AMENDED FILING EXPLANATION

Amended filing was required due to the letter received from the NAIC on May 25, 2017, see page 2 & 3 of this explanation page. In the letter only # 9 & #10 pertains to the 2016 Annual Statment. An correction has been made to both of these and the appropriate pages will be submitted with this explanation page.

9. **Rule Name: FXASN002733 Description: Analysis of Operations By Lines of Business, Column 5, Line 21 did not equal Schedule H, Part 1, Column 1, Line 4 plus Line 8**
   4118 - 0 = 4118

COMMENT: CORRECTION TO SCHEDULE H, PART1, COLUMN 1, LINE 4 PLUS LINE 8 HAS BEEN CORRECTED TO READ WITH 4118

10. **Rule Name: FXASN096073 Description: Notes to Financial Statements - Note 23 - Reinsurance, Column 2, Line 23G1B1 did not equal Five-Year Historical Data Page, Column 1, Line 17**
    12078708 - 11881246 = 197462

COMMENT: CORRECTION TO NOTES TO FINANCIAL STATEMENTS - NOTE #23 TO READ AS 11881246

AMENDED FILING EXPLANATION

LETTER FROM NAIC RECEIVED 5/25/17 REQUIRING ACTION
May 25, 2017

NAIC Financial Reporting & Analysis Data Validation Notification

Theresa Aveni
American Mut Life Assn
19424 South Waterloo Road
Cleveland, OH 44119

Re: NAIC Cocode: 56286 Group Code: 0
2016 Annual Statement filing

The second (and subsequent) pages of this notice detail discrepancies in the above filing. We request that you review each category very closely and provide the appropriate response within ten working days from receipt of this letter. Please also follow the instructions on the checklist below.

Provide the following with every response.

- Company code
- Company name
- Current contact name and phone number, if contact has changed
- Date of NAIC letter
- Name of NAIC contact on the letter
- Address every failure, unless the letter states that no correction or response is needed for a specified failure

Provide the following with Annual Statement corrections.

- Jurat Page
- Electronic partial amended Annual Statement filing via the NAIC internet filing site including all applicable PDF files
-

Provide the following with RBC corrections.

- Electronic complete amended RBC filing via the NAIC internet filing site
- Electronic Annual Statement Five-year Historical Data page
- Electronic partial amended Annual Statement filing via the NAIC internet filing site

You may receive future correspondence if additional discrepancies require your assistance. Forward all of the above to your state of domicile and to the NAIC contact below at the following address.

Cheryl Manning
Insurance Reporting Analyst III
NAIC - Financial Regulatory Services
1100 Walnut Street, Suite 1500
Kansas City, MO 64106-2197
CManning@naic.org
Fax: (816) 460-7580 Phone: (816) 783-8410

AMENDED FILING EXPLANATION

ITEMS REQUIRING ACTION:

CONSISTENCY AND TEXTUAL FAILURES:
If an amendment is not provided, a valid explanation for the failure is required. Please note that a Jurat page should accompany all amendments. Although the NAIC database cannot accept a signed Jurat page, the submission of a Jurat page (signed form sent to the state of domicile) is considered an attestation that the filing has been completed in accordance with the NAIC *Annual Statement* Instructions and the AP&P manual. The explanation that your state of domicile does not require an amendment is a valid explanation. If this is the case, please provide the name and telephone number of the state contact or a copy of the documentation confirming an amendment is not required.

1. **Rule Name:** FXAAN000008 **Description:** Analysis of Annuity Operations By Lines of Business, Column 1, Line 3 did not equal Analysis of Operations By Lines of Business, Column 3, Line 3
   819072 - 814360 = 4712
2. **Rule Name:** FXAAN000028 **Description:** Analysis of Annuity Operations By Lines of Business, Column 1, Line 21 did not equal Analysis of Operations By Lines of Business, Column 3, Line 21
   0 - 453026 = -453026
3. **Rule Name:** FXAAN000033 **Description:** Analysis of Annuity Operations By Lines of Business, Column 1, Line 26 did not equal Analysis of Operations By Lines of Business, Column 3, Line 26
   1637813 - 2090839 = -453026
4. **Rule Name:** FXAAN000034 **Description:** Analysis of Annuity Operations By Lines of Business, Column 1, Line 27 did not equal Analysis of Operations By Lines of Business, Column 3, Line 27
   226024 - -231714 = 457738
5. **Rule Name:** FXAAN000036 **Description:** Analysis of Annuity Operations By Lines of Business, Column 1, Line 29 did not equal Analysis of Operations By Lines of Business, Column 3, Line 29
   226024 - -231714 = 457738
6. **Rule Name:** FXAKU090006 **Description:** Supplemental Investment Risks Interrogatories, Column 7, Line 3.05 did not equal Annual Statement, Schedule D, Part 1A, Section 1, Column 7, Line 10.5
   600000 - 300000 = 300000

7. **Rule Name:** FXAKU090007 **Description:** Supplemental Investment Risks Interrogatories, Column 7, Line 3.06 did not equal Annual Statement, Schedule D, Part 1A, Section 1, Column 7, Line 10.6
   0 - 107250 = -107250
8. **Rule Name:** FXARN900120 **Description:** Risk-Based Capital Operational Risk, Column 1, Line 27 did not equal Prior Year Annual Statement, Premiums and Annuity Considerations for Life and Accident and Health Contracts, Part 1, Column 4. Line 20.1
   0 - 10524 = -10524
9. **Rule Name: FXASN002733 Description: Analysis of Operations By Lines of Business, Column 5, Line 21 did not equal Schedule H, Part 1, Column 1, Line 4 plus Line 8**
   4118 - 0 = 4118
10. **Rule Name: FXASN096073 Description: Notes to Financial Statements - Note 23 - Reinsurance, Column 2, Line 23G1B1 did not equal Five-Year Historical Data Page, Column 1, Line 17**
    12078708 - 11881246 = 197462

The 2017 Course Schedule of educational courses and opportunities including Accounting and Reporting Issues, Annual Statement Preparation, Basic Reinsurance, Annual Statement Investment Schedules and many other courses is available at: //www.naic.org/education_schedule.htm

FRATERNAL ORDERS - ASSOCIATION EDITION

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

ANNUAL STATEMENT

For the Year Ended December 31, 2016

of the Condition and Affairs of the

American Mutual Life Association

NAIC Group Code..... 0, 0 (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.....	Commenced Business.....	
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)*	2165311900 *(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..... Cleveland ..... OH ..... US ..... 44119 *(Street and Number) (City or Town, State, Country and Zip Code)*	2165311900 *(Area Code) (Telephone Number)*
Internet Web Site Address	www.AmericanMutual.org	
Statutory Statement Contact	Theresa Aveni *(Name)*	2165311900 *(Area Code) (Telephone Number) (Extension)*
	t.aveni@americanmutual.org *(E-Mail Address)*	*(Fax Number)*

OFFICERS

Name	Title	Name	Title
1. Timothy Percic	President	2. Theresa Aveni	Secretary-Treasurer
3.		4.	

OTHER

DIRECTORS OR TRUSTEES

Joseph Zab	James Czeck	Kenneth E. Shine	Ronald Zab
Alyce Kane	Jaime Loncar	James Mannion	Charlie Kohli

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)	(Signature)	(Signature)
Timothy Percic	Theresa Aveni	
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Secretary-Treasurer	
(Title)	(Title)	(Title)

Subscribed and sworn to before me _____ 2017

a. Is this an original filing? Yes [ ] No [x]

b. If no 1. State the amendment number

2. Date filed 5-26-2017

3. Number of pages attached

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	9,469	XXX	9,469	XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned	9,582	XXX	9,582	XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims	5,577	58.2	5,577	58.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
4. Cost containment expenses	4,118	43.0	4,118	43.0		0.0		0.0		0.0		0.0		0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4)	9,695	101.2	9,695	101.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6. Increase in contract reserves	(5,000)	(52.2)	(5,000)	(52.2)	0	0.0	0	0.0	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	4,887	51.0	4,887	51.0	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	4,887	51.0	4,887	51.0	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 through1103 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."