



LIFE, AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

# ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2020  
OF THE CONDITION AND AFFAIRS OF THE

## American Mutual Life Association

NAIC Group Code	<u>  </u>	NAIC Company Code	<u>56286</u>	Employer's ID Number	<u>34-6577472</u>
Organized under the Laws of	(Current) <u>Ohio</u>	(Prior) <u>  </u>	State of Domicile or Port of Entry <u>OH</u>		
Country of Domicile	<u>United States of America</u>				
Licensed as business type:	<u>Life, Accident and Health</u> <input type="checkbox"/> <u>Fraternal Benefit Societies</u> <input checked="" type="checkbox"/>				
Incorporated/Organized	<u>03/13/1914</u>		Commenced Business	<u>11/13/1910</u>	
Statutory Home Office	<u>19424 South Waterloo Road</u> (Street and Number)		<u>Cleveland, OH, US 44119</u> (City or Town, State, Country and Zip Code)		
Main Administrative Office	<u>19424 South Waterloo Road</u> (Street and Number)		<u>216-531-1900</u> (Area Code) (Telephone Number)		
Cleveland, OH, US 44119					
Mail Address	<u>19424 South Waterloo Road</u> (Street and Number or P.O. Box)		<u>Cleveland, OH, US 44119</u> (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	<u>19424 South Waterloo Road</u> (Street and Number)		<u>216-531-1900</u> (Area Code) (Telephone Number)		
Cleveland, OH, US 44119					
Internet Website Address	<u>www.AmericanMutual.org</u>				
Statutory Statement Contact	<u>Bronwyn Salo Young</u> (Name)		<u>216-531-1900</u> (Area Code) (Telephone Number)		
<u>b.young@Americanmutual.org</u>					
(E-mail Address)	(FAX Number)				

## OFFICERS

President Timothy J Percic  
Secretary-Treasurer Bronwyn Salo Young

**OTHER**

DIRECTORS OR TRUSTEES		
Joseph Zab	James Czeck	Ronald Zab
Kenneth Shine	Alyce Kane	Jaime Loncar
James Mannion	Charles Kohli	Jacob Young
Cade Jeric		

State of Ohio SS: \_\_\_\_\_  
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.

Timothy J. Percic  
President

Bronwyn Young  
Secretary-Treasurer

Subscribed and sworn to before me this  
\_\_\_\_ day of \_\_\_\_\_

a. Is this an original filing? ..... Yes [  ] No [  ]  
b. If no,  
1. State the amendment number.....  
2. Date filed .....03/01/2021  
3. Number of pages attached.....

## ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	40,203,117		40,203,117	40,693,150
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	1,324,864		1,324,864	1,226,944
2.2 Common stocks .....	71,674		71,674	70,300
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....	14,767		14,767	17,771
3.2 Other than first liens .....				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances) .....	0	174,002	174,002	118,640
4.2 Properties held for the production of income (less \$ ..... 0 encumbrances) .....				
4.3 Properties held for sale (less \$ encumbrances) .....	0			
5. Cash (\$ ..... 1,631,427 , Schedule E - Part 1), cash equivalents (\$ ..... 0 , Schedule E - Part 2) and short-term investments (\$ ..... 0 , Schedule DA) .....	1,631,427		1,631,427	426,631
6. Contract loans (including \$ ..... 0 premium notes) .....	118,101		118,101	115,785
7. Derivatives (Schedule DB) .....				
8. Other invested assets (Schedule BA) .....				
9. Receivables for securities .....				
10. Securities lending reinvested collateral assets (Schedule DL) .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	43,537,951		43,537,951	42,669,221
13. Title plants less \$ ..... 0 charged off (for Title insurers only) .....				
14. Investment income due and accrued .....	649,112		649,112	665,923
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	3,068		3,068	1,159
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ ..... 0 earned but unbilled premiums) .....				
15.3 Accrued retrospective premiums (\$ ..... 0 ) and contracts subject to redetermination (\$ ..... 0 ) .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....				
16.2 Funds held by or deposited with reinsured companies .....				
16.3 Other amounts receivable under reinsurance contracts .....				
17. Amounts receivable relating to uninsured plans .....				
18.1 Current federal and foreign income tax recoverable and interest thereon .....				
18.2 Net deferred tax asset .....				
19. Guaranty funds receivable or on deposit .....				
20. Electronic data processing equipment and software .....	44,737		44,737	56,760
21. Furniture and equipment, including health care delivery assets (\$ ..... 0 ) .....	7,563	7,563		
22. Net adjustment in assets and liabilities due to foreign exchange rates .....				
23. Receivables from parent, subsidiaries and affiliates .....				
24. Health care (\$ ..... 0 ) and other amounts receivable .....				
25. Aggregate write-ins for other than invested assets .....	186,973	186,973		
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	44,429,404	194,536	44,234,868	43,393,063
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28. Total (Lines 26 and 27) .....	44,429,404	194,536	44,234,868	43,393,063
<b>DETAILS OF WRITE-INS</b>				
1101. .....				
1102. .....				
1103. .....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....				
2501. Prepaid Pension .....	186,973	186,973		
2502. .....				
2503. .....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	186,973	186,973		

**LIABILITIES, SURPLUS AND OTHER FUNDS**

		1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$	29,143,319 (Exh. 5, Line 9999999) less \$	0	29,143,319
included in Line 6.3 (including \$	0 Modco Reserve)		28,343,691
2. Aggregate reserve for accident and health contracts (including \$	0 Modco Reserve)	38,125	40,125
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$	0 Modco Reserve)	1,399,306	1,554,035
4. Contract claims:			
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11)		132,476	115,414
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11)			
5. Policyholders' dividends/refunds to members \$	0 and coupons \$	0 due	
and unpaid (Exhibit 4, Line 10)			
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:			
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$	0	100,000	100,000
Modco)			
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$	0 Modco)		
6.3 Coupons and similar benefits (including \$	0 Modco)		
7. Amount provisionally held for deferred dividend policies not included in Line 6			
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$	0 discount; including \$	0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14)	
9. Contract liabilities not included elsewhere:			
9.1 Surrender values on canceled contracts			
9.2 Provision for experience rating refunds, including the liability of \$	0 accident and health experience rating refunds of which \$	0 is for medical loss ratio rebate per the Public Health Service Act	
9.3 Other amounts payable on reinsurance, including \$	0 assumed and \$	0 ceded	
9.4 Interest maintenance reserve (IMR, Line 6)		333,114	280,080
10. Commissions to agents due or accrued-life and annuity contracts \$	0 accident and health		
\$	0 and deposit-type contract funds \$	0	
11. Commissions and expense allowances payable on reinsurance assumed		1,172	1,175
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7)		80,304	77,780
13. Transfers to Separate Accounts due or accrued (net) (including \$	0 accrued for expense allowances recognized in reserves, net of reinsured allowances)		
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6)			
15.1 Current federal and foreign income taxes, including \$	0 on realized capital gains (losses)		
15.2 Net deferred tax liability			
16. Unearned investment income			
17. Amounts withheld or retained by reporting entity as agent or trustee		147,124	136,905
18. Amounts held for agents' account, including \$	0 agents' credit balances		
19. Remittances and items not allocated			
20. Net adjustment in assets and liabilities due to foreign exchange rates			
21. Liability for benefits for employees and agents if not included above			
22. Borrowed money \$	41,500 and interest thereon \$	0	41,500
23. Dividends to stockholders declared and unpaid			
24. Miscellaneous liabilities:			
24.01 Asset valuation reserve (AVR, Line 16, Col. 7)		450,732	407,422
24.02 Reinsurance in unauthorized and certified (\$	0 ) companies		
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$	0 ) reinsurers		
24.04 Payable to parent, subsidiaries and affiliates			
24.05 Drafts outstanding		61,516	1,010
24.06 Liability for amounts held under uninsured plans			
24.07 Funds held under coinsurance			
24.08 Derivatives			
24.09 Payable for securities			
24.10 Payable for securities lending			
24.11 Capital notes \$	0 and interest thereon \$	0	
25. Aggregate write-ins for liabilities		37,706	33,341
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25)		31,966,393	31,090,978
27. From Separate Accounts Statement			
28. Total liabilities (Lines 26 and 27)		31,966,393	31,090,978
29. Common capital stock			
30. Preferred capital stock			
31. Aggregate write-ins for other than special surplus funds			
32. Surplus notes			
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1)			
34. Aggregate write-ins for special surplus funds			
35. Unassigned funds (surplus)		12,268,475	12,302,085
36. Less treasury stock, at cost:			
36.1 0 shares common (value included in Line 29 \$	0 )		
36.2 0 shares preferred (value included in Line 30 \$	0 )		
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$	0 in Separate Accounts Statement)	12,268,475	12,302,085
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55)		12,268,475	12,302,085
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)		44,234,868	43,393,063
<b>DETAILS OF WRITE-INS</b>			
2501. Accrued Interest Payable on Deposits		14,000	14,000
2502. Reserve for Convention Expense		40,000	20,000
2503. Reserve for Pension Projected Benefit Obligation		(16,294)	(659)
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)		37,706	33,341
3101.			
3102.			
3103.			
3198. Summary of remaining write-ins for Line 31 from overflow page			
3199. Totals (Lines 3101 thru 3103 plus 3198)(Line 31 above)			
3401.			
3402.			
3403.			
3498. Summary of remaining write-ins for Line 34 from overflow page			
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)			

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**SUMMARY OF OPERATIONS**

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11) .....	1,533,088	1,156,709
2. Considerations for supplementary contracts with life contingencies .....	2,316,357	2,441,505
3. Net investment income (Exhibit of Net Investment Income, Line 17) .....	83,554	100,950
4. Amortization of Interest Maintenance Reserve (IMR, Line 5) .....		
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....		
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1) .....		
7. Reserve adjustments on reinsurance ceded .....		
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....		
8.2 Charges and fees for deposit-type contracts .....	1,415	754
8.3 Aggregate write-ins for miscellaneous income .....		
9. Total (Lines 1 to 8.3) .....	3,934,414	3,699,918
10. Death benefits .....	252,755	293,668
11. Matured endowments (excluding guaranteed annual pure endowments) .....	10,466	3,264
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8) .....	1,486,889	1,525,315
13. Disability benefits and benefits under accident and health contracts .....	1,804	3,535
14. Coupons, guaranteed annual pure endowments and similar benefits .....		
15. Surrender benefits and withdrawals for life contracts .....	50,920	83,414
16. Group conversions .....		
17. Interest and adjustments on contract or deposit-type contract funds .....	60,308	42,159
18. Payments on supplementary contracts with life contingencies .....		
19. Increase in aggregate reserves for life and accident and health contracts .....	805,272	267,946
20. Totals (Lines 10 to 19) .....	2,668,414	2,219,301
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1) .....	2,726	2,951
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1) .....		
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6) .....	1,002,402	1,041,097
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5) .....	28,911	31,572
25. Increase in loading on deferred and uncollected premiums .....		
26. Net transfers to or (from) Separate Accounts net of reinsurance .....		
27. Aggregate write-ins for deductions .....	20,000	20,000
28. Totals (Lines 20 to 27) .....	3,722,453	3,314,921
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	211,961	384,997
30. Dividends to policyholders and refunds to members .....	92,701	91,177
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	119,260	293,820
32. Federal and foreign income taxes incurred (excluding tax on capital gains) .....		
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	119,260	293,820
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ 0 (excluding taxes of \$ 0 transferred to the IMR) .....		
35. Net income (Line 33 plus Line 34) .....	119,260	293,820
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2) .....	12,302,086	12,216,909
37. Net income (Line 35) .....	119,260	293,820
38. Change in net unrealized capital gains (losses) less capital gains tax of \$ 0 .....	(114,322)	(86,250)
39. Change in net unrealized foreign exchange capital gain (loss) .....		
40. Change in net deferred income tax .....		
41. Change in nonadmitted assets .....	(10,873)	(41,113)
42. Change in liability for reinsurance in unauthorized and certified companies .....		
43. Change in reserve on account of change in valuation basis, (increase) or decrease .....		
44. Change in asset valuation reserve .....	(43,311)	(90,112)
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1) .....		
46. Surplus (contributed to) withdrawn from Separate Accounts during period .....		
47. Other changes in surplus in Separate Accounts Statement .....		
48. Change in surplus notes .....		
49. Cumulative effect of changes in accounting principles .....		
50. Capital changes:		
50.1 Paid in .....		
50.2 Transferred from surplus (Stock Dividend) .....		
50.3 Transferred to surplus .....		
51. Surplus adjustment:		
51.1 Paid in .....		
51.2 Transferred to capital (Stock Dividend) .....		
51.3 Transferred from capital .....		
51.4 Change in surplus as a result of reinsurance .....		
52. Dividends to stockholders .....		
53. Aggregate write-ins for gains and losses in surplus .....	15,635	8,832
54. Net change in capital and surplus for the year (Lines 37 through 53) .....	(33,611)	85,177
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38) .....	12,268,475	12,302,086
<b>DETAILS OF WRITE-INS</b>		
08.301. Sundry Income .....	1,415	754
08.302. .....		
08.303. .....		
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....		
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above) .....	1,415	754
2701. Convention Reserve .....	20,000	20,000
2702. .....		
2703. .....		
2798. Summary of remaining write-ins for Line 27 from overflow page .....		
2799. Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above) .....	20,000	20,000
5301. Projected Benefit Obligation for Pension - fully funded .....	15,635	15,681
5302. Premium Receivable Adjustment .....		(6,849)
5303. .....		
5398. Summary of remaining write-ins for Line 53 from overflow page .....		
5399. Totals (Lines 5301 thru 5303 plus 5398)(Line 53 above) .....	15,635	8,832

