



ANNUAL STATEMENT

For the Year Ended December 31, 2011
of the Condition and Affairs of the

American Mutual Life Association

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

NAIC Company Code..... 56286

Employer's ID Number..... 34-6577472

Organized under the Laws of Ohio

State of Domicile or Port of Entry Ohio

Country of Domicile US

Incorporated/Organized..... March 13, 1914

Commenced Business..... November 13, 1910

Statutory Home Office

19424 S. Waterloo Rd..... Cleveland OH 44119
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office

19424 S. Waterloo Rd..... Cleveland Oh 44119
(Street and Number) (City or Town, State and Zip Code)

216-531-1900
(Area Code) (Telephone Number)

Mail Address

19424 S. Waterloo Rd..... Cleveland OH 44119
(Street and Number or P. O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records

19424 S. Waterloo Rd..... Cleveland OH 44119
(Street and Number) (City or Town, State and Zip Code)

216-531-1900
(Area Code) (Telephone Number)

Internet Web Site Address

www.americanmutual.org

Statutory Statement Contact

Theresa Aveni
(Name)
amla1@earthlink.net
(E-Mail Address)

216-531-1900-0017
(Area Code) (Telephone Number) (Extension)
216-531-8123
(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Albert R. Amigoni	President	2. Theresa Aveni	Secretary-Treasurer
3.		4.	
OTHER			
Anna Mae Mannion	1st Vice-President	Joseph G. Zab	2nd Vice President

DIRECTORS OR TRUSTEES

Albert R Amigoni	Theresa Aveni	James E. Czeck	Alyce M. Kane
Charles Kohli	Jaime Loncar	Anna Mae Mannion	James Mannion
Kenneth E. Shine	Rudolph M. Susel Ph.D	Joseph G. Zab	Ronald J. Zab Ph.D

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

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

(Signature)
Albert R. Amigoni

1. (Printed Name)
President

(Title)

(Signature)
Theresa Aveni

2. (Printed Name)
Secretary-Treasurer

(Title)

(Signature)

3. (Printed Name)

(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



LIFE INSURANCE

DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0

NAIC Society Code.....56286

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1
		Life and Annuities
1.	Life insurance.....	499,076
2.	Annuity considerations.....	1,311,950
3.	Deposit-type contract funds.....	570,371
4.	Other considerations.....	
5.	Total (Lines 1 to 4).....	2,381,397
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1	Paid in cash or left on deposit.....	30,223
6.2	Applied to pay renewal premiums.....	8,157
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	55,896
6.4	Other.....	
6.5	Total (Sum of Lines 6.1 to 6.4).....	94,276
Annuities:		
7.1	Paid in cash or left on deposit.....	
7.2	Applied to provide paid-up annuities.....	84
7.3	Other.....	
7.4	Total (Sum of Lines 7.1 to 7.3).....	84
8.	Total (Line 6.5 plus Line 7.4).....	94,360
DIRECT CLAIMS AND BENEFITS PAID		
9.	Death benefits.....	259,116
10.	Matured endowments.....	8,915
11.	Annuity benefits.....	1,091,622
12.	Surrender values. and withdrawals for life contracts.....	62,606
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0
14.	All other benefits, except accident & health.....	
15.	Total.....	1,422,259

DETAILS OF WRITE-INS	
1301.	
1302.	
1303.	
1398.	Summary of remaining write-ins for Line 13 from overflow page.....0
1399.	Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....	55	77,483
17.	Incurred during current year.....	381	228,956
Settled during current year:			
18.1	By payment in full.....	352	204,686
18.2	By payment on compromised claims.....		
18.3	Total paid.....	352	204,686
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	352	204,686
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	84	101,753
POLICY EXHIBIT			
20.	In force December 31, prior year.....	20,713	30,021,217
21.	Issued during year.....	2,558	1,802,829
22.	Other changes to in force (net).....	(579)	(662,481)
23.	In force December 31, current year.....	22,692	31,161,565

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Collectively Renewable Certificates.....14,989	14,989		11,962	12,128
Other Individual Certificates:					
25.1	Non-cancelable.....				
25.2	Guaranteed renewable.....				
25.3	Non-renewable for stated reasons only.....				
25.4	Other accident only.....				
25.5	Medicare Title XVIII exempt from state taxes or fees.....				
25.6	All Other.....				
25.7	Totals (sum of Lines 25.1 to 25.6).....0	0	0	0	0
26.	Totals (Line 24 + 25.7).....14,989	14,989	0	11,962	12,128



