412-2931-

(Area Code) (Telephone Number) (Extension)

513-412-1673-

(Fax Number)

### OFFICERS

Name	Title	Name	Title
1. Stephen Craig Lindner	President	2. Mark Francis Muething	Secretary
3. Christopher Patrick Milano	Treasurer	4. Richard Lee Sutton	Actuary

John Paul Gruber	Senior Vice President	Adrienne Susan Kessling	Senior Vice President
Paul Adolph Severt	Vice President	Brian Patrick Sponaugle #	Vice President
Bradley Allen Wolfram	Vice President		

### OTHER

DIRECTORS OR TRUSTEES			
Jeffrey Gene Hester	Stephen Craig Lindner	Christopher Patrick Milano	Mark Francis Muething
Michael James Prager			

State of..... Ohio  
County of..... Hamilton

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

(Signature) Mark Francis Muething	(Signature) Christopher Patrick Milano	(Signature) John Paul Gruber
1. (Printed Name) Secretary	2. (Printed Name) Treasurer	3. (Printed Name) Senior Vice President
(Title)	(Title)	(Title)

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_ February, 2012

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

Annual Statement for the year 2011 of the **GREAT AMERICAN LIFE INSURANCE COMPANY**  
**EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE**  
**AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS,**  
**ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES**

**SUPPLEMENTARY CONTRACTS**

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year.....	10			
2. Issued during year.....				
3. Reinsurance assumed.....	58	39		
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....	68	39	0	0
Deductions during year:				
6. Decreased (net).....	3	11		
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	3	11	0	0
9. In force end of year.....	65	28	0	0
10. Amount on deposit.....		(a).....		(a).....
11. Income now payable.....	55	21		
12. Amount of income payable.....	(a).....	94,973	(a).....	165,208
			(a).....	(a).....

**ANNUITIES**

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year.....	25,799	182,252	37	55,514
2. Issued during year.....	2,169	40,073		3
3. Reinsurance assumed.....		1,239		
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....	27,968	223,564	37	55,517
Deductions during year:				
6. Decreased (net).....	5,722	12,461		2,957
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	5,722	12,461	0	2,957
9. In force end of year.....	22,246	211,103	37	52,560
Income now payable:				
10. Amount of income payable.....	(a).....	165,617,200	XXX.....	XXX.....(a).....2,011,268
Deferred fully paid:				
11. Account balance.....	XXX.....	(a).....	8,948,594,129	XXX.....(a).....260,107,140
Deferred not fully paid:				
12. Account balance.....	XXX.....	(a).....	2,170,611,492	XXX.....(a).....746,205,028

**ACCIDENT AND HEALTH INSURANCE**

	Group		Credit		Other	
	1 Certificates	2 Premiums in force	3 Policies	4 Premiums in force	5 Policies	6 Premiums in force
1. In force end of prior year.....	.224	144,581			.20,064	26,744,269
2. Issued during year.....						
3. Reinsurance assumed.....						
4. Increased during year (net).....		XXX.....		XXX.....		XXX.....
5. Total (Lines 1 to 4).....	.224	XXX.....	.0	XXX.....	.20,064	XXX.....
Deductions during year:						
6. Conversions.....		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
7. Decreased (net).....	76	XXX.....		XXX.....		13,628
8. Reinsurance ceded.....		XXX.....		XXX.....		XXX.....
9. Totals (Lines 6 to 8).....	76	XXX.....	.0	XXX.....	.13,628	XXX.....
10. In force end of year.....	.148	(a).....	79,873	.0	(a).....	6,436
						(a).....12,761,895

**DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS**

			1 Deposit Funds Contracts	2 Dividend Accumulations Contracts
1. In force end of prior year.....				
2. Issued during year.....				
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....			.0	0
Deductions during year:				
6. Decreased (net).....				
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....			.0	0
9. In force end of year.....			.0	0
10. Amount of account balance.....			(a).....	(a).....

(a) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the Annual Statement Instructions.