
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		

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

Amounts of life insurance in this exhibit should be shown in thousands (omit 000).

	1 2013	2 2012	3 2011	4 2010	5 2009
Life Insurance in Force (Exhibit of Life Insurance)					
1. Total (Line 21, Column 2).....	32,806	32,774	31,161	30,021	30,103
New Business Issued (Exhibit of Life Insurance)					
2. Total (Line 2, Column 2).....	745	462	1,802	540	842
Premium Income (Exhibit 1, Part 1)					
3. Life insurance - first year (Line 9.4, Column 2).....	5,341	3,681	6,923	5,735	4,633
4. Life insurance - single and renewal (Lines 10.4 and 19.4, Column 2).....	149,946	207,255	552,997	140,985	187,309
5. Annuity (Line 20.4, Column 3).....	1,009,165	1,395,149	1,311,950	1,334,624	973,957
6. Accident and health (Line 20.4, Column 4).....	12,802	13,666	15,019	16,405	17,658
7. Aggregate of all other lines of business (Line 20.4, Column 5).....					
8. Total (Line 20.4, Column 1).....	1,177,254	1,619,751	1,886,889	1,497,749	1,183,557
Balance Sheet Items (Pages 2 and 3)					
9. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....	38,710,484	37,547,704	35,221,471	33,937,227	32,832,568
10. Total liabilities excluding Separate Accounts business (Page 3, Line 23).....	26,436,043	25,343,502	23,180,497	21,691,368	20,764,213
11. Aggregate reserve for life certificates and contracts (Page 3, Line 1).....	24,384,000	23,167,000	20,886,000	19,801,000	18,784,000
12. Aggregate reserve for accident and health certificates (Page 3, Line 2).....	71,089	77,307	83,795	89,957	97,076
13. Deposit-type contract funds (Page 3, Line 3).....	1,009,211	1,169,801	1,267,138	863,715	873,676
14. Asset valuation reserve (Page 3, Line 21.1).....	244,621	196,581	164,070	149,357	145,572
15. Surplus (Page 3, Line 30).....	12,274,441	12,204,202	12,040,974	12,245,859	12,068,355
Cash Flow (Page 5)					
16. Net cash from operations (Line 11).....	1,492,769	1,656,316	1,299,239	1,212,333	979,762
Risk-Based Capital Analysis					
17. Total Adjusted Capital.....	12,569,062	12,450,783	12,255,044	12,445,215	12,263,929
18. 50% of the Calculated RBC Amount.....	361,999	467,651	440,493	398,948	350,169
Percentage Distribution of Cash, Cash Equivalent and Invested Assets					
(Page 2, Col. 3) (Line No. ÷ Page 2, Line 12, Col. 3) x 100.0					
19. Bonds (Line 1).....	.97.2	.98.0	.98.3	.97.7	.97.6
20. Stocks (Lines 2.1 and 2.2).....	1.5				.02
21. Mortgage loans on real estate (Lines 3.1 and 3.2).....	0.0	.02	.04	.06	.04
22. Real estate (Lines 4.1, 4.2 and 4.3).....	.3	.2	.3	.3	.3
23. Cash, cash equivalents and short-term investments (Line 5).....	.7	.13	.07	.10	.11
24. Contract loans (Line 6).....	.3	.03	.03	.04	.04
25. Derivatives (Line 7).....					XXX
26. Other invested assets (Line 8).....					
27. Receivable for securities (Line 9).....					
28. Securities lending reinvested collateral assets (Line 10).....					XXX
29. Aggregate write-ins for invested assets (Line 11).....					
30. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
Investments in Subsidiaries and Affiliates					
31. Affiliated bonds (Schedule D Summary, Line 12, Col. 1).....					
32. Affiliated preferred stock (Schedule D Summary, Line 18, Col. 1).....	250,000				
33. Affiliated common stock (Schedule D Summary, Line 24, Col. 1).....					
34. Affiliated short-term investments (subtotals included in Sch. DA, Verif., Col. 5, Line 10).....					
35. Affiliated mortgage loans on real estate.....					
36. All other affiliated.....					
37. Total of above Lines 31 to 36.....	250,000	0	0	0	0
38. Total investment in parent included in Lines 31 to 36 above.....					
Total Nonadmitted Assets and Admitted Assets					
39. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	82,153	45,913	59,455	56,124	55,362
40. Total admitted assets (Page 2, Line 28, Col. 3).....	38,710,484	37,547,704	35,221,471	33,937,227	32,832,568
Investment Data					
41. Net investment income (Exhibit of Net Investment Income, Line 17).....	1,949,621	1,810,545	1,679,640	1,642,954	1,648,058
42. Realized capital gains (losses) (Page 4, Line 30, Column 1).....		0		(5,187)	
43. Unrealized capital gains (losses) (Page 4, Line 34, Column 1).....				15,065	19,435
44. Total of above Lines 41, 42 and 43.....	1,949,621	1,810,545	1,679,640	1,652,832	1,667,493