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....0 NAIC Society Code.....56286

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25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	14,989	14,989	0	11,962	12,128

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	507,692
2. Current year's realized pre-tax capital gains/(losses) of \$.....0 transferred into the reserve net of taxes of \$.....0.....	9,372
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	517,064
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	71,875
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	445,189

Amortization

	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2011.....	71,910	(35)		71,875
2. 2012.....	69,756	(81)		69,675
3. 2013.....	76,476	(35)		76,441
4. 2014.....	78,025	63		78,088
5. 2015.....	74,100	147		74,247
6. 2016.....	69,824	249		70,073
7. 2017.....	64,875	312		65,187
8. 2018.....	58,828	324		59,152
9. 2019.....	49,865	341		50,206
10. 2020.....	38,302	353		38,655
11. 2021.....	25,719	380		26,099
12. 2022.....	11,140	394		11,534
13. 2023.....	(5,069)	416		(4,653)
14. 2024.....	(14,050)	447		(13,603)
15. 2025.....	(18,767)	473		(18,294)
16. 2026.....	(23,508)	494		(23,014)
17. 2027.....	(26,255)	527		(25,728)
18. 2028.....	(26,391)	547		(25,843)
19. 2029.....	(24,432)	579		(23,853)
20. 2030.....	(19,438)	608		(18,830)
21. 2031.....	(13,105)	640		(12,465)
22. 2032.....	(7,593)	609		(6,985)
23. 2033.....	(3,377)	505		(2,871)
24. 2034.....	(387)	393		7
25. 2035.....	289	285		574
26. 2036.....	362	164		526
27. 2037.....	286	95		381
28. 2038.....	190	75		265
29. 2039.....	94	55		149
30. 2040.....	23	36		59
31. 2041 and Later.....		11		11
32. Total (Lines 1 to 31).....	507,692	9,372	0	517,064

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year.....	138,617	3,969	142,586	(0)	6,772	6,772	149,357
2. Realized capital gains/(losses) net of taxes - General Account.....			0			0	0
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....			0			0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....			0			0	0
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....			0			0	0
7. Basic contribution.....	36,875	845	37,720			0	37,720
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	175,492	4,814	180,306	(0)	6,772	6,772	187,077
9. Maximum reserve.....	154,346	2,549	156,895		7,176	7,176	164,071
10. Reserve objective.....	105,259	1,610	106,869		7,176	7,176	114,045
11. 20% of (Line 10 minus Line 8).....	(14,047)	(641)	(14,687)	0	81	81	(14,606)
12. Balance before transfers (Lines 8 + 11).....	161,446	4,173	165,619	(0)	6,853	6,852	172,471
13. Transfers.....			0			0	XXX
14. Voluntary contribution.....			0			0	0
15. Adjustment down to maximum/up to zero.....	(7,100)	(1,624)	(8,724)		323	323	(8,401)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	154,346	2,549	156,895	(0)	7,176	7,175	164,070

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1		Exempt obligations.....	20,669,693	XXX	XXX	20,669,693	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	5,614,863	XXX	XXX	5,614,863	0.0004	2,246	0.0023	12,914	0.0030	16,845
3	2	High quality.....	5,952,559	XXX	XXX	5,952,559	0.0019	11,310	0.0058	34,525	0.0090	53,573
4	3	Medium quality.....	1,450,272	XXX	XXX	1,450,272	0.0093	13,488	0.0230	33,356	0.0340	49,309
5	4	Low quality.....	461,587	XXX	XXX	461,587	0.0213	9,832	0.0530	24,464	0.0750	34,619
6	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
8		Total unrated multi-class securities acquired by conversion.....		XXX	XXX	0	XXX	0	XXX	0	XXX	
9		Total bonds (sum of Lines 1 through 8) (Page 2, Line 1, Column 3 plus Schedule DL, Part 1, Column 6, Line 6599999).....	34,148,974	XXX	XXX	34,148,974	XXX	36,875	XXX	105,259	XXX	154,346
PREFERRED STOCKS												
10	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16) (Page 3, Line 2.1, Column 3 plus Schedule DL, Part 1, Column 6, Line 7099999).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
SHORT-TERM BONDS												
18		Exempt obligations.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 thru 24).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
DERIVATIVE INSTRUMENTS												
26		Exchange-traded.....		.XXX.	.XXX.	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality.....		.XXX.	.XXX.	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality.....		.XXX.	.XXX.	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality.....		.XXX.	.XXX.	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality.....		.XXX.	.XXX.	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality.....		.XXX.	.XXX.	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default.....		.XXX.	.XXX.	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments.....	0	.XXX.	.XXX.	0	.XXX.	0	.XXX.	0	.XXX.	0
34		TOTAL (Lines 9 + 17 + 25 + 33).....	34,148,974	.XXX.	.XXX.	34,148,974	.XXX.	36,875	.XXX.	105,259	.XXX.	154,346
MORTGAGE LOANS												
In good standing:												
35		Farm mortgages.....			.XXX.	0	(a)	0	(a)	0	(a)	0
36		Residential mortgages-insured or guaranteed.....			.XXX.	0	0.0003	0	0.0006	0	0.0010	0
37		Residential mortgages-all other.....			.XXX.	0	0.0013	0	0.0030	0	0.0040	0
38		Commercial mortgages-insured or guaranteed.....			.XXX.	0	0.0003	0	0.0006	0	0.0010	0
39		Commercial mortgages-all other.....	134,140		.XXX.	134,140	(a)	845	(a)	1,610	(a)	2,549
40		In good standing with restructured terms.....			.XXX.	0	(b)	0	(b)	0	(b)	0
Overdue, not in process:												
41		Farm mortgages.....			.XXX.	0	0.0420	0	0.0760	0	0.1200	0
42		Residential mortgages-insured or guaranteed.....			.XXX.	0	0.0005	0	0.0012	0	0.0020	0
43		Residential mortgages-all other.....			.XXX.	0	0.0025	0	0.0058	0	0.0090	0
44		Commercial mortgages-insured or guaranteed.....			.XXX.	0	0.0005	0	0.0012	0	0.0020	0
45		Commercial mortgages-all other.....			.XXX.	0	0.0420	0	0.0760	0	0.1200	0
In process of foreclosure:												
46		Farm mortgages.....			.XXX.	0	0.0000	0	0.1700	0	0.1700	0
47		Residential mortgages-insured or guaranteed.....			.XXX.	0	0.0000	0	0.0040	0	0.0040	0
48		Residential mortgages-all other.....			.XXX.	0	0.0000	0	0.0130	0	0.0130	0
49		Commercial mortgages-insured or guaranteed.....			.XXX.	0	0.0000	0	0.0040	0	0.0040	0
50		Commercial mortgages-all other.....			.XXX.	0	0.0000	0	0.1700	0	0.1700	0
51		Total Schedule B mortgages (sum of Lines 35 through 50) (Page 2, Line 3, Column 3 plus Schedule DL, Part 1, Column 6, Line 8799999).....	134,140	0	.XXX.	134,140	.XXX.	845	.XXX.	1,610	.XXX.	2,549
52		Schedule DA mortgages.....			.XXX.	0	(c)	0	(c)	0	(c)	0
53		Total mortgage loans on real estate (Lines 51 + 52).....	134,140	0	.XXX.	134,140	.XXX.	845	.XXX.	1,610	.XXX.	2,549

(a) Times the company's experience adjustment factor (EAF).
(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.
(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

29

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		COMMON STOCK										
1		Unaffiliated public.....		XXX.....	XXX.....	0	0.0000	0	(d).....	0	(d).....	0
2		Unaffiliated private.....		XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	0
3		Federal Home Loan Bank.....		XXX.....	XXX.....	0	0.0000	0	0.0050	0	0.0080	0
4		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated Investment Subsidiary:										
5		Fixed income exempt obligations.....				0	XXX.....		XXX.....		XXX.....	
6		Fixed income highest quality.....				0	XXX.....		XXX.....		XXX.....	
7		Fixed income high quality.....				0	XXX.....		XXX.....		XXX.....	
8		Fixed income medium quality.....				0	XXX.....		XXX.....		XXX.....	
9		Fixed income low quality.....				0	XXX.....		XXX.....		XXX.....	
10		Fixed income lower quality.....				0	XXX.....		XXX.....		XXX.....	
11		Fixed income in or near default.....				0	XXX.....		XXX.....		XXX.....	
12		Unaffiliated common stock public.....				0	0.0000	0	(d).....	0	(d).....	0
13		Unaffiliated common stock private.....				0	0.0000	0	0.1600	0	0.1600	0
14		Mortgage loans.....				0	(c).....	0	(c).....	0	(c).....	0
15		Real estate.....				0	(e).....	0	(e).....	0	(e).....	0
16		Affiliated - certain other (see SVO Purposes and Procedures manual).....		XXX.....	XXX.....	0	0.0000	0	0.1300	0	0.1300	0
17		Affiliated - all other.....		XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	0
18		Total common stock (sum of Lines 1 through 17) (Page 2, Line 2.2, Column 3 plus Schedule DL, Column 6, Line 7599999).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	0
		REAL ESTATE										
19		Home office property (General Account only).....	95,682			95,682	0.0000	0	0.0750	7,176	0.0750	7,176
20		Investment properties.....				0	0.0000	0	0.0750	0	0.0750	0
21		Properties acquired in satisfaction of debt.....				0	0.0000	0	0.1100	0	0.1100	0
22		Total real estate (sum of Lines 19 through 21).....	95,682	0	0	95,682	XXX.....	0	XXX.....	7,176	XXX.....	7,176
		OTHER INVESTED ASSETS										
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
23		Exempt obligations.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	0
24	1	Highest quality.....		XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
25	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	0
26	3	Medium quality.....		XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	0
27	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
28	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
29	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	0
30		Total with bond characteristics (sum of Lines 23 through 29).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0