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	1,531,179	1,155,550
2. Net investment income .....	2,456,338	2,586,421
3. Miscellaneous income .....	1,415	754
4. Total (Lines 1 through 3) .....	3,988,932	3,742,725
5. Benefit and loss related payments .....	1,853,724	2,004,860
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		
7. Commissions, expenses paid and aggregate write-ins for deductions .....	1,054,042	1,054,740
8. Dividends paid to policyholders .....	92,701	91,177
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....		
10. Total (Lines 5 through 9) .....	3,000,467	3,150,777
11. Net cash from operations (Line 4 minus Line 10) .....	988,466	591,948
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	3,795,962	3,921,711
12.2 Stocks .....		
12.3 Mortgage loans .....	3,005	2,844
12.4 Real estate .....		
12.5 Other invested assets .....		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....		
12.7 Miscellaneous proceeds .....		
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	3,798,967	3,924,555
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	3,407,513	4,196,447
13.2 Stocks .....	98,614	608,200
13.3 Mortgage loans .....		
13.4 Real estate .....	65,985	26,494
13.5 Other invested assets .....		
13.6 Miscellaneous applications .....		
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	3,572,112	4,831,141
14. Net increase (decrease) in contract loans and premium notes .....	2,316	(2,578)
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	224,539	(904,008)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....		
16.2 Capital and paid in surplus, less treasury stock .....		
16.3 Borrowed funds .....	41,500	
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	(154,729)	432,183
16.5 Dividends to stockholders .....		
16.6 Other cash provided (applied) .....	105,021	(13,879)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(8,209)	418,304
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	1,204,796	106,244
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	426,631	320,387
19.2 End of year (Line 18 plus Line 19.1) .....	1,631,427	426,631

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY**

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)**

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life With Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (c)	11 Other Individual Life	12 YRT Mortality Risk Only
1. Premiums for life contracts <sup>(a)</sup> .....	134,487		134,487									
2. Considerations for supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income .....	1,158,178		1,158,178									
4. Amortization of Interest Maintenance Reserve (IMR) .....	33,421		33,421									
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....												
6. Commissions and expense allowances on reinsurance ceded .....												
7. Reserve adjustments on reinsurance ceded .....												
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....												
8.2 Charges and fees for deposit-type contracts .....												
8.3 Aggregate write-ins for miscellaneous income .....	1,415		1,415									
9. Totals (Lines 1 to 8.3) .....	1,327,502		1,327,502									
10. Death benefits .....	252,755		252,755									
11. Matured endowments (excluding guaranteed annual pure endowments) .....	10,466		10,466									
12. Annuity benefits .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts .....												
14. Coupons, guaranteed annual pure endowments and similar benefits .....												
15. Surrender benefits and withdrawals for life contracts .....	50,920		50,920									
16. Group conversions .....												
17. Interest and adjustments on contract or deposit-type contract funds .....	45,231		45,231									
18. Payments on supplementary contracts with life contingencies .....												
19. Increase in aggregate reserves for life and accident and health contracts .....	335,457		335,457									
20. Totals (Lines 10 to 19) .....	694,829		694,829									
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	2,726		2,726									XXX
22. Commissions and expense allowances on reinsurance assumed .....												
23. General insurance expenses .....	506,305		506,305									
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	16,974		16,974									
25. Increase in loading on deferred and uncollected premiums .....												
26. Net transfers to or (from) Separate Accounts net of reinsurance .....												
27. Aggregate write-ins for deductions .....												
28. Totals (Lines 20 to 27) .....	1,220,833		1,220,833									
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	106,669		106,669									
30. Dividends to policyholders and refunds to members .....	92,701		92,701									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	13,968		13,968									
32. Federal income taxes incurred (excluding tax on capital gains) .....												
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	13,968		13,968									
34. Policies/certificates in force end of year .....	19,401		19,401									
<b>DETAILS OF WRITE-INS</b>												
08.301. Sundry Income .....	1,415		1,415									
08.302. .....												
08.303. .....												
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....												
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....	1,415		1,415									
2701. Convention Allowance Reserve and Reversal .....												
2702. .....												
2703. .....												
2798. Summary of remaining write-ins for Line 27 from overflow page .....												
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) .....												

(a) Include premium amounts for preneed plans included in Line 1 .....

(b) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected .....

(c) Individual and Group Credit Life are combined and included on ..... page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP LIFE INSURANCE (c)**

	1 Total	2 Whole Life	3 Term Life	4 Universal Life	5 Variable Life	6 Variable Universal Life	7 Credit Life (d)	8 Other Group Life (a)	9 YRT Mortality Risk Only
1. Premiums for life contracts <sup>(b)</sup>									
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income									
4. Amortization of Interest Maintenance Reserve (IMR)									
5. Separate Accounts net gain from operations excluding unrealized gains or losses									
6. Commissions and expense allowances on reinsurance ceded									
7. Reserve adjustments on reinsurance ceded									
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts									
8.2 Charges and fees for deposit-type contracts									
8.3 Aggregate write-ins for miscellaneous income									
9. Totals (Lines 1 to 8.3)									
10. Death benefits									
11. Matured endowments (excluding guaranteed annual pure endowments)									
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts									
14. Coupons, guaranteed annual pure endowments and similar benefits									
15. Surrender benefits and withdrawals for life contracts									
16. Group conversions									
17. Interest and adjustments on contract or deposit-type contract funds									
18. Payments on supplementary contracts with life contingencies									
19. Increase in aggregate reserves for life and accident and health contracts									
20. Totals (Lines 10 to 19)									
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)									XXX
22. Commissions and expense allowances on reinsurance assumed									
23. General insurance expenses									
24. Insurance taxes, licenses and fees, excluding federal income taxes									
25. Increase in loading on deferred and uncollected premiums									
26. Net transfers to or (from) Separate Accounts net of reinsurance									
27. Aggregate write-ins for deductions									
28. Totals (Lines 20 to 27)									
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)									
30. Dividends to policyholders and refunds to members									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)									
32. Federal income taxes incurred (excluding tax on capital gains)									
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)									
34. Policies/certificates in force end of year									
<b>DETAILS OF WRITE-INS</b>									
08.301.									
08.302.									
08.303.									
08.398. Summary of remaining write-ins for Line 8.3 from overflow page									
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)									
2701.									
2702.									
2703.									
2798. Summary of remaining write-ins for Line 27 from overflow page									
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)									

(a) Includes the following amounts for FEGLI/SGLI: Line 1 ..... , Line 10 ..... , Line 16 ..... , Line 23 ..... , Line 24 .....

(b) Include premium amounts for preneed plans included in Line 1

(c) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(d) Individual and Group Credit Life are combined and included on ..... page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES <sup>(a)</sup>**

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities Without Guarantees		
1. Premiums for individual annuity contracts .....	1,392,149	1,392,149	XXX	XXX	XXX	XXX	XXX
2. Considerations for supplementary contracts with life contingencies .....							
3. Net investment income .....	1,158,178		1,158,178				
4. Amortization of Interest Maintenance Reserve (IMR) .....	50,132		50,132				
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....							
6. Commissions and expense allowances on reinsurance ceded .....							
7. Reserve adjustments on reinsurance ceded .....							
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....							
8.2 Charges and fees for deposit-type contracts .....							
8.3 Aggregate write-ins for miscellaneous income .....							
9. Totals (Lines 1 to 8.3) .....	2,600,459	2,600,459					
10. Death benefits .....							
11. Matured endowments (excluding guaranteed annual pure endowments) .....							
12. Annuity benefits .....	1,486,889		1,486,889				
13. Disability benefits and benefits under accident and health contracts .....							
14. Coupons, guaranteed annual pure endowments and similar benefits .....							
15. Surrender benefits and withdrawals for life contracts .....							
16. Group conversions .....							
17. Interest and adjustments on contract or deposit-type contract funds .....	15,077		15,077				
18. Payments on supplementary contracts with life contingencies .....							
19. Increase in aggregate reserves for life and accident and health contracts .....	471,815		471,815				
20. Totals (Lines 10 to 19) .....	1,973,781		1,973,781				
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....							
22. Commissions and expense allowances on reinsurance assumed .....							
23. General insurance expenses .....	349,969		349,969				
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	11,316		11,316				
25. Increase in loading on deferred and uncollected premiums .....							
26. Net transfers to or (from) Separate Accounts net of reinsurance .....							
27. Aggregate write-ins for deductions .....							
28. Totals (Lines 20 to 27) .....	2,335,065		2,335,065				
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	265,394		265,394				
30. Dividends to policyholders and refunds to members .....							
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	265,394		265,394				
32. Federal income taxes incurred (excluding tax on capital gains) .....							
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	265,394		265,394				
34. Policies/certificates in force end of year .....	487		487				
<b>DETAILS OF WRITE-INS</b>							
08.301. ....							
08.302. ....							
08.303. ....							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....							
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....							
2701. ....							
2702. ....							
2703. ....							
2798. Summary of remaining write-ins for Line 27 from overflow page .....							
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) .....							

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP ANNUITIES <sup>(a)</sup>**

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities Without Guarantees		
1. Premiums for group annuity contracts .....							
2. Considerations for supplementary contracts with life contingencies .....		XXX	XXX	XXX	XXX		XXX
3. Net investment income .....							
4. Amortization of Interest Maintenance Reserve (IMR) .....							
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....							
6. Commissions and expense allowances on reinsurance ceded .....							
7. Reserve adjustments on reinsurance ceded .....							
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....							
8.2 Charges and fees for deposit-type contracts .....							
8.3 Aggregate write-ins for miscellaneous income .....							
9. Totals (Lines 1 to 8.3) .....							
10. Death benefits .....							
11. Matured endowments (excluding guaranteed annual pure endowments) .....							
12. Annuity benefits .....							
13. Disability benefits and benefits under accident and health contracts .....							
14. Coupons, guaranteed annual pure endowments and similar benefits .....							
15. Surrender benefits and withdrawals for life contracts .....							
16. Group conversions .....							
17. Interest and adjustments on contract or deposit-type contract funds .....							
18. Payments on supplementary contracts with life contingencies .....							
19. Increase in aggregate reserves for life and accident and health contracts .....							
20. Totals (Lines 10 to 19) .....							
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....							
22. Commissions and expense allowances on reinsurance assumed .....							
23. General insurance expenses .....							
24. Insurance taxes, licenses and fees, excluding federal income taxes .....							
25. Increase in loading on deferred and uncollected premiums .....							
26. Net transfers to or (from) Separate Accounts net of reinsurance .....							
27. Aggregate write-ins for deductions .....							
28. Totals (Lines 20 to 27) .....							
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....							
30. Dividends to policyholders and refunds to members .....							
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....							
32. Federal income taxes incurred (excluding tax on capital gains) .....							
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....							
34. Policies/certificates in force end of year .....							
<b>DETAILS OF WRITE-INS</b>							
08.301. ....							
08.302. ....							
08.303. ....							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....							
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....							
2701. ....							
2702. ....							
2703. ....							
2798. Summary of remaining write-ins for Line 27 from overflow page .....							
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) .....							

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH (a)**

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
1. Premiums for accident and health contracts .....	6,453											6,453	
2. Considerations for supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income .....													
4. Amortization of Interest Maintenance Reserve (IMR) .....													
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....													
6. Commissions and expense allowances on reinsurance ceded .....													
7. Reserve adjustments on reinsurance ceded .....													
8. Miscellaneous Income:													
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....													
8.2 Charges and fees for deposit-type contracts .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8.3 Aggregate write-ins for miscellaneous income .....													
9. Totals (Lines 1 to 8.3) .....	6,453											6,453	
10. Death benefits .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Matured endowments (excluding guaranteed annual pure endowments) .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Annuity benefits .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts .....	1,804											1,804	
14. Coupons, guaranteed annual pure endowments and similar benefits .....													
15. Surrender benefits and withdrawals for life contracts .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
16. Group conversions .....													
17. Interest and adjustments on contract or deposit-type contract funds .....													
18. Payments on supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
19. Increase in aggregate reserves for life and accident and health contracts .....	(2,000)											(2,000)	
20. Totals (Lines 10 to 19) .....	(196)											(196)	
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....													
22. Commissions and expense allowances on reinsurance assumed .....													
23. General insurance expenses .....													
24. Insurance taxes, licenses and fees, excluding federal income taxes .....													
25. Increase in loading on deferred and uncollected premiums .....													
26. Net transfers to or (from) Separate Accounts net of reinsurance .....													
27. Aggregate write-ins for deductions .....													
28. Totals (Lines 20 to 27) .....	(196)											(196)	
29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28) .....	6,649											6,649	
30. Dividends to policyholders and refunds to members .....													
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	6,649											6,649	
32. Federal income taxes incurred (excluding tax on capital gains) .....													
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32) .....	6,649											6,649	
34. Policies/certificates in force end of year .....	305											305	
<b>DETAILS OF WRITE-INS</b>													
08.301. ....													
08.302. ....													
08.303. ....													
08.398. Summary of remaining write-ins for Line 8.3 from overflow page .....													
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....													
2701. ....													
2702. ....													
2703. ....													
2798. Summary of remaining write-ins for Line 27 from overflow page .....													
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above) .....													

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE <sup>(a)</sup>**

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life With Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life <sup>(b)</sup> (N/A Fraternal)	11 Other Individual Life	12 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)												
1. Reserve December 31 of prior year	11,952,866		11,952,866									
2. Tabular net premiums or considerations	128,957		128,957									
3. Present value of disability claims incurred												
4. Tabular interest	436,621		436,621									
5. Tabular less actual reserve released												
6. Increase in reserve on account of change in valuation basis												
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve		XXX								XXX		
7. Other increases (net)												
8. Totals (Lines 1 to 7)	12,518,444		12,518,444									
9. Tabular cost	42,181		42,181									
10. Reserves released by death	164,291		164,291									
11. Reserves released by other terminations (net)	61,895		61,895									
12. Annuity, supplementary contract and disability payments involving life contingencies												
13. Net transfers to or (from) Separate Accounts												
14. Total Deductions (Lines 9 to 13)	268,367		268,367									
15. Reserve December 31 of current year	12,250,077		12,250,077									
<b>Cash Surrender Value and Policy Loans</b>												
16. CSV Ending balance December 31, current year												
17. Amount Available for Policy Loans Based upon Line 16 CSV												

Term block of business is comprised of less than 5% of premiums and less than 5% of reserves

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected. have been aggregated with column 3 - Whole Life.

(b) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP LIFE INSURANCE <sup>(a)</sup>**  
**(N/A Fraternal)**

	1 Total	2 Whole Life	3 Term Life	4 Variable Life	5 Universal Life	6 Variable Universal Life	7 Credit Life <sup>(b)</sup>	8 Other Group Life	9 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)									
1. Reserve December 31 of prior year .....									
2. Tabular net premiums or considerations .....									
3. Present value of disability claims incurred .....									
4. Tabular interest .....									
5. Tabular less actual reserve released .....									
6. Increase in reserve on account of change in valuation basis .....									
7. Other increases (net) .....									
8. Totals (Lines 1 to 7) .....									
9. Tabular cost .....									
10. Reserves released by death .....									
11. Reserves released by other terminations (net) .....									
12. Annuity, supplementary contract and disability payments involving life contingencies .....									
13. Net transfers to or (from) Separate Accounts .....									
14. Total Deductions (Lines 9 to 13) .....									
15. Reserve December 31 of current year									
<b>Cash Surrender Value and Policy Loans</b>									
16. CSV Ending balance December 31, current year .....									
17. Amount Available for Policy Loans Based upon Line 16 CSV									

NONE

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected. ....

(b) Individual and Group Credit Life are combined and included on ..... page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL ANNUITIES (a)**

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities without Guarantees		
<b>Involving Life or Disability Contingencies (Reserves)</b>							
(Net of Reinsurance Ceded)							
1. Reserve December 31 of prior year	16,390,824	16,390,824					
2. Tabular net premiums or considerations	1,392,149	1,392,149					
3. Present value of disability claims incurred	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest	575,638	575,638					
5. Tabular less actual reserve released	21,518	21,518					
6. Increase in reserve on account of change in valuation basis							
7. Other increases (net)							
8. Totals (Lines 1 to 7)	18,380,129	18,380,129					
9. Tabular cost							
10. Reserves released by death	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net)							
12. Annuity, supplementary contract and disability payments involving life contingencies	1,486,889	1,486,889					
13. Net transfers to or (from) Separate Accounts							
14. Total Deductions (Lines 9 to 13)	1,486,889	1,486,889					
15. Reserve December 31 of current year	16,893,240	16,893,240					
<b>Cash Surrender Value and Policy Loans</b>							
16. CSV Ending balance December 31, current year							
17. Amount Available for Policy Loans Based upon Line 16 CSV							

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP ANNUITIES <sup>(a)</sup>**  
**(N/A Fraternal)**

	1 Total	Deferred				6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
		2 Fixed Annuities	3 Indexed Annuities	4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)							
1. Reserve December 31 of prior year .....							
2. Tabular net premiums or considerations .....		XXX	XXX	XXX	XXX	XXX	XXX
3. Present value of disability claims incurred .....							
4. Tabular interest .....							
5. Tabular less actual reserve released .....							
6. Increase in reserve on account of change in valuation basis .....							
7. Other increases (net) .....							
8. Totals (Lines 1 to 7) .....							
9. Tabular cost .....							
10. Reserves released by death .....		XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net) .....							
12. Annuity, supplementary contract and disability payments involving life contingencies .....							
13. Net transfers to or (from) Separate Accounts .....							
14. Total Deductions (Lines 9 to 13) .....							
15. Reserve December 31 of current year .....							
<b>Cash Surrender Value and Policy Loans</b>							
16. CSV Ending balance December 31, current year .....							
17. Amount Available for Policy Loans Based upon Line 16 CSV .....							

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**EXHIBIT OF NET INVESTMENT INCOME**

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds .....	(a) 662,288	662,288
1.1 Bonds exempt from U.S. tax .....	(a)	.....
1.2 Other bonds (unaffiliated) .....	(a) 1,634,697	1,617,907
1.3 Bonds of affiliates .....	(a)	.....
2.1 Preferred stocks (unaffiliated) .....	(b) 70,763	70,763
2.11 Preferred stocks of affiliates .....	(b)	.....
2.2 Common stocks (unaffiliated) .....	1,580	1,580
2.21 Common stocks of affiliates .....	(c) 916	916
3. Mortgage loans .....	(d) 40,000	40,000
4. Real estate .....	6,414	6,414
5. Contract loans .....	(e) 358	358
6. Cash, cash equivalents and short-term investments .....	(f)	.....
7. Derivative instruments .....		
8. Other invested assets .....		
9. Aggregate write-ins for investment income .....		
10. Total gross investment income .....	2,417,017	2,400,206
11. Investment expenses .....		(g) 70,743
12. Investment taxes, licenses and fees, excluding federal income taxes .....		(g) 2,484
13. Interest expense .....		(h) .....
14. Depreciation on real estate and other invested assets .....		(i) 10,622
15. Aggregate write-ins for deductions from investment income .....		
16. Total deductions (Lines 11 through 15) .....		83,849
17. Net investment income (Line 10 minus Line 16) .....		2,316,357
<b>DETAILS OF WRITE-INS</b>		
0901. .....		
0902. .....		
0903. .....		
0998. Summary of remaining write-ins for Line 9 from overflow page .....		
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....		
1501. .....		
1502. .....		
1503. .....		
1598. Summary of remaining write-ins for Line 15 from overflow page .....		
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....		

(a) Includes \$ 36,439 accrual of discount less \$ 159,609 amortization of premium and less \$ 48,511 paid for accrued interest on purchases.

(b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.

(c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.

(d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.

(e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.

(f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.

(g) Includes \$ 70,743 investment expenses and \$ 2,484 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.

(h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.

(i) Includes \$ 10,622 depreciation on real estate and \$ 0 depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds .....					
1.1 Bonds exempt from U.S. tax .....					
1.2 Other bonds (unaffiliated) .....	136,588		136,588	(115,002)	
1.3 Bonds of affiliates .....					
2.1 Preferred stocks (unaffiliated) .....					
2.11 Preferred stocks of affiliates .....					
2.2 Common stocks (unaffiliated) .....				680	
2.21 Common stocks of affiliates .....					
3. Mortgage loans .....					
4. Real estate .....					
5. Contract loans .....					
6. Cash, cash equivalents and short-term investments .....					
7. Derivative instruments .....					
8. Other invested assets .....					
9. Aggregate write-ins for capital gains (losses) .....					
10. Total capital gains (losses) .....	136,588		136,588	(114,322)	
<b>DETAILS OF WRITE-INS</b>					
0901. .....					
0902. .....					
0903. .....					
0998. Summary of remaining write-ins for Line 9 from overflow page .....					
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....					

## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association

## EXHIBIT - 1 PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Industrial Life	Ordinary		5 Credit Life (Group and Individual)	Insurance Group		Accident and Health			11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other		
<b>FIRST YEAR (other than single)</b>												
1. Uncollected .....												
2. Deferred and accrued .....												
3. Deferred , accrued and uncollected:												
3.1 Direct .....												
3.2 Reinsurance assumed .....												
3.3 Reinsurance ceded .....												
3.4 Net (Line 1 + Line 2) .....												
4. Advance .....												
5. Line 3.4 - Line 4 .....												
6. Collected during year:												
6.1 Direct .....	444,966			5,194	439,772							
6.2 Reinsurance assumed .....												
6.3 Reinsurance ceded .....												
6.4 Net .....	444,966			5,194	439,772							
7. Line 5 + Line 6.4 .....	444,966			5,194	439,772							
8. Prior year (uncollected + deferred and accrued - advance) .....												
9. First year premiums and considerations:												
9.1 Direct .....	444,966			5,194	439,772							
9.2 Reinsurance assumed .....												
9.3 Reinsurance ceded .....												
9.4 Net (Line 7 - Line 8) .....	444,966			5,194	439,772							
10. Single premiums and considerations:												
10.1 Direct .....	985,459			.33,082	952,377							
10.2 Reinsurance assumed .....												
10.3 Reinsurance ceded .....												
10.4 Net .....	985,459			.33,082	952,377							
11. Renewal												
12. Uncollected .....	3,068			3,068								
13. Deferred and accrued .....												
14. Deferred, accrued and uncollected:												
13.1 Direct .....	3,068			3,068								
13.2 Reinsurance assumed .....												
13.3 Reinsurance ceded .....												
13.4 Net (Line 11 + Line 12) .....	3,068			3,068								
15. Advance .....												
16. Line 13.4 - Line 14 .....	3,068			3,068								
17. Collected during year:												
16.1 Direct .....	103,897			.97,420						6,477		
16.2 Reinsurance assumed .....												
16.3 Reinsurance ceded .....												
16.4 Net .....	100,754			.94,277						6,477		
18. Line 15 + Line 16.4 .....	103,822			.97,345						6,477		
19. Prior year (uncollected + deferred and accrued - advance) .....	1,159			1,159								
20. Renewal premiums and considerations:												
19.1 Direct .....	105,806			.99,329						6,477		
19.2 Reinsurance assumed .....												
19.3 Reinsurance ceded .....												
19.4 Net (Line 17 - Line 18) .....	102,663			.96,186						6,477		
21. Total												
22. Total premiums and annuity considerations:												
20.1 Direct .....	1,536,231			.137,605	1,392,149					6,477		
20.2 Reinsurance assumed .....												
20.3 Reinsurance ceded .....												
20.4 Net (Lines 9.4 + 10.4 + 19.4) .....	1,533,088			134,462	1,392,149					6,477		

**EXHIBIT - 1 PART 2 - POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)**

	1 Total	2 Industrial Life	Insurance										11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)		
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health								
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other						
<b>POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)</b>																
21. To pay renewal premiums .....	2,244		2,244													
22. All other .....	90,457		90,457													
<b>REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED</b>																
23. First year (other than single):																
23.1 Reinsurance ceded .....																
23.2 Reinsurance assumed .....																
23.3 Net ceded less assumed .....																
24. Single:																
24.1 Reinsurance ceded .....																
24.2 Reinsurance assumed .....																
24.3 Net ceded less assumed .....																
25. Renewal:																
25.1 Reinsurance ceded .....																
25.2 Reinsurance assumed .....																
25.3 Net ceded less assumed .....																
26. Totals:																
26.1 Reinsurance ceded (Page 6, Line 6) .....																
26.2 Reinsurance assumed (Page 6, Line 22) .....																
26.3 Net ceded less assumed .....																
<b>COMMISSIONS INCURRED (direct business only)</b>																
27. First year (other than single) .....	2,726		2,726													
28. Single .....																
29. Renewal .....																
30. Deposit-type contract funds .....																
31. Totals (to agree with Page 6, Line 21)	2,726		2,726													

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**EXHIBIT 2 - GENERAL EXPENSES**

(a) Includes management fees of \$ 0 to affiliates and \$ 0 to non-affiliates.

(b) Show the distribution of this amount in the following categories (Fraternal Benefit Societies Only):

3. Religious ..... 1100 ; 3. Membership ..... 1000 ; 7. Other ..... 1100 ; 9. Total ..... 1100

	Insurance			4 Investment	5 Fraternal	6 Total
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes .....						
2. State insurance department licenses and fees .....	350					350
3. State taxes on premiums .....						
4. Other state taxes, including \$ for employee benefits .....	292	(2,523)		(223)	(56)	(2,802)
5. U.S. Social Security taxes .....	29,779			2,646	.662	33,087
6. All other taxes .....	684			61	15	760
7. Taxes, licenses and fees incurred .....	28,290			2,484	.621	31,395
8. Taxes, licenses and fees unpaid Dec. 31, prior year .....						
9. Taxes, licenses and fees unpaid Dec. 31, current year .....						
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	28,290			2,484	.621	31,395

## **EXHIBIT 4 - DIVIDENDS OR REFUNDS**

	1 Life	2 Accident and Health
1. Applied to pay renewal premiums .....	2,243	
2. Applied to shorten the endowment or premium-paying period .....	61,298	
3. Applied to provide paid-up additions .....		
4. Applied to provide paid-up annuities .....		
5. Total Lines 1 through 4 .....	63,541	
6. Paid in cash .....	1,898	
7. Left on deposit .....	27,262	
8. Aggregate write-ins for dividend or refund options .....		
9. Total Lines 5 through 8 .....	92,701	
10. Amount due and unpaid .....		
11. Provision for dividends or refunds payable in the following calendar year .....	100,000	
12. Terminal dividends .....		
13. Provision for deferred dividend contracts .....		
14. Amount provisionally held for deferred dividend contracts not included in Line 13 .....		
15. Total Lines 10 through 14 .....	100,000	
16. Total from prior year .....	100,000	
17. Total dividends or refunds (Lines 9 + 15 - 16) .....	92,701	
<b>DETAILS OF WRITE-INS</b>		
0801. ....		
0802. ....		
0803. ....		
0898. Summary of remaining write-ins for Line 8 from overflow page .....		
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above) .....		

**EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS**

1 Valuation Standard	2 Total <sup>(a)</sup>	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
0100001. Am Exp 2.5%-3%	876,139		876,139		
0100002. 41 CSO 2.5%	869,737		869,737		
0100003. 58 CSO 2.5%	2,282,935		2,282,935		
0100004. 80 CSO 4%	412,643		412,643		
0100005. 80 CSO 4.5%	2,123,040		2,123,040		
0100006. 80 CSO 4.75%	2,086,145		2,086,145		
0100007. 2001 CSO 3.5%	400,428		400,428		
0100008. 2001 CSO 4%	488,610		488,610		
0100009. 2017 CSO 3.5%	18,227		18,227		
0100010. Paid Up Additions	1,422,467		1,422,467		
0100011. Extended Term	69,707		69,707		
0100012. Asset Adequacy Reserve	1,200,000		1,200,000		
0199997. Totals (Gross)	12,250,078		12,250,078		
0199998. Reinsurance ceded					
0199999. Life Insurance: Totals (Net)	12,250,078		12,250,078		
0200001. Annuities 2%	1,882,037	XXX	1,882,037	XXX	
0200002. Annuities 3%	3,966,749	XXX	3,966,749	XXX	
0200003. Annuities 3.5%	710	XXX	710	XXX	
0200004. Annuities 4.5%	7,062,271	XXX	7,062,271	XXX	
0200005. Roth 2%	31,619	XXX	31,619	XXX	
0200006. Roth 3%	526,263	XXX	526,263	XXX	
0200007. Roth 4.5%	195,713	XXX	195,713	XXX	
0200008. Traditional 2%	320,460	XXX	320,460	XXX	
0200009. Traditional 3%	1,880,297	XXX	1,880,297	XXX	
0200010. Traditional 4.5%	961,168	XXX	961,168	XXX	
0200011. Life & Education	65,954	XXX	65,954	XXX	
0299997. Totals (Gross)	16,893,241	XXX	16,893,241	XXX	
0299998. Reinsurance ceded		XXX		XXX	
0299999. Annuities: Totals (Net)	16,893,241	XXX	16,893,241	XXX	
0399998. Reinsurance ceded					
0399999. SCWLC: Totals (Net)					
0499998. Reinsurance ceded					
0499999. Accidental Death Benefits: Totals (Net)					
0599998. Reinsurance ceded					
0599999. Disability-Active Lives: Totals (Net)					
0699998. Reinsurance ceded					
0699999. Disability-Disabled Lives: Totals (Net)					
0799998. Reinsurance ceded					
0799999. Miscellaneous Reserves: Totals (Net)					
.....					
.....					
.....					
.....					
.....					
.....					
.....					
9999999. Totals (Net) - Page 3, Line 1	29,143,319		29,143,319		

(a) Included in the above table are amounts of deposit-type contracts that originally contained a mortality risk. Amounts of deposit-type contracts in Column 2 that no longer contain a mortality risk are Life Insurance \$ ..... ; Annuities \$ ..... ; Supplementary Contracts with Life Contingencies \$ ..... ; Accidental Death Benefits \$ ..... ; Disability - Active Lives \$ ..... ; Disability - Disabled Lives \$ ..... ; Miscellaneous Reserves \$ ..... .

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**EXHIBIT 5 - INTERROGATORIES**

1.1 Has the reporting entity ever issued both participating and non-participating contracts? ..... Yes [ ] No [ X ]  
 1.2 If not, state which kind is issued.  
     Participating .....  
 2.1 Does the reporting entity at present issue both participating and non-participating contracts? ..... Yes [ ] No [ X ]  
 2.2 If not, state which kind is issued.  
     Participating .....  
 3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? ..... Yes [ ] No [ X ]  
 If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.  
 4. Has the reporting entity any assessment or stipulated premium contracts in force? ..... Yes [ ] No [ X ]  
 If so, state:  
 4.1 Amount of insurance? ..... \$ .....  
 4.2 Amount of reserve? ..... \$ .....  
 4.3 Basis of reserve:  
 .....  
 4.4 Basis of regular assessments:  
 .....  
 4.5 Basis of special assessments:  
 .....  
 4.6 Assessments collected during the year ..... \$ .....  
 5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.  
 .....  
 6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? ..... Yes [ ] No [ X ]  
 6.1 If so, state the amount of reserve on such contracts on the basis actually held: ..... \$ .....  
 6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: ..... \$ .....  
 Attach statement of methods employed in their valuation.  
 7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements ..... \$ .....  
 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:  
 .....  
 7.3 State the amount of reserves established for this business: ..... \$ .....  
 7.4 Identify where the reserves are reported in the blank:  
 .....  
 8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: ..... \$ .....  
 8.2 State the amount of reserves established for this business: ..... \$ .....  
 8.3 Identify where the reserves are reported in the blank:  
 .....  
 9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? ..... Yes [ ] No [ X ]  
 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: ..... \$ .....  
 9.2 State the amount of reserves established for this business: ..... \$ .....  
 9.3 Identify where the reserves are reported in the blank:  
 .....

**EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR**

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due to Change
	2 Changed From	3 Changed To	
9999999 - Total (Column 4, only)			

**NONE**

**EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS <sup>(a)</sup>**

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
<b>ACTIVE LIFE RESERVE</b>													
1. Unearned premium reserves .....	1,144											1,144	
2. Additional contract reserves (b) .....	36,981											36,981	
3. Additional actuarial reserves-Asset/Liability analysis .....													
4. Reserve for future contingent benefits .....													
5. Reserve for rate credits .....													
6. Aggregate write-ins for reserves .....													
7. Totals (Gross) .....	38,125											38,125	
8. Reinsurance ceded .....													
9. Totals (Net) .....	38,125											38,125	
<b>CLAIM RESERVE</b>													
10. Present value of amounts not yet due on claims .....													
11. Additional actuarial reserves-Asset/Liability analysis .....													
12. Reserve for future contingent benefits .....													
13. Aggregate write-ins for reserves .....													
14. Totals (Gross) .....													
15. Reinsurance ceded .....													
16. Totals (Net) .....													
17. TOTAL (Net) .....	38,125											38,125	
<b>TABULAR FUND INTEREST</b>													
<b>DETAILS OF WRITE-INS</b>													
0601. ....													
0602. ....													
0603. ....													
0698. Summary of remaining write-ins for Line 6 from overflow page .....													
0699. TOTALS (Lines 0601 thru 0603 plus 0698) (Line 6 above) .....													
1301. ....													
1302. ....													
1303. ....													
1398. Summary of remaining write-ins for Line 13 from overflow page .....													
1399. TOTALS (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....													

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association

## EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance .....	1,554,035		674,751		621,626	257,658
2. Deposits received during the year .....	180,339		81,767		93,305	5,267
3. Investment earnings credited to the account .....	60,308		22,052		28,292	9,964
4. Other net change in reserves .....						
5. Fees and other charges assessed .....						
6. Surrender charges .....						
7. Net surrender or withdrawal payments .....	395,376		303,362		86,348	5,666
8. Other net transfers to or (from) Separate Accounts .....						
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8) .....	1,399,306		475,208		656,875	267,223
10. Reinsurance balance at the beginning of the year .....						
11. Net change in reinsurance assumed .....						
12. Net change in reinsurance ceded .....						
13. Reinsurance balance at the end of the year (Lines 10+11-12) .....						
14. Net balance at the end of current year after reinsurance (Lines 9 + 13) .....	1,399,306		475,208		656,875	267,223

## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association

**EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS****PART 1 - Liability End of Current Year**

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct	122,476			122,476							
1.2 Reinsurance assumed											
1.3 Reinsurance ceded											
1.4 Net	122,476			122,476							
2. In course of settlement:											
2.1 Resisted											
2.11 Direct											
2.12 Reinsurance assumed											
2.13 Reinsurance ceded											
2.14 Net			(b)	(b)			(b)	(b)			
2.2 Other											
2.21 Direct											
2.22 Reinsurance assumed											
2.23 Reinsurance ceded											
2.24 Net			(b)	(b)			(b)	(b)		(b)	(b)
3. Incurred but unreported:											
3.1 Direct	10,000			10,000							
3.2 Reinsurance assumed											
3.3 Reinsurance ceded											
3.4 Net	10,000		(b)	10,000	(b)		(b)	(b)		(b)	(b)
4. TOTALS	132,476	(a)	(a)	132,476							
4.1 Direct	132,476			132,476							
4.2 Reinsurance assumed											
4.3 Reinsurance ceded											
4.4 Net	132,476	(a)	(a)	132,476			(a)				

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$ 0 in Column 2, \$ 2,396 in Column 3 and \$ 0 in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$

Individual Annuities \$ , Credit Life (Group and Individual) \$ , and Group Life \$ , are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$

Credit (Group and Individual) Accident and Health \$ , and Other Accident and Health \$ are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association

## EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

## PART 2 - Incurred During the Year

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements During the Year:											
1.1 Direct .....	1,734,852		246,159	1,486,889							1,804
1.2 Reinsurance assumed .....											
1.3 Reinsurance ceded .....											
1.4 Net .....	(d) 1,734,852		246,159	1,486,889							1,804
2. Liability December 31, current year from Part 1:											
2.1 Direct .....	132,476		132,476								
2.2 Reinsurance assumed .....											
2.3 Reinsurance ceded .....											
2.4 Net .....	132,476		132,476								
3. Amounts recoverable from reinsurers December 31, current year .....											
4. Liability December 31, prior year:											
4.1 Direct .....	115,414		115,414								
4.2 Reinsurance assumed .....											
4.3 Reinsurance ceded .....											
4.4 Net .....	115,414		115,414								
5. Amounts recoverable from reinsurers December 31, prior year .....											
6. Incurred Benefits											
6.1 Direct .....	1,751,914		263,221	1,486,889							1,804
6.2 Reinsurance assumed .....											
6.3 Reinsurance ceded .....											
6.4 Net .....	1,751,914		263,221	1,486,889							1,804

(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... in Line 1.1, \$ ..... in Line 1.4.

\$..... in Line 6.1, and \$ ..... in Line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... 10,466 in Line 1.1, \$ ..... 10,466 in Line 1.4.

\$..... 10,466 in Line 6.1, and \$ ..... 10,466 in Line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ ..... in Line 1.1, \$ ..... in Line 1.4.

\$..... in Line 6.1, and \$ ..... in Line 6.4.

(d) Includes \$ ..... premiums waived under total and permanent disability benefits.

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**EXHIBIT OF NON-ADMITTED ASSETS**

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....			
2. Stocks (Schedule D):			
2.1 Preferred stocks .....			
2.2 Common stocks .....			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....			
3.2 Other than first liens .....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....			
4.2 Properties held for the production of income .....			
4.3 Properties held for sale .....			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....			
6. Contract loans .....			
7. Derivatives (Schedule DB) .....			
8. Other invested assets (Schedule BA) .....			
9. Receivables for securities .....			
10. Securities lending reinvested collateral assets (Schedule DL) .....			
11. Aggregate write-ins for invested assets .....			
12. Subtotals, cash and invested assets (Lines 1 to 11) .....			
13. Title plants (for Title insurers only) .....			
14. Investment income due and accrued .....			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....			
15.3 Accrued retrospective premiums and contracts subject to redetermination .....			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....			
16.2 Funds held by or deposited with reinsured companies .....			
16.3 Other amounts receivable under reinsurance contracts .....			
17. Amounts receivable relating to uninsured plans .....			
18.1 Current federal and foreign income tax recoverable and interest thereon .....			
18.2 Net deferred tax asset .....			
19. Guaranty funds receivable or on deposit .....			
20. Electronic data processing equipment and software .....			
21. Furniture and equipment, including health care delivery assets .....	7,563	11,431	3,868
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			
23. Receivables from parent, subsidiaries and affiliates .....			
24. Health care and other amounts receivable .....			
25. Aggregate write-ins for other than invested assets .....	186,973	172,232	(14,741)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	194,536	183,663	(10,873)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
28. Total (Lines 26 and 27) .....	194,536	183,663	(10,873)
<b>DETAILS OF WRITE-INS</b>			
1101. .....			
1102. .....			
1103. .....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....			
2501. Prepaid Expenses .....			
2502. Prepaid Pension Cost .....	186,973	172,232	(14,741)
2503. .....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	186,973	172,232	(14,741)

## NOTES TO FINANCIAL STATEMENTS

### NOTE 1 Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

The financial statements of the American Mutual Life Association are presented on the basis of accounting practices prescribed and permitted by the Ohio Department of Insurance.

	SSAP #	F/S Page	F/S Line #	2020	2019
NET INCOME (1) State basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ 119,260	\$ 293,820

(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:

(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:

(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 119,260	\$ 293,820
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SURPLUS

(5) State basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 12,268,475	\$ 12,302,085
--	-----	-----	-----	---------------	---------------

(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:

(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:

(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 12,268,475	\$ 12,302,085
------------------------	-----	-----	-----	---------------	---------------

#### B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

#### C. Accounting Policy

The Ohio Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of a Fraternal Benefit Society, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual, (NAIC SAP), has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. Specifically, 1) goodwill arising from the purchase of a subsidiary, controlled or affiliated entity is written off directly to surplus in the year it originates by Ohio domiciled companies. In NAIC SAP, goodwill in amounts not to exceed 10% of an insurer's capital and surplus may be capitalized and all amounts of goodwill are amortized to unrealized gains and losses on investments over period.

(1) Basis for Short-Term Investments

Short-term investments are stated at amortized cost.

(2) Basis for Bonds and Amortization Schedule

Not backed by other loans at amortized cost using the interest method; loan-backed bonds and structured securities at amortized cost using the interest method including anticipated prepayments at the date of purchase; significant changes in estimated cash flows from the original purchase assumptions are accounted for using the composite method. Bonds rated NAIC Class 6 are valued at market.

(3) Basis for Common Stocks

At market value except that investments in stocks of uncombined subsidiaries and affiliates in which the Society has an interest of 20% or more are carried on the equity basis.

(4) Basis for Preferred Stocks

Cost or Association Value in accordance with NAIC procedure.

(5) Basis for Mortgage Loans

Aggregate unpaid balance. Other Investments: Equity basis.

(6) Basis for Loan-Backed Securities and Adjustment Methodology

See #2.

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities

The Association has no subsidiaries.

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities

The Association has no ownership interests in joint ventures.

(9) Accounting Policies for Derivatives

The Association has no derivatives.

(10) Anticipated Investment Income Used in Premium Deficiency Calculation

The Association has no Premium Deficiency Calculation.

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses

Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined. Because the Society is a life insurer, loss adjustment expenses are not a big factor nor large expense.

(12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period

The Association has not modified its capitalization policy from prior period.

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

The Association does not have Pharmaceutical Receivables.

#### D. Going Concern

The Association does not have any going concerns.

## NOTES TO FINANCIAL STATEMENTS

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**NOTE 2 Accounting Changes and Corrections of Errors**

Not Applicable

**NOTE 3 Business Combinations and Goodwill**

Not Applicable

**NOTE 4 Discontinued Operations**

Not Applicable

**NOTE 5 Investments**

## A. Mortgage Loans, including Mezzanine Real Estate Loans

(1) The maximum and minimum lending rates for mortgage loans during 2020 were:

Commercial mortgages 5.0% and 5.0%.

(2) The maximum percentage of any one loan to the value of the security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgages was: 6.25%.

(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan  
total

	Current Year	Prior Year
	\$	-

(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is a Participant or Co-lender in a Mortgage  
Loan Agreement:

Not Applicable

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan  
Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan:Agreement:

Not Applicable

(7) Allowance for credit losses:

Not Applicable

(8) Mortgage Loans Derecognized as a Result of Foreclosure:

Not Applicable

(9) The company does not have any impaired loans.

## B. Debt Restructuring

Not Applicable

## C. Reverse Mortgages

Not Applicable

## D. Loan-Backed Securities

Not Applicable

## E. Dollar Repurchase Agreements and/or Securities Lending Transactions

Not Applicable

## F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable

## G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable

## H. Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable

## I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable

## NOTES TO FINANCIAL STATEMENTS

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## J. Real Estate

- (1) The company did not recognize any impairment losses on real estate during the current reporting period.
- (2) The company has not sold or classified any real estate investments as held for sale during the current reporting period.
- (3) The company does not plan to sell real estate investments.
- (4) The company does not engage in retail land sale operations.
- (5) The company does not hold any real estate investments with participating mortgage loan features.

## K. Low Income Housing tax Credits (LIHTC)

Not Applicable

## L. Restricted Assets

## 1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted					6	7		
	Current Year								
	1	2	3	4	5				
Restricted Asset Category	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/(Decrease) (5 minus 6)		
a. Subject to contractual obligation for which liability is not shown					\$ -	\$ -	\$ -		
b. Collateral held under security lending agreements					\$ -	\$ -	\$ -		
c. Subject to repurchase agreements					\$ -	\$ -	\$ -		
d. Subject to reverse repurchase agreements					\$ -	\$ -	\$ -		
e. Subject to dollar repurchase agreements					\$ -	\$ -	\$ -		
f. Subject to dollar reverse repurchase agreements					\$ -	\$ -	\$ -		
g. Placed under option contracts					\$ -	\$ -	\$ -		
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock					\$ -	\$ -	\$ -		
i. FHLB capital stock	\$ 70,300				\$ 70,300	\$ -	\$ 70,300		
j. On deposit with states					\$ -	\$ -	\$ -		
k. On deposit with other regulatory bodies					\$ -	\$ -	\$ -		
l. Pledged collateral to FHLB (including assets backing funding agreements)	\$ 500,000				\$ 500,000	\$ -	\$ 500,000		
m. Pledged as collateral not captured in other categories					\$ -	\$ -	\$ -		
n. Other restricted assets					\$ -	\$ -	\$ -		
<b>o. Total Restricted Assets</b>	<b>\$ 570,300</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 570,300</b>	<b>\$ -</b>	<b>\$ 570,300</b>		

(a) Subset of Column 1

(b) Subset of Column 3

## NOTES TO FINANCIAL STATEMENTS

Restricted Asset Category	Current Year				
	8	9	Percentage		
			10 Gross (Admitted & Non- admitted) Restricted to Total Assets (c)	11 Admitted Restricted to Total Admitted Assets (d)	
Restricted Asset Category	Total Non- admitted Restricted	Total Admitted Restricted (5 minus 8)			
a. Subject to contractual obligation for which liability is not shown			\$ -	0.000%	0.000%
b. Collateral held under security lending agreements			\$ -	0.000%	0.000%
c. Subject to repurchase agreements			\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements			\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements			\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase agreements			\$ -	0.000%	0.000%
g. Placed under option contracts			\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock			\$ -	0.000%	0.000%
i. FHLB capital stock		70,300		0.158%	0.159%
j. On deposit with states			\$ -	0.000%	0.000%
k. On deposit with other regulatory bodies			\$ -	0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)		500,000		1.125%	1.130%
m. Pledged as collateral not captured in other categories			\$ -	0.000%	0.000%
n. Other restricted assets			\$ -	0.000%	0.000%
o. Total Restricted Assets	\$ -	\$ 570,300		1.284%	1.289%

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Description of Assets	Gross (Admitted & Nonadmitted) Restricted					8	Percentage				
	Current Year						6	7	9	10	
	1	2	3	4	5						
Description of Assets	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Non-admitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets	
Total (c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%	

(a) Subset of column 1

(b) Subset of column 3

(c) Total Line for Columns 1 through 7 should equal 5L(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)m Columns 9 through 11 respectively.

3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Description of Assets	Gross (Admitted & Nonadmitted) Restricted					8	Percentage				
	Current Year						6	7	9	10	
	1	2	3	4	5						
Description of Assets	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Non-admitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets	
Total (c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%	

(a) Subset of column 1

(b) Subset of column 3

(c) Total Line for Columns 1 through 7 should equal 5L(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)n Columns 9 through 11 respectively.

## NOTES TO FINANCIAL STATEMENTS

## 4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Collateral Assets	1 Book/Adjusted Carrying Value (BACV)	2 Fair Value	3 % of BACV to Total Assets (Admitted and Nonadmitted)*	4 % of BACV to Total Admitted Assets **
General Account:				
a. Cash, Cash Equivalents and Short-Term Investments			0.000%	0.000%
b. Schedule D, Part 1			0.000%	0.000%
c. Schedule D, Part 2, Section 1			0.000%	0.000%
d. Schedule D, Part 2, Section 2			0.000%	0.000%
e. Schedule B			0.000%	0.000%
f. Schedule A			0.000%	0.000%
g. Schedule BA, Part 1			0.000%	0.000%
h. Schedule DL, Part 1			0.000%	0.000%
i. Other			0.000%	0.000%
i. Total Collateral Assets (a+b+c+d+e+f+g+h+i)	\$ -	\$ -	0.000%	0.000%
Separate Account:				
k. Cash, Cash Equivalents and Short-Term Investments			0.000%	0.000%
l. Schedule D, Part 1			0.000%	0.000%
m. Schedule D, Part 2, Section 1			0.000%	0.000%
m. Schedule D, Part 2, Section 2			0.000%	0.000%
o. Schedule B			0.000%	0.000%
p. Schedule A			0.000%	0.000%
q. Schedule BA, Part 1			0.000%	0.000%
r. Schedule DL, Part 1			0.000%	0.000%
s. Other			0.000%	0.000%
t. Total Collateral Assets (k+l+m+n+o+p+q+r+s)	\$ -	\$ -	0.000%	0.000%

\* j = Column 1 divided by Asset Page, Line 26 (Column 1)

t = Column 1 divided by Asset Page, Line 27 (Column 1)

\*\* j = Column 1 divided by Asset Page, Line 26 (Column 3)

t = Column 1 divided by Asset Page, Line 27 (Column 3)

1 Amount	2 % of Liability to Total Liabilities *
u. Recognized Obligation to Return Collateral Asset (General Account)	0.000%
v. Recognized Obligation to Return Collateral Asset (Separate Account)	0.000%

\* u = Column 1 divided by Liability Page, Line 26 (Column 1)

v = Column 1 divided by Liability Page, Line 27 (Column 1)

## M. Working Capital Finance Investments

Not Applicable

## N. Offsetting and Netting of Assets and Liabilities

Not Applicable

## O. 5GI Securities

Not Applicable

## P. Short Sales

Not Applicable

## Q. Prepayment Penalty and Acceleration Fees

	General Account	Separate Account
1. Number of CUSIPs	1	
2. Aggregate Amount of Investment Income	\$ 9,000	

**NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies**

A. The Company has no investments in Joint Ventures, Partnerships, or Limited Liability Companies that exceed 10% of its admitted assets.

B. The Company did not recognize any impairment write downs for its investments in Joint Ventures, Partnerships, and Limited Liability Companies during the statement period.

**NOTE 7 Investment Income**

A. The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued:

Due and accrued income was excluded from investment income on the following basis:

Mortgage loans: On loans in foreclosure or delinquent for more than 90 days.

Bonds: Where collection of interest is uncertain and/or the bond is in default.

B. The total amount excluded:

\$0

# NOTES TO FINANCIAL STATEMENTS

**NOTE 8 Derivative Instruments**

Not Applicable

**NOTE 9 Income Taxes**

Not Applicable

**NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

Not Applicable

**NOTE 11 Debt**

A. The Company received a loan from Key Bank in the amount of \$41,500 under the Paycheck Protection Program established by the Coronavirus Aid, Relief, and Economic Security (CARES) Act. The loan is subject to a note dated August 6, 2020 and may be forgiven to the extent proceeds of the loan are used for eligible expenditures such as payroll and other expenses described in the CARES Act. No determination has been made as to whether the Company will be eligible for forgiveness, in whole or in part. The loan bears interest at a rate of 1% and is payable in monthly installments of principal and interest over 24 months beginning 6 months from the date of the note. The loan may be repaid at any time with no prepayment penalty.

## B. FHLB (Federal Home Loan Bank) Agreements

(1) The Company is a member of the Federal Home Loan Bank (FHLB) of Cincinnati. Through its membership, the Company has conducted business activity (borrowings) with the FHLB. It is part of the Company's strategy to utilize these funds as backup liquidity. The Company has determined the actual/estimated maximum borrowing capacity as \$574,000. The Company calculated this amount in accordance with limitations in the FHLB capital plan.

## (2) FHLB Capital Stock

## a. Aggregate Totals

	1 Total 2+3	2 General Account	3 Separate Accounts
1. Current Year			
(a) Membership Stock - Class A	\$ 69,429	\$ 69,429	
(b) Membership Stock - Class B	\$ -	\$ -	
(c) Activity Stock	\$ -	\$ -	
(d) Excess Stock	\$ 871	\$ 871	
(e) Aggregate Total (a+b+c+d)	\$ 70,300	\$ 70,300	\$ -
(f) Actual or estimated Borrowing Capacity as Determined by the Insurer		XXX	XXX
2. Prior Year-end			
(a) Membership Stock - Class A	\$ 68,037	\$ 68,037	\$ -
(b) Membership Stock - Class B	\$ -	\$ -	\$ -
(c) Activity Stock	\$ 2,263	\$ 2,263	\$ -
(d) Excess Stock	\$ -	\$ -	\$ -
(e) Aggregate Total (a+b+c+d)	\$ 70,300	\$ 70,300	\$ -
(f) Actual or estimated Borrowing Capacity as Determined by the Insurer	\$ 21,261,583	XXX	XXX

11B(2)a1(f) should be equal to or greater than 11B(4)a1(d)

11B(2)a2(f) should be equal to or greater than 11B(4)a2(d)

## b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

	1	2	Eligible for Redemption			
	Current Year Total (2+3+4+5+6)	Not Eligible for Redemption	3 Less Than 6 Months	4 6 Months to Less Than 1 Year	5 1 to Less Than 3 Years	6 3 to 5 Years
Membership Stock						
1. Class A	\$ 69,429	\$ 69,429				
2. Class B	\$ -					

11B(2)b1 Current Year Total (Column 1) should equal 11B(2)a1(a) Total (Column 1)

11B(2)b2 Current Year Total (Column 1) should equal 11B(2)a1(b) Total (Column 1)

## (3) Collateral Pledged to FHLB

## a. Amount Pledged as of Reporting Date

	1 Fair Value	2 Carrying Value	3 Aggregate Total Borrowing
1. Current Year Total General and Separate Accounts Total Collateral Pledged (Lines 2+3)	\$ 579,883	\$ 500,000	\$ -
2. Current Year General Account Total Collateral Pledged	\$ 579,883	\$ 500,000	
3. Current Year Separate Accounts Total Collateral Pledged			
4. Prior Year-end Total General and Separate Accounts Total Collateral Pledged	\$ 556,837	\$ 500,000	\$ -

11B(3)a1 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b1 (Columns 1, 2 and 3 respectively)

11B(3)a2 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b2 (Columns 1, 2 and 3 respectively)

11B(3)a3 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b3 (Columns 1, 2 and 3 respectively)

11B(3)a4 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b4 (Columns 1, 2 and 3 respectively)

## NOTES TO FINANCIAL STATEMENTS

## b. Maximum Amount Pledged During Reporting Period

	1	2	3
	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
1. Current Year Total General and Separate Accounts Maximum Collateral Pledged (Lines 2+3)	\$ 579,883	\$ 500,000	\$ -
2. Current Year General Account Maximum Collateral Pledged	\$ 579,883	\$ 500,000	\$ -
3. Current Year Separate Accounts Maximum Collateral Pledged	\$ 556,837	\$ 500,000	\$ 112,200
4. Prior Year-end Total General and Separate Accounts Maximum Collateral Pledged	\$ 556,837	\$ 500,000	\$ 112,200

## (4) Borrowing from FHLB

The Association did not borrow during the current reporting period.

## a. Amount as of Reporting Date

	1	2	3	4
	Total 2+3	General Account	Separate Accounts	Funding Agreements Reserves Established
1. Current Year				
(a) Debt	\$ -			XXX
(b) Funding Agreements	\$ -			XXX
(c) Other	\$ -			XXX
(d) Aggregate Total (a+b+c)	\$ -	\$ -	\$ -	\$ -
2. Prior Year end				
(a) Debt	\$ -	\$ -	\$ -	XXX
(b) Funding Agreements	\$ -	\$ -	\$ -	\$ -
(c) Other	\$ -	\$ -	\$ -	XXX
(d) Aggregate Total (a+b+c)	\$ -	\$ -	\$ -	\$ -

## b. Maximum Amount During Reporting Period (Current Year)

	1	2	3
	Total 2+3	General Account	Separate Accounts
1. Debt	\$ -		
2. Funding Agreements	\$ -		
3. Other	\$ -		
4. Aggregate Total (1+2+3)	\$ -	\$ -	\$ -

11B(4)b4 (Columns 1, 2 and 3) should be equal to or greater than 11B(4)a1(d) (Columns 1, 2 and 3 respectively)

## c. FHLB - Prepayment Obligations

Does the company have prepayment obligations under the following arrangements (YES/NO)?	
1. Debt	No
2. Funding Agreements	No
3. Other	No
4. Aggregate Total (1+2+3)	\$ -

**NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**

## A. Defined Benefit Plan

The Company sponsors non-contributory defined benefit pension plans covering U.S. employees. As of December 31, 2020, the Company accrued in accordance with actuarially determined amounts with an offset to the pension cost accrual for the incremental asset amortization.

A summary of assets, obligations and assumptions of the Pension and Other Postretirement Benefit Plans are as follows at December 31, 2020 and 2019:

## (1) Change in benefit obligation

## a. Pension Benefits

	Overfunded		Underfunded	
	2020	2019	2020	2019
1. Benefit obligation at beginning of year	\$ 385,900	\$ 312,595	\$ -	\$ -
2. Service cost	\$ 26,843	\$ 23,759	\$ -	\$ -
3. Interest cost	\$ 15,411	\$ 12,316	\$ -	\$ -
4. Contribution by plan participants	\$ 36,431	\$ 46,589	\$ -	\$ -
5. Actuarial gain (loss)	\$ (12,660)	\$ (9,359)	\$ -	\$ -
6. Foreign currency exchange rate changes				
7. Benefits paid	\$ (451,925)	\$ 385,900	\$ -	\$ -
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$ 451,925	\$ 385,900	\$ -	\$ -

## NOTES TO FINANCIAL STATEMENTS

## b. Postretirement Benefits

	Overfunded		Underfunded	
	2020	2019	2020	2019
1. Benefit obligation at beginning of year	\$ -	\$ -	\$ -	\$ -
2. Service cost	\$ -	\$ -	\$ -	\$ -
3. Interest cost	\$ -	\$ -	\$ -	\$ -
4. Contribution by plan participants	\$ -	\$ -	\$ -	\$ -
5. Actuarial gain (loss)	\$ -	\$ -	\$ -	\$ -
6. Foreign currency exchange rate changes	\$ -	\$ -	\$ -	\$ -
7. Benefits paid	\$ -	\$ -	\$ -	\$ -
8. Plan amendments	\$ -	\$ -	\$ -	\$ -
9. Business combinations, divestitures, curtailments, settlements and special termination benefits	\$ -	\$ -	\$ -	\$ -
10. Benefit obligation at end of year	\$ -	\$ -	\$ -	\$ -

## c. Special or Contractual Benefits Per SSAP No. 11

	Overfunded		Underfunded	
	2020	2019	2020	2019
1. Benefit obligation at beginning of year	\$ -	\$ -	\$ -	\$ -
2. Service cost	\$ -	\$ -	\$ -	\$ -
3. Interest cost	\$ -	\$ -	\$ -	\$ -
4. Contribution by plan participants	\$ -	\$ -	\$ -	\$ -
5. Actuarial gain (loss)	\$ -	\$ -	\$ -	\$ -
6. Foreign currency exchange rate changes	\$ -	\$ -	\$ -	\$ -
7. Benefits paid	\$ -	\$ -	\$ -	\$ -
8. Plan amendments	\$ -	\$ -	\$ -	\$ -
9. Business combinations, divestitures, curtailments, settlements and special termination benefits	\$ -	\$ -	\$ -	\$ -
10. Benefit obligation at end of year	\$ -	\$ -	\$ -	\$ -

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2020	2019	2020	2019	2020	2019
(2) Change in plan assets						
a. Fair value of plan assets at beginning of year	\$ 386,559	\$ 297,573	\$ -	\$ -	\$ -	\$ -
b. Actual return on plan assets	\$ 43,552	\$ 34,669	\$ -	\$ -	\$ -	\$ -
c. Foreign currency exchange rate changes	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Reporting entity contribution	\$ 50,768	\$ 63,676	\$ -	\$ -	\$ -	\$ -
e. Plan participants' contributions	\$ (12,660)	\$ (9,359)	\$ -	\$ -	\$ -	\$ -
f. Benefits paid	\$ (468,219)	\$ 386,559	\$ -	\$ -	\$ -	\$ -
g. Business combinations, divestitures and settlements						
h. Fair value of plan assets at end of year	\$ 468,219	\$ 386,559	\$ -	\$ -	\$ -	\$ -

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2020	2019	2020	2019	2020	2019
(3) Funded status						
a. Components:						
1. Prepaid benefit costs	\$ 186,973	\$ 172,232	\$ -	\$ -	\$ -	\$ -
2. Overfunded plan assets	\$ 170,679	\$ 171,573	\$ -	\$ -	\$ -	\$ -
3. Accrued benefit costs						
4. Liability for pension benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. Assets and liabilities recognized:						
1. Assets (nonadmitted)	\$ 16,294	\$ 659	\$ -	\$ -	\$ -	\$ -
2. Liabilities recognized	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
c. Unrecognized liabilities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2020	2019	2020	2019	2020	2019
(4) Components of net periodic benefit cost						
a. Service cost	\$ 26,843	\$ 23,759	\$ -	\$ -	\$ -	\$ -
b. Interest cost	\$ 15,411	\$ 12,316	\$ -	\$ -	\$ -	\$ -
c. Expected return on plan assets	\$ (16,451)	\$ (16,554)	\$ -	\$ -	\$ -	\$ -
d. Transition asset or obligation						
e. Gains and losses	\$ 10,224	\$ 1,546	\$ -	\$ -	\$ -	\$ -
f. Prior service cost or credit	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
g. Gain or loss recognized due to a settlement or curtailment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
h. Total net periodic benefit cost	\$ 36,027	\$ 21,067	\$ -	\$ -	\$ -	\$ -

## NOTES TO FINANCIAL STATEMENTS

(5) Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost

	Pension Benefits		Postretirement Benefits	
	2020	2019	2020	2019
a. Items not yet recognized as a component of net periodic cost - prior year	\$ 171,573	\$ 144,645	\$ -	\$ -
b. Net transition asset or obligation recognized	\$ 9,330	\$ 28,474	\$ -	\$ -
c. Net prior service cost or credit arising during the period	\$ (10,224)	\$ (1,546)	\$ -	\$ -
d. Net prior service cost or credit recognized	\$ 170,679	\$ 171,573	\$ -	\$ -
g. Items not yet recognized as a component of net periodic cost - current year	\$ 170,679	\$ 171,573	\$ -	\$ -

(6) Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost

	Pension Benefits		Postretirement Benefits	
	2020	2019	2020	2019
a. Net transition asset or obligation	\$ 170,679	\$ 171,573	\$ -	\$ -
b. Net prior service cost or credit				
c. Net recognized gains and losses				

(7) Weighted-average assumptions used to determine net periodic benefit cost as of the end of current period:

	2020	2019
a. Weighted average discount rate	4.000%	4.000%
b. Expected long-term rate of return on plan assets	4.000%	4.000%
c. Rate of compensation increase	1.500%	1.500%
d. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)	0.000%	0.000%

Weighted average assumptions used to determine projected benefit obligations as of end of current period:

	2020	2019
e. Weighted average discount rate	4.000%	4.000%
f. Rate of compensation increase	1.500%	1.500%
g. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)	0.000%	0.000%

(8) The amount of the accumulated benefit obligation for defined benefit pension plans was \$451,925 for the current year and \$364,323 for the prior year.

(9) The Association does not offer Postretirement Benefits other than Pensions.

(10) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated:

	Amount
a. 2021	\$ 27,031
b. 2022	\$ 26,810
c. 2023	\$ 26,564
d. 2024	\$ 26,296
e. 2025	\$ 26,002
f. 2026 through 2030	\$ 124,492

(11) In 2021, the Company currently intends to make contributions to the defined benefit pension plan in a total amount between \$50,000 to \$125,000

(12) Not Applicable.

(13) Not Applicable.

(14) Not Applicable.

(15) Not Applicable.

(16) There were no significant gains and losses related to changes in the defined benefit obligation for the period.

(17) Not Applicable.

(18) Not Applicable.

B. The strategy for investments is maintaining a moderate growth and income position in a optimal blend of equity and debt, in a managed account at a professional investment firm. This helps the Plan maintain a diversified investment pool and limits exposure to investments outside the risk profile.

In addition, the Plan maintains life insurance policies on key participants of the Plan. A cash position is maintained to facilitate payments to retired participants and to cover expected expenses.

The Plan is funded by the Sponsor on an annual basis. The amount of funding is established each year in an amount which equals or exceeds the minimum required contribution under federal law and is equal to or less than the maximum tax-deductible contribution under federal law and is invested in accordance with the strategy.

C. The fair value of each class of plan assets

(1) Fair Value Measurements of Plan Assets at Reporting Date

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
Corporate Debts, Equities	\$ 405,522			\$ 405,522
Cash	\$ 9,595			\$ 9,595
Insurance Cash Value		\$ 53,102		\$ 53,102
Total Plan Assets	\$ 415,117	\$ 53,102	\$ -	\$ 468,219

(2) The company utilizes year-end bank, mutual fund, and insurance policy statements to measure fair value of plan assets.

## NOTES TO FINANCIAL STATEMENTS

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D. The Plan invests the bulk of its assets in the traditional series of discretionary FundSource portfolios built based on a long-term strategic allocation strategy that is aligned with a 10–15 year investment horizon based on Wells Fargo Investment Institute's Capital Market Assumptions. Portfolios are broadly diversified using world-class mutual funds selected by Global Portfolio Management.

Analysis and monitoring of the mutual funds in which the Association invested the majority of its assets is provided by Wells Fargo Investment Institute. The guidance and research of Wells Fargo Investment Institute is used to select mutual funds to construct the FundSource portfolio models. FundSource leverages investment perspectives of world-class institutional money managers and constructs portfolios to take advantage of opportunities based on insight and extensive research. Since all investments entail risk, each portfolio is designed to line up with particular risk tolerance levels and investment horizons.

E. Defined Contribution Plan

The Association does not have a Defined Contribution Plan.

F. Multiemployer Plans

The Association does not participate in or maintain a Multi-Employer Plan.

G. Consolidated/Holding Company Plans

The Association does not participate in or maintain Consolidated/Holding Company Plans.

H. Postemployment Benefits and Compensated Absences

The Association does not offer other postemployment benefits and compensated absences.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

The Association does not offer Other Postretirement Benefits.

**NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**

Not Applicable

**NOTE 14 Liabilities, Contingencies and Assessments**

Not Applicable

**NOTE 15 Leases**

A. Lessee Operating Lease:

(1) The Company leases office equipment under various noncancelable operating lease agreements that expire through December 2024. Rental expense for 2019, and 2020 was approximately \$8,228, and \$14,674, respectively.

(2) At December 31, 2020, the minimum aggregate rental commitments are as follows:

	Operating Leases
1. 2021	\$ 11,314
2. 2022	\$ 7,544
3. 2023	\$ 6,052
4. 2024	\$ 1,210
5. 2025	\$ -
6. Total	\$ 26,120

(3) The company is not involved in any material sales – leaseback transactions.

B. Lessor Leases

Not Applicable

**NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk**

Not Applicable

**NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**

Not Applicable

**NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans**

Not Applicable

**NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**

Not Applicable

**NOTE 20 Fair Value Measurements**

Not Applicable

**NOTE 21 Other Items**

Not Applicable

**NOTE 22 Events Subsequent**

Not Applicable

## NOTES TO FINANCIAL STATEMENTS

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**NOTE 23 Reinsurance****A. Ceded Reinsurance Report**

## Section 1 – General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes ( ) No (X)

If yes, give full details.

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

Yes ( ) No (X)

If yes, give full details.

## Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes ( ) No (X)

a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate.

\$ \_\_\_\_\_

b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$ \_\_\_\_\_

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes ( ) No (X)

If yes, give full details.

## Section 3 – Ceded Reinsurance Report – Part B

Not applicable.

**B. Uncollectible Reinsurance**

Not Applicable

**C. Commutation of Reinsurance Reflected in Income and Expenses.**

Not Applicable

**D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation**

Not Applicable

**E. Not Applicable****F. Not Applicable****G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/ AXXX Captive Framework**

Not Applicable

**H. Reinsurance Credit**

Not Applicable

**NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination****A. Not Applicable****B. Not Applicable****C. Not Applicable****D. Medical loss ratio rebates required pursuant to the Public Health Service Act.**

Not Applicable

**E. Risk Sharing Provisions of the Affordable Care Act**

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

Yes [ ] No [X]

**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**

Not Applicable

# NOTES TO FINANCIAL STATEMENTS

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**NOTE 26 Intercompany Pooling Arrangements**

Not Applicable

**NOTE 27 Structured Settlements**

Not Applicable

**NOTE 28 Health Care Receivables**

Not Applicable

**NOTE 29 Participating Policies**

- A. 100% of life insurance is participating.
- B. The portfolio average method of accounting for certificate holder dividends is applied, recognizing plan of insurance, amount of insurance, year of issuance, and age at issue.
- C. The Society paid dividends in the amount shown on Exhibit 4 to policy holders.
- D. The Society did not allocate any additional income to its policyholders.

**NOTE 30 Premium Deficiency Reserves**

Not Applicable

**NOTE 31 Reserves for Life Contracts and Annuity Contracts**

## (1) Reserve Practices

The Society authorizes deductions of deferred fractional premium upon death of the insured and returns any portion of the fractional premium beyond the date of death. Surrender values are not promised in excess of regularly computed reserves.

## (2) Valuation of Substantial Policies

Extra premiums are charged for substandard lives for certificates issued, plus the gross premium at a rated age. Regular reserves are computed by the regular reserve for the plan at a rated age and holding in addition one-half of the extra premium charge for one year.

## (3) Amount of Insurance Where Gross Premiums are Less than the Net Premiums

As of the current reporting period, the Society had no insurance-in-force for which the gross premiums are less than the net premium according to the standard valuation set by the State of Ohio.

## (4) Method Used to Determine Tabular Interest, Reserves Released and Cost

The Tabular Interest (Page 7, Line 4) has been determined from basic policy data. The Tabular Less Actual Reserve Released (Page 7, Line 5) has been determined by formula as described in the instructions for Page 7 by formula.

## (5) Method of Determination of Tabular Interest on Funds not Involving Life Contingencies

The Tabular Cost (Page 7, Line 9) has been determined by formula as described in the instructions for Page 7. For the determination of Tabular Interest on funds not involving life contingencies under Page 7, Annuity, Line 3, for each valuation rate of interest, the Tabular Interest is calculated as one-hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and the end of the year of valuation. The total amount of all such products is entered under Page 7, Line 3.

## (6) The details for other changes:

ITEM	Total	Industrial Life	ORDINARY			Credit Life Group and Individual	GROUP	
			Life Insurance	Individual Annuities	Supplementary Contracts		Life Insurance	Annuities
3106999 Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

**NOTE 32 Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics**

## A. INDIVIDUAL ANNUITIES:

	General Account	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
(1) Subject to discretionary withdrawal:					
a. With market value adjustment				\$ -	0.0%
b. At book value less current surrender charge of 5% or more				\$ -	0.0%
c. At fair value				\$ -	0.0%
d. Total with market value adjustment or at fair value (total of a through c)	\$ -	\$ -	\$ -	\$ -	0.0%
e. At book value without adjustment (minimal or no charge or adjustment)	\$ 16,926,590			\$ 16,926,590	92.4%
(2) Not subject to discretionary withdrawal	\$ 1,399,306			\$ 1,399,306	7.6%
(3) Total (gross: direct + assumed)	\$ 18,325,896	\$ -	\$ -	\$ 18,325,896	100.0%
(4) Reinsurance ceded				\$ -	
(5) Total (net)* (3) - (4)	\$ 18,325,896	\$ -	\$ -	\$ 18,325,896	

(6) Amount included in A(1)b above that will move to A(1)e for the first time within the year after the statement date:

\* Reconciliation of total annuity actuarial reserves and deposit fund liabilities.

# NOTES TO FINANCIAL STATEMENTS

## B. GROUP ANNUITIES:

Not Applicable

## C. DEPOSIT-TYPE CONTRACTS (no life contingencies):

	General Account	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
(1) Subject to discretionary withdrawal:					
a. With market value adjustment				\$ -	0.0%
b. At book value less current surrender charge of 5% or more				\$ -	0.0%
c. At fair value				\$ -	0.0%
d. Total with market value adjustment or at fair value (total of a through c)	\$ -	\$ -	\$ -	\$ -	0.0%
e. At book value without adjustment (minimal or no charge or adjustment)				\$ -	0.0%
(2) Not subject to discretionary withdrawal				\$ -	0.0%
(3) Total (gross: direct + assumed)	\$ -	\$ -	\$ -	\$ -	100.0%
(4) Reinsurance ceded				\$ -	
(5) Total (net)* (3) - (4)	\$ -	\$ -	\$ -	\$ -	
(6) Amount included in C(1)b above that will move to C(1)e for the first time within the year after the statement date:				\$ -	
D. Life & Accident & Health Annual Statement:				Amount	
(1) Exhibit 5, Annuities Section, Total (net)				\$ 16,893,241	
(2) Exhibit 5, Supplementary Contracts with Life Contingencies Section, Total (net)				\$ -	
(3) Exhibit 7, Deposit-Type Contracts, Line 14, Column 1				\$ 1,399,306	
(4) Subtotal				\$ 18,292,547	
Separate Accounts Annual Statement:					
(5) Exhibit 3, Line 0299999, Column 2					
(6) Exhibit 3, Line 0399999, Column 2					
(7) Policyholder dividend and coupon accumulations					
(8) Policyholder premiums					
(9) Guaranteed interest contracts					
(10) Other contract deposit funds					
(11) Subtotal				\$ -	
(12) Combined Total				\$ 18,292,547	

## NOTE 33 Analysis of Life Actuarial Reserves by Withdrawal Characteristics

	Account Value	Cash Value	Reserve
A. General Account			
(1) Subject to discretionary withdrawal, surrender values or policy loans:			
a. Term Policies with Cash Value			
b. Universal Life			
c. Universal Life with Secondary Guarantees			
d. Indexed Universal Life			
e. Indexed Universal Life with Secondary Guarantees			
f. Indexed Life			
g. Other Permanent Cash Value Life Insurance			
h. Variable Life			
i. Variable Universal Life			
j. Miscellaneous Reserves			
(2) Not subject to discretionary withdrawal or no cash values:			
a. Term Policies without Cash Value	XXX	XXX	
b. Accidental Death Benefits	XXX	XXX	
c. Disability - Active Lives	XXX	XXX	
d. Disability - Disabled Lives	XXX	XXX	
e. Miscellaneous Reserves	XXX	XXX	
(3) Total (gross: direct + assumed)	\$ -	\$ -	\$ -
(4) Reinsurance ceded			
(5) Total (net) (3) - (4)	\$ -	\$ -	\$ -

	Account Value	Cash Value	Reserve
B. Separate Account with Guarantees			
(1) Subject to discretionary withdrawal, surrender values or policy loans:			
a. Term Policies with Cash Value			
b. Universal Life			
c. Universal Life with Secondary Guarantees			
d. Indexed Universal Life			
e. Indexed Universal Life with Secondary Guarantees			
f. Indexed Life			
g. Other Permanent Cash Value Life Insurance			
h. Variable Life			
i. Variable Universal Life			
j. Miscellaneous Reserves			

## NOTES TO FINANCIAL STATEMENTS

(2) Not subject to discretionary withdrawal or no cash values:

a. Term Policies without Cash Value	XXX	XXX		
b. Accidental Death Benefits	XXX	XXX		
c. Disability - Active Lives	XXX	XXX		
d. Disability - Disabled Lives	XXX	XXX		
e. Miscellaneous Reserves	XXX	XXX		
(3) Total (gross: direct + assumed)	\$ -	\$ -	\$ -	\$ -
(4) Reinsurance ceded				
(5) Total (net) (3) - (4)	\$ -	\$ -	\$ -	\$ -

