
AMENDED FILING EXPLANATION

The amending of the Annual Statement 2013 filed for the American Mutual Life Association needed to be submitted for the following change:

Page 21 Five Year Historical Data Line #18 showed 553,606 and should have shown 361,999. The wrong figure was picked up of the RBC report.



ANNUAL STATEMENT

For the Year Ended December 31, 2013

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..... 346577472

Organized under the Laws of
Incorporated/Organized..... March 13, 1914

State of Domicile or Port of Entry

Country of Domicile Cuyahoga

Statutory Home Office

19424 South Waterloo Road..... Cleveland Oh US 44119
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 19424 South Waterloo Road..... Cleveland Oh US..... 44119
(Street and Number) (City or Town, State, Country and Zip Code)

(Area Code) (Telephone Number)

Mail Address

19424 South Waterloo Road..... Cleveland Oh US 44119
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

19424 South Waterloo Road... 19424 South Waterloo Road.. Cleveland Oh US 44119
(Street and Number) (City or Town, State, Country and Zip Code)

(Area Code) (Telephone Number)

Internet Web Site Address

www.americanmutual.org

Statutory Statement Contact

Theresa Aveni
(Name)
t.aveni@americanmutual.org
(E-Mail Address)

216-531-1900

(Area Code) (Telephone Number) (Extension)

216-531-8123

(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Timothy Percic # 3.	President	2. Theresa Aveni 4.	Secretary-Treasurer
Anna Mae Mannion	1st Vice President	Joseph G. Zab	2nd Vice President

OTHER

Anna Mae Mannion	1st Vice President	Joseph G. Zab	2nd Vice President
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DIRECTORS OR TRUSTEES

Timothy Percic #	Theresa Aveni	Anna Mae Mannion	Joseph Zab
Ronald Zab	Rudolph Susel	James Czeck	Alyce Kane
Jaime Loncar	Charles Kohli	Kenneth Shine	James Mannion

State of.....

County of.....

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) Timothy Percic	(Signature) Theresa Aveni	(Signature)
1. (Printed Name) President	2. (Printed Name) Secretary-Treasurer	3. (Printed Name)
(Title)	(Title)	(Title)
Subscribed and sworn to before me		
This _____ day of _____	2014	a. Is this an original filing? <input type="checkbox"/> Yes [] <input checked="" type="checkbox"/> No [X]
b. If no 1. State the amendment number		
2. Date filed		
3. Number of pages attached		
1		
4/16/2014		
3		