ASSET VALUATION RESERVE (continued)
Basic Contribution, Reserve Objective and Maximum Reserve Calculations
Equity and Other Invested Asset Component

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
31	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
32	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
33	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
34	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
35	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
36	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
37		Affiliated life with AVR.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
38		Total with preferred stock characteristics (sum of Lines 31 through 37).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
30		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing:										
	39	Farm mortgages.....			XXX	0	(a).....	0	(a).....	0	(a).....	0
	40	Residential mortgages-insured or guaranteed.....			XXX	0	0.0003	0	0.0006	0	0.0010	0
	41	Residential mortgages-all other.....		XXX	XXX	0	0.0013	0	0.0030	0	0.0040	0
	42	Commercial mortgages-insured or guaranteed.....			XXX	0	0.0003	0	0.0006	0	0.0010	0
	43	Commercial mortgages-all other.....			XXX	0	(a).....	0	(a).....	0	(a).....	0
	44	In good standing with restructured terms.....			XXX	0	(b).....	0	(b).....	0	(b).....	0
		Overdue, Not in Process:										
	45	Farm mortgages.....			XXX	0	0.0420	0	0.0760	0	0.1200	0
	46	Residential mortgages-insured or guaranteed.....			XXX	0	0.0005	0	0.0012	0	0.0020	0
	47	Residential mortgages-all other.....			XXX	0	0.0025	0	0.0058	0	0.0090	0
	48	Commercial mortgages-insured or guaranteed.....			XXX	0	0.0005	0	0.0012	0	0.0020	0
	49	Commercial mortgages-all other.....			XXX	0	0.0420	0	0.0760	0	0.1200	0
		In Process of foreclosure:										
	50	Farm mortgages.....			XXX	0	0.0000	0	0.1700	0	0.1700	0
	51	Residential mortgages-insured or guaranteed.....			XXX	0	0.0000	0	0.0040	0	0.0040	0
	52	Residential mortgages-all other.....			XXX	0	0.0000	0	0.0130	0	0.0130	0
	53	Commercial mortgages-insured or guaranteed.....			XXX	0	0.0000	0	0.0040	0	0.0040	0
	54	Commercial mortgages-all other.....			XXX	0	0.0000	0	0.1700	0	0.1700	0
55		Total with mortgage loan characteristics (sum of Lines 39 through 54).....	0	0	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
56		Unaffiliated public.....		XXX.....	XXX.....	0	0.0000	0	(d).....	0	(d).....	0
57		Unaffiliated private.....		XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	0
58		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	0
59		Affiliated certain other (see SVO Purposes and Procedures manual).....		XXX.....	XXX.....	0	0.0000	0	0.1300	0	0.1300	0
60		Affiliated other - all other.....		XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	0
61		Total with common stock characteristics (sum of Lines 56 through 60).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
62		Home office property (general account only).....				0	0.0000	0	0.0750	0	0.0750	0
63		Investment properties.....				0	0.0000	0	0.0750	0	0.0750	0
64		Properties acquired in satisfaction of debt.....				0	0.0000	0	0.1100	0	0.1100	0
65		Total with real estate characteristics (Lines 62 through 64).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	0
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
66		Guaranteed federal low income housing tax credit.....				0	0.0003	0	0.0006	0	0.0010	0
67		Non-guaranteed federal low income housing tax credit.....				0	0.0063	0	0.0120	0	0.0190	0
68		State low income housing tax credit.....				0	0.0273	0	0.0600	0	0.0975	0
69		All other low income housing tax credit.....				0	0.0273	0	0.0600	0	0.0975	0
70		Total low income housing tax credit (Lines 66 through 69).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	0
		ALL OTHER INVESTMENTS										
71		Other invested assets - Schedule BA.....		XXX.....		0	0.0000	0	0.1300	0	0.1300	0
72		Other short-term invested assets - Schedule DA.....		XXX.....		0	0.0000	0	0.1300	0	0.1300	0
73		Total all other (sum of Lines 71 + 72).....	0	XXX.....	0	0	XXX.....	0	XXX.....	0	XXX.....	0
74		Total other invested assets - Schedule BA & DA (Sum of Lines 30, 38, 55, 61, 65, 70 and 73).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	0