American Mutual Life Association

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2013	2 2012	3 2011	4 2010	5 2009
Benefits and Reserve Increases (Page 6)					
45. Total Certificate Benefits - Life (Lines 10, 11, 12, 13 and 14, Column 7 less Line 13, Column 5).....	752,803	897,876	1,446,530	1,050,465	889,136
46. Total Certificate Benefits - Accident and Health (Line 13, Column 5).....	9,492	10,949	12,128	13,486	10,146
47. Increase in Life Reserves (Line 17, Column 2).....	90,917	23,466	457,000	(50,994)	34,000
48. Increase in Accident and Health Reserves (Line 17, Column 5).....	(6,135)	(6,488)	(6,162)	(7,119)	(8,149)
49. Refunds to Members (Line 28, Column 1).....	90,409	91,038	94,276	94,824	99,137
Operating Percentages					
50. Insurance Expense Percent (Page 6, Column 1, Lines 19, 20 and 21 less Line 6, Column 1) ÷ (Page 6 Column 1, Line 1) x 100.0.....	76.1	51.0	43.2	53.9	64.9
51. Lapse Percent [(Exhibit of Life Insurance, Column 2, Lines 14 and 15) ÷ 1/2 (Exhibit of Life Insurance, Column 2, Lines 1 and 21)] x 100.0.....	1.2	1.0	1.2	1.1	0.7
52. Accident and Health Loss Percent (Schedule H, Part 1, Lines 5 and 6, Column 2).....	26.4	33.5	40.4	39.3	12.1
53. A&H cost containment percent (Schedule H, Part 1, Line 4, Column 2).....	.....	.....	.....	.....	.....
54. Accident and Health Expense Percent Excluding Cost Containment Expenses (Schedule H, Part 1, Line 10, Column 2).....	.....	.....	.....	.....	.....
Accident and Health Reserve Adequacy					
55. Incurred Losses on Prior Years' Claims (Schedule H, Part 3, Line 3.1, Column 1).....	.....	.....	.....	.....	.....
56. Prior Years' Liability and Reserve (Schedule H, Part 3, Line 3.2, Column 1).....	538	942	776	1,300	1,860
Net Gains from Operations After Refunds to Members by Lines of Business (Page 6, Line 29)					
57. Life Insurance (Column 2).....	(29,649)	352,501	220,930	380,141	400,483
58. Annuity (Column 3).....	174,722	37,327	90,075	5,125	9,261
59. Supplementary Contracts (Column 4).....	.....	.....	.....	.....	.....
60. Accident and Health (Column 5).....	9,445	9,205	9,053	10,038	15,661
61. Aggregate of All Other Lines of Business (Column 6).....	.....	.....	.....	1	1
62. Fraternal (Column 8).....	.....	(208,054)	(212,304)	(223,133)	(213,994)
63. Expense (Column 9).....	.....	.....	.....	.....	.....
64. Total (Column 1).....	154,518	190,979	107,754	172,171	211,411

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes No

If no, please explain:
