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# AMENDED FILING EXPLANATION

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

Page 8 Line 2.11 total should have been in line 2.1 - changes were made in both Col 1 Collected and Col 2 Earned.

Page 21 Line 32 should be 0.

Page E11 & E13 On both pages Agstar was listed under Parents, Subsidiaries and Affiliates and has been moved to be listed under Industrial and Miscellaneous.

Page S101 Line 3.31 total should be 0 and Line 3.22

Page S104 Line 18 Col. 1, 2 and 3 should be 0 and line 14 Col 1 501,250, Col 2 450,000 and Col 3 501,250



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

Commenced Business..... November 13, 1910

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. TimothyPercic #	President	2. Theresa Aveni	Secretary-Treasurer
3.		4.	
OTHER			
Anna Mae Mannion	1st Vice President	Joseph G. Zab	2nd Vice President

DIRECTORS OR TRUSTEES

Timothy Percic #	Theresa Aveni	Anna Maie Mannion	Joseph Zab
Ronald Zab	Rudolph Susel	James Czeck	Alyce Kane
Jaime Loncar	iCharles 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

1. (Printed Name)  
Presdient

(Title)

(Signature)  
Theresa Aveni

2. (Printed Name)  
Secretary-Treasurer

(Title)

(Signature)

3. (Printed Name)

(Title)

Subscribed and sworn to before me  
This \_\_\_\_\_ day of \_\_\_\_\_ 2014

a. Is this an original filing?  
b. If no  
1. State the amendment number  
2. Date filed  
3. Number of pages attached

Yes [ ] No [X]  
1  
5/28/14  
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