(a) Times the company's experience adjustment factor (EAF).

(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.

(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

(d) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).

(e) Determined using same factors and breakdowns used for directly owned real estate.

ASSET VALUATION RESERVE (continued)

Basic Contributions, Reserve Objective and Maximum Reserve Calculations

Replications (Synthetic) Assets

1	2	3	4	5	6	7	8	9
RSAT Number	Type	CUSIP	Description of Asset(s)	NAIC Designation or Other Description of Asset	Value of Asset	AVR Basic Contribution	AVR Reserve Objective	AVR Maximum Reserve

NONE

SCHEDULE F

Showing all claims for death losses and all other contract claims resisted or compromised during the year, and
all claims for death losses and all other contract claims resisted December 31 of current year

1	2	3	4	5	6	7	8
Contract Numbers	Claim Numbers	State of Residence of Claimant	Year of Claim for Death or Disability	Amount Claimed	Amount Paid During the Year	Amount Resisted Dec. 31 of Current Year	Why Compromised or Resisted

NONE

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

		Total		Collectively Renewable		Other Individual Contracts									
						Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS															
1.	Premiums written.....	15,019	XXX	15,019	XXX		XXX		XXX		XXX		XXX		XXX
2.	Premiums earned.....	15,181	XXX	15,181	XXX		XXX		XXX		XXX		XXX		XXX
3.	Incurred claims.....	12,128	79.9	12,128	79.9		0.0		0.0		0.0		0.0		0.0
4.	Cost containment expenses.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4).....	12,128	79.9	12,128	79.9	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6.	Increase in contract reserves.....	(6,000)	(39.5)	(6,000)	(39.5)		0.0		0.0		0.0		0.0		0.0
7.	Commissions (a).....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
8.	Other general insurance expenses.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
9.	Taxes, licenses and fees.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
10.	Total other expenses incurred.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11.	Aggregate write-ins for deductions.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds.....	9,053	59.6	9,053	59.6	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13.	Dividends or refunds.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
14.	Gain from underwriting after dividends or refunds.....	9,053	59.6	9,053	59.6	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS															
1101.	.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
1102.	.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
1103.	.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
1198.	Summary of remaining write-ins for Line 11 from overflow page.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199.	Total (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

(a) Includes \$.....0 reported as "Contract, membership and other fees retained by agents."

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1	2	Other Individual Contracts				
			3	4	5	6	7
	Total	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2 - RESERVES AND LIABILITIES							
A. Premium Reserves:							
1. Unearned premiums.....	1,795	1,795					
2. Advance premiums.....	21	21					
3. Reserve for rate credits.....	0						
4. Total premium reserves, current year.....	1,816	1,816	0	0	0	0	0
5. Total premium reserves, prior year.....	1,978	1,978					
6. Increase in total premium reserves.....	(162)	(162)	0	0	0	0	0
B. Contract Reserves:							
1. Additional reserves (a).....	0						
2. Reserve for future contingent benefits.....	82,000	82,000					
3. Total contract reserves, current year.....	82,000	82,000	0	0	0	0	0
4. Total contract reserves, prior year.....	88,000	88,000					
5. Increase in contract reserves.....	(6,000)	(6,000)	0	0	0	0	0
C. Claim Reserves and Liabilities:							
1. Total current year.....	942	942					
2. Total prior year.....	776	776					
3. Increase.....	166	166	0	0	0	0	0

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

1. Claims Paid During the Year:							
1.1 On claims incurred prior to current year.....	0						
1.2 On claims incurred during current year.....	11,962	11,962					
2. Claim Reserves and Liabilities, Dec. 31, Current Year:							
2.1 On claims incurred prior to current year.....	0						
2.2 On claims incurred during current year.....	942	942					
3. Test:							
3.1 Line 1.1 plus 2.1.....	0	0	0	0	0	0	0
3.2 Claim reserves and liabilities, Dec. 31, prior year.....	776	776					
3.3 Line 3.1 minus Line 3.2.....	(776)	(776)	0	0	0	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:							
1. Premiums written.....	0						
2. Premiums earned.....	0						
3. Incurred claims.....	0						
4. Commissions.....	0						
B. Reinsurance Ceded:							
1. Premiums written.....	0						
2. Premiums earned.....	0						
3. Incurred claims.....	0						
4. Commissions.....	0						

(a) Includes \$.0 premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....			12,128	12,128
2. Beginning claim reserves and liabilities.....			776	776
3. Ending claim reserves and liabilities.....			942	942
4. Claims paid.....	0	0	11,962	11,962
B. Assumed Reinsurance:				
5. Incurred claims.....				0
6. Beginning claim reserves and liabilities.....				0
7. Ending claim reserves and liabilities.....				0
8. Claims paid.....	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred claims.....				0
10. Beginning claim reserves and liabilities.....				0
11. Ending claim reserves and liabilities.....				0
12. Claims paid.....	0	0	0	0
D. Net:				
13. Incurred claims.....	0	0	12,128	12,128
14. Beginning claim reserves and liabilities.....	0	0	776	776
15. Ending claim reserves and liabilities.....	0	0	942	942
16. Claims paid.....	0	0	11,962	11,962
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....			12,128	12,128
18. Beginning reserves and liabilities.....			776	776
19. Ending reserves and liabilities.....			942	942
20. Paid claims and cost containment expenses.....	0	0	11,962	11,962

SCHEDULE S - PART 1 - SECTION 1

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities

Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Amount of In Force at End of Year	Reserve	Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
NONE											

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance

NONE

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Paid Losses	Unpaid Losses

NONE

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Amount In Force at End of Year	Reserve Credit Taken		10 Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8	9		11	12		
							Current Year	Prior Year		Current Year	Prior Year		
General Account - Authorized - Affiliates - Non-U.S. Affiliates													
88099.....	75-1608507....	07/01/2005	OPTIMUM RE.....	TX.....	YRT/I.....	208,972	.....	.....	.....426	.....	.....	.....	.....
88099.....	75-1608507....	07/01/2005	OPTIMUM RE.....	TX.....	ADB/G.....	4,396,789	.....	.....	.....2,488	.....	.....	.....	.....
0299999.	Total - General Account - Authorized - Affiliates - Non-U.S. Affiliates.....					4,605,761	0	0	2,914	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates.....					4,605,761	0	0	2,914	0	0	0	0
0799999.	Total - General Account - Authorized.....					4,605,761	0	0	2,914	0	0	0	0
1599999.	Total - General Account - Authorized and Unauthorized.....					4,605,761	0	0	2,914	0	0	0	0
3299999.	Total Non-U.S.....					4,605,761	0	0	2,914	0	0	0	0
3399999.	Total.....					4,605,761	0	0	2,914	0	0	0	0

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	Outstanding Surplus Relief		12	13
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type	Premiums	Unearned Premiums (estimated)	Reserve Credit Taken Other Than for Unearned Premiums	10	11	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
									Current Year	Prior Year		

NONE

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	Letter of Credit Issuing or Confirming Bank (a)			13	14	15	16	17
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	10	11	12	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 13 + 14 + 15 + 16 But Not in Excess of Col. 8
									American Bankers Association (ABA) Routing Number	Letter of Credit Code	Bank Name					

SCHEDULE S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business
(000 OMITTED)

	1 2011	2 2010	3 2009	4 2008	5 2007
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts.....	3	4	3	3	3
2. Commissions and reinsurance expense allowances.....					
3. Contract claims.....				(2)	2
4. Surrender benefits and withdrawals for life contracts.....					
5. Refunds to members.....					
6. Reserve adjustments on reinsurance ceded.....					
7. Increase in aggregate reserves for life and accident and health contracts.....					
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....					
9. Aggregate reserves for life and accident and health contracts.....					
10. Liability for deposit-type contracts.....					
11. Contract claims unpaid.....					
12. Amounts recoverable on reinsurance.....					2
13. Experience rating refunds due or unpaid.....					
14. Refunds to members (not included in Line 10).....					
15. Commissions and reinsurance expense allowances unpaid.....					
16. Unauthorized reinsurance offset.....					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Funds deposited by and withheld from (F).....					
18. Letters of credit (L).....					
19. Trust agreements (T).....					
20. Other (O).....					

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	34,731,026		34,731,026
2. Reinsurance (Line 16).....			0
3. Premiums and considerations (Line 15).....	2,798		2,798
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (balance).....	487,647		487,647
6. Total assets excluding separate accounts (Line 26).....	35,221,471	0	35,221,471
7. Separate account assets (Line 27).....			0
8. Total assets (Line 28).....	35,221,471	0	35,221,471
LIABILITIES, SURPLUS AND OTHER FUNDS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	20,969,795		20,969,795
10. Liability for deposit-type contracts (Line 3).....	1,267,138		1,267,138
11. Claim reserves (Line 4).....	102,695		102,695
12. Member refunds/reserves (Lines 5 through 6).....	100,000		100,000
13. Premium & annuity considerations received in advance (Line 7).....	21		21
14. Other contract liabilities (Line 8).....	445,191		445,191
15. Reinsurance in unauthorized companies (Line 21.2).....			0
16. Funds held under reinsurance with unauthorized reinsurance (Line 21.3).....			0
17. All other liabilities (balance).....	295,657		295,657
18. Total liabilities excluding Separate Accounts (Line 23).....	23,180,497	0	23,180,497
19. Separate Account liabilities (Line 24).....			0
20. Total liabilities (Line 25).....	23,180,497	0	23,180,497
21. Capital & surplus (Line 30).....	12,040,974	XXX	12,040,974
22. Total liabilities, capital & surplus (Line 31).....	35,221,471	0	35,221,471
NET CREDIT FOR CEDED REINSURANCE			
23. Contract reserves.....	0		
24. Claim reserves.....	0		
25. Member refunds/reserves.....	0		
26. Premium & annuity considerations received in advance.....	0		
27. Liability for deposit-type contracts.....	0		
28. Other contract liabilities.....	0		
29. Reinsurance ceded assets.....	0		
30. Other ceded reinsurance recoverables.....	0		
31. Total ceded reinsurance recoverables.....	0		
32. Premiums and considerations.....	0		
33. Reinsurance in unauthorized companies.....	0		
34. Funds held under reinsurance treaties with unauthorized reinsurers.....	0		
35. Other ceded reinsurance payables/offsets.....	0		
36. Total ceded reinsurance payables/offsets.....	0		
37. Total net credit for ceded reinsurance.....	0		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

			Direct Business Only				
			1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
States, Etc.							
1.	Alabama.....	AL					0
2.	Alaska.....	AK					0
3.	Arizona.....	AZ					0
4.	Arkansas.....	AR					0
5.	California.....	CA					0
6.	Colorado.....	CO					0
7.	Connecticut.....	CT					0
8.	Delaware.....	DE					0
9.	District of Columbia.....	DC					0
10.	Florida.....	FL					0
11.	Georgia.....	GA					0
12.	Hawaii.....	HI					0
13.	Idaho.....	ID					0
14.	Illinois.....	IL					0
15.	Indiana.....	IN					0
16.	Iowa.....	IA					0
17.	Kansas.....	KS					0
18.	Kentucky.....	KY					0
19.	Louisiana.....	LA					0
20.	Maine.....	ME					0
21.	Maryland.....	MD					0
22.	Massachusetts.....	MA					0
23.	Michigan.....	MI					0
24.	Minnesota.....	MN					0
25.	Mississippi.....	MS					0
26.	Missouri.....	MO					0
27.	Montana.....	MT					0
28.	Nebraska.....	NE					0
29.	Nevada.....	NV					0
30.	New Hampshire.....	NH					0
31.	New Jersey.....	NJ					0
32.	New Mexico.....	NM					0
33.	New York.....	NY					0
34.	North Carolina.....	NC					0
35.	North Dakota.....	ND					0
36.	Ohio.....	OH	499,076	1,311,950		570,371	2,381,397
37.	Oklahoma.....	OK					0
38.	Oregon.....	OR					0
39.	Pennsylvania.....	PA					0
40.	Rhode Island.....	RI					0
41.	South Carolina.....	SC					0
42.	South Dakota.....	SD					0
43.	Tennessee.....	TN					0
44.	Texas.....	TX					0
45.	Utah.....	UT					0
46.	Vermont.....	VT					0
47.	Virginia.....	VA					0
48.	Washington.....	WA					0
49.	West Virginia.....	WV					0
50.	Wisconsin.....	WI					0
51.	Wyoming.....	WY					0
52.	American Samoa.....	AS					0
53.	Guam.....	GU					0
54.	Puerto Rico.....	PR					0
55.	US Virgin Islands.....	VI					0
56.	Northern Mariana Islands.....	MP					0
57.	Canada.....	CN					0
58.	Aggregate Other Alien.....	OT					0
59.	Totals.....		499,076	1,311,950	0	570,371	2,381,397

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	Federal 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)	*

NONE

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)

NONE

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

MARCH FILING		Responses
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?		YES
2. Will an actuarial opinion be filed with this statement by March 1?		YES
3. Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?		YES
4. Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?		YES
APRIL FILING		
5. Will Management's Discussion and Analysis be filed by April 1?		YES
6. Will the Supplemental Investment Risk Interrogatories be filed by April 1?		YES
JUNE FILING		
7. Will an audited financial report be filed by June 1?		YES
8. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?		YES
AUGUST FILING		
9. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?		YES

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.

MARCH FILING		
10. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?		SEE EXPLANATION
11. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?		SEE EXPLANATION
12. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?		YES
13. Will the statement on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?		YES
14. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
15. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
16. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
17. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
18. 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 by March 1?		SEE EXPLANATION
19. 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 by March 1?		SEE EXPLANATION
20. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be field with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
21. 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 by March 1?		SEE EXPLANATION
22. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?		YES
23. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
24. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
25. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
26. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
27. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
28. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
29. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
30. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?		SEE EXPLANATION
31. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?		SEE EXPLANATION
32. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?		SEE EXPLANATION
33. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?		SEE EXPLANATION
34. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?		SEE EXPLANATION
APRIL FILING		
35. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?		SEE EXPLANATION
36. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?		YES
37. Will the Accident and Health Policy Experience Exhibit be filed by April 1?		YES
38. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?		YES
39. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?		YES
40. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?		SEE EXPLANATION
41. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?		SEE EXPLANATION
AUGUST FILING		
42. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?		YES

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

EXPLANATIONS:

BARCODES:

1.
2.
3.
4.
5.
6.
7.
8.
9.
10. Not applicable to company operations
11. Not applicable to company operations
12.
13.
14. Not applicable to company operations
15. Not applicable to company operations
16. Not applicable to company operations
17. Not applicable to company operations
18. Not applicable to company operations
19. Not applicable to company operations
20. Not applicable to company operations
21. Not applicable to company operations
22.
23. Not applicable to company operations
24. Not applicable to company operations
25. Not applicable to company operations
26. Not applicable to company operations
27. Not applicable to company operations
28. Not applicable to company operations
29. Not applicable to company operations
30. Not applicable to company operations
31. Not applicable to company operations
32. Not applicable to company operations
33. Not applicable to company operations
34. Not applicable to company operations
35. Not applicable to company operations
36.

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* 5 6 2 8 6 2 0 1 1 4 9 0 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 4 2 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 4 3 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 4 4 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 4 5 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 4 6 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 4 7 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 4 8 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 4 9 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 5 1 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 5 2 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 5 3 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 3 6 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 3 7 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 3 8 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 3 9 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 4 5 4 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 3 6 5 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 2 2 4 0 0 0 0 0 *

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* 5 6 2 8 6 2 0 1 1 2 2 6 0 0 0 0 0 *

* 5 6 2 8 6 2 0 1 1 3 0 6 0 0 0 0 0 *

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

37.

38.

39.

40. Not applicable to company operatons



41. Not applicable to company operatons



42.

American Mutual Life Association

Overflow Page for Write-Ins

Additional Write-ins for Exhibit 2:

		Insurance				5	6	7
		1	Accident and Health		4			
			2	3				
		Life	Containment	Other	Aggregate of All Other Lines of Business	Investment	Fraternal	Total
09.304	RETIREMENT BENEFITS.....	2,275						2,275
09.397	Summary of remaining write-ins for Line 9.3.....	2,275	0	0	0	0	0	2,275

Overflow Page for Write-Ins

NONE

2011 ALPHABETICAL INDEX
FRATERNAL ANNUAL STATEMENT BLANK

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SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	Letter of Credit Issuing or Confirming Bank (a)			13	14	15	16	17
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	10	11	12	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 13 + 14 + 15 + 16 But Not in Excess of Col. 8
									American Bankers Association (ABA) Routing Number	Letter of Credit Code	Bank Name					

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	Federal 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)	*

NONE