## C. Separate Account Nonguaranteed

(1) Subject to discretionary withdrawal, surrender values or policy loans:

- a. Term Policies with Cash Value
- b. Universal Life
- c. Universal Life with Secondary Guarantees
- d. Indexed Universal Life
- e. Indexed Universal Life with Secondary Guarantees
- f. Indexed Life
- g. Other Permanent Cash Value Life Insurance
- h. Variable Life
- i. Variable Universal Life
- j. Miscellaneous Reserves

(2) Not subject to discretionary withdrawal or no cash values:

a. Term Policies without Cash Value	XXX	XXX		
b. Accidental Death Benefits	XXX	XXX		
c. Disability - Active Lives	XXX	XXX		
d. Disability - Disabled Lives	XXX	XXX		
e. Miscellaneous Reserves	XXX	XXX		
(3) Total (gross: direct + assumed)	\$ -	\$ -	\$ -	\$ -
(4) Reinsurance ceded				
(5) Total (net) (3) - (4)	\$ -	\$ -	\$ -	\$ -

## D. Life &amp; Accident &amp; Health Annual Statement:

	Amount
(1) Exhibit 5, Life Insurance Section, Total (net)	\$ 12,250,078
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)	\$ -
(3) Exhibit 5, Disability - Active Lives Section, Total (net)	\$ -
(4) Exhibit 5, Disability - Disabled Lives Section, Total (net)	\$ -
(5) Exhibit 5, Miscellaneous reserves Section, Total (net)	\$ -
(6) Subtotal	\$ 12,250,078

## Separate Accounts Statement

(7) Exhibit 3, Line 0199999, Column 2	\$ -
(8) Exhibit 3, Line 0499999, Column 2	\$ -
(9) Exhibit 3, Line 0599999, Column 2	\$ -
(10) Subtotal (Lines 7 through 9))	\$ -
(11) Combined Total (6) and (10))	\$ 12,250,078

**NOTE 34 Premium & Annuity Considerations Deferred and Uncollected**

Not Applicable

**NOTE 35 Separate Accounts**

Not Applicable

**NOTE 36 Loss/Claim Adjustment Expenses**

Not Applicable

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES  
 GENERAL**

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? .....	Yes [ ] No [ X ]						
1.2	If yes, complete Schedule Y, Parts 1, 1A and 2							
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? .....	Yes [ ] No [ ] N/A [ X ]						
1.3	State Regulating? .....	Ohio						
1.4	Is the reporting entity publicly traded or a member of a publicly traded group? .....	Yes [ ] No [ X ]						
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....							
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....	Yes [ ] No [ X ]						
2.2	If yes, date of change: .....							
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made. ....	12/31/2015						
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. ....	12/31/2015						
3.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). ....	08/24/2016						
3.4	By what department or departments? .....							
	Ohio Dept. of Insurance .....							
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? .....	Yes [ X ] No [ ] N/A [ ]						
3.6	Have all of the recommendations within the latest financial examination report been complied with? .....	Yes [ X ] No [ ] N/A [ ]						
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:							
	4.11 sales of new business? .....	Yes [ ] No [ X ]						
	4.12 renewals? .....	Yes [ ] No [ X ]						
4.2	During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:							
	4.21 sales of new business? .....	Yes [ ] No [ X ]						
	4.22 renewals? .....	Yes [ ] No [ X ]						
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....	Yes [ ] No [ X ]						
	If yes, complete and file the merger history data file with the NAIC.							
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.							
<table border="1"> <tr> <td style="text-align: center;">1 Name of Entity</td> <td style="text-align: center;">2 NAIC Company Code</td> <td style="text-align: center;">3 State of Domicile</td> </tr> <tr> <td>.....</td> <td>.....</td> <td>.....</td> </tr> </table>			1 Name of Entity	2 NAIC Company Code	3 State of Domicile	.....	.....	.....
1 Name of Entity	2 NAIC Company Code	3 State of Domicile						
.....	.....	.....						
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? .....	Yes [ ] No [ X ]						
6.2	If yes, give full information: .....							
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? .....	Yes [ ] No [ X ]						
7.2	If yes,							
	7.21 State the percentage of foreign control; .....	%						
	7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).							
<table border="1"> <tr> <td style="text-align: center;">1 Nationality</td> <td style="text-align: center;">2 Type of Entity</td> </tr> <tr> <td>.....</td> <td>.....</td> </tr> </table>			1 Nationality	2 Type of Entity	.....	.....		
1 Nationality	2 Type of Entity							
.....	.....							

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**GENERAL INTERROGATORIES**

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]  
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company: .....  
 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [ X ]  
 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
 James G. Zupka, CPA Inc. 5240 East 98th Street Garfield Heights, Ohio 44125

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [ X ]

10.2 If the response to 10.1 is yes, provide information related to this exemption: .....  
 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [ X ]

10.4 If the response to 10.3 is yes, provide information related to this exemption: .....  
 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [ X ] No [ ] N/A [ ]  
 10.6 If the response to 10.5 is no or n/a, please explain: .....  
 11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
 Vladimir Krepkiy, Actuary, Bruce & Bruce Co. 916 Sherwood Drive Lake Bluff, IL 60044

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [ X ]  
 12.11 Name of real estate holding company .....  
 12.12 Number of parcels involved .....  
 12.13 Total book/adjusted carrying value ..... \$ .....  
 12.2 If, yes provide explanation: .....  
 13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**  
 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity? .....  
 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ X ]  
 13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ X ]  
 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ X ]  
 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [ X ] No [ ]  
 a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
 b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
 c. Compliance with applicable governmental laws, rules and regulations;  
 d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
 e. Accountability for adherence to the code.  
 14.11 If the response to 14.1 is No, please explain: .....  
 14.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [ X ]  
 14.21 If the response to 14.2 is yes, provide information related to amendment(s). .....  
 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]  
 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s). .....

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**GENERAL INTERROGATORIES**

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [ X ]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

**BOARD OF DIRECTORS**

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [ X ] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [ X ] No [ ]

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? ..... Yes [ X ] No [ ]

**FINANCIAL**

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [ X ]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11	To directors or other officers.....	\$ ..... 0
20.12	To stockholders not officers.....	\$ ..... 0
20.13	Trustees, supreme or grand (Fraternal Only).....	\$ ..... 0

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21	To directors or other officers.....	\$ ..... 0
20.22	To stockholders not officers.....	\$ ..... 0
20.23	Trustees, supreme or grand (Fraternal Only).....	\$ ..... 0

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [ X ]

21.2 If yes, state the amount thereof at December 31 of the current year:

21.21	Rented from others.....	\$ ..... 0
21.22	Borrowed from others.....	\$ ..... 0
21.23	Leased from others.....	\$ ..... 0
21.24	Other.....	\$ ..... 0

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ ] No [ X ]

22.2 If answer is yes:

22.21	Amount paid as losses or risk adjustment \$ .....	\$ ..... 0
22.22	Amount paid as expenses.....	\$ ..... 0
22.23	Other amounts paid.....	\$ ..... 0

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [ X ]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ .....

**INVESTMENT**

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)..... Yes [ X ] No [ ]

24.02 If no, give full and complete information relating thereto

.....

24.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

.....

24.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. ..... \$ .....

24.05 For the reporting entity's securities lending program, report amount of collateral for other programs. ..... \$ .....

24.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... Yes [ ] No [ ] N/A [ X ]

24.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... Yes [ ] No [ ] N/A [ X ]

24.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? ..... Yes [ ] No [ ] N/A [ X ]

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**GENERAL INTERROGATORIES**

24.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

24.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ .....
24.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ .....
24.093 Total payable for securities lending reported on the liability page. ....	\$ .....

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). ....  Yes [ X ]  No [ ]

25.2 If yes, state the amount thereof at December 31 of the current year:

25.21 Subject to repurchase agreements .....	\$ .....
25.22 Subject to reverse repurchase agreements .....	\$ .....
25.23 Subject to dollar repurchase agreements .....	\$ .....
25.24 Subject to reverse dollar repurchase agreements .....	\$ .....
25.25 Placed under option agreements .....	\$ .....
25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock .....	\$ .....
25.27 FHLB Capital Stock .....	\$ .....
25.28 On deposit with states .....	\$ .....
25.29 On deposit with other regulatory bodies .....	\$ .....
25.30 Pledged as collateral - excluding collateral pledged to an FHLB .....	\$ .....
25.31 Pledged as collateral to FHLB - including assets backing funding agreements .....	\$ .....
25.32 Other .....	\$ .....

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....	.....	.....

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? ....  Yes [ ]  No [ X ]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ....  Yes [ ]  No [ ]  N/A [ X ]  
If no, attach a description with this statement.

LINES 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? ..  Yes [ ]  No [ X ]

26.4 If the response to 26.3 is YES, does the reporting entity utilize:

26.41 Special accounting provision of SSAP No. 108 .....	Yes [ ] <input type="checkbox"/> No [ X ]
26.42 Permitted accounting practice .....	Yes [ ] <input type="checkbox"/> No [ X ]
26.43 Other accounting guidance .....	Yes [ ] <input type="checkbox"/> No [ X ]

26.5 By responding YES to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: ....  Yes [ ]  No [ X ]

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? ....  Yes [ ]  No [ X ]

27.2 If yes, state the amount thereof at December 31 of the current year. ....  \$ .....

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? ....  Yes [ X ]  No [ ]

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Wells Fargo Safekeeping Services .....	950 Main Street Cleveland, OH 44113 .....
Piper Sandler through Pershing LLC .....	800 Nicollet Mall Suite 900 Minneapolis, MN 55402-7036 .....
FHLB Cincinnati .....	221 East Fourth Street 600 Atrium Two Cincinnati, OH 45202 .....

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**GENERAL INTERROGATORIES**

28.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
.....	.....	.....

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?..... Yes [ ] No [ X ]

28.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....	.....	.....	.....

28.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
Investment management is handled internally by individuals that are employees of the reporting entity. ....	I.....

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [ ] No [ X ]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ ] No [ X ]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
.....	.....	.....	.....	.....

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?..... Yes [ ] No [ X ]

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total	.....	.....

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
.....	.....	.....	.....

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**GENERAL INTERROGATORIES**

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds .....	40,203,117	46,474,665	6,271,548
30.2 Preferred stocks .....	1,324,864	1,397,225	72,361
30.3 Totals .....	41,527,981	47,871,890	6,343,909

30.4 Describe the sources or methods utilized in determining the fair values:

Brokers provide year-end Market Values and Ratings. ....

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? .... Yes [  ] No [  ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? .... Yes [  ] No [  ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

.....

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? .... Yes [  ] No [  ]

32.2 If no, list exceptions:

.....

33. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? ....

Yes [  ] No [  ]

34. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? ....

Yes [  ] No [  ]

35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ....

Yes [  ] No [  ]

36. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 36.a - 36.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? ....

Yes [  ] No [  ] N/A [  ]

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**GENERAL INTERROGATORIES**

**OTHER**

37.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....2,047

37.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
American Fraternal Alliance .....	0
LOMA .....	1,872
Ohio Fraternal Alliance .....	175

38.1 Amount of payments for legal expenses, if any? .....\$ .....3,450

38.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Thomas G. Lobe LPA .....	3,450

39.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? .....\$ .....0

39.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**GENERAL INTERROGATORIES**

**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

**Life, Accident and Health Companies/Fraternal Benefit Societies:**

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [ ] No [ X ]

1.2 If yes, indicate premium earned on U.S. business only ..... \$ .....

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? ..... \$ .....

1.31 Reason for excluding:  
.....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. ..... \$ .....

1.5 Indicate total incurred claims on all Medicare Supplement insurance. ..... \$ .....

1.6 Individual policies:  
Most current three years:  
1.61 Total premium earned ..... \$ .....

1.62 Total incurred claims ..... \$ .....

1.63 Number of covered lives .....

All years prior to most current three years

1.64 Total premium earned ..... \$ .....

1.65 Total incurred claims ..... \$ .....

1.66 Number of covered lives .....

1.7 Group policies:  
Most current three years:  
1.71 Total premium earned ..... \$ .....

1.72 Total incurred claims ..... \$ .....

1.73 Number of covered lives .....

All years prior to most current three years

1.74 Total premium earned ..... \$ .....

1.75 Total incurred claims ..... \$ .....

1.76 Number of covered lives .....

2. Health Test:

	1 Current Year	2 Prior Year
--	-------------------	-----------------

2.1 Premium Numerator .....		
2.2 Premium Denominator .....	1,533,088	1,156,709
2.3 Premium Ratio (2.1/2.2) .....	0.000	0.000
2.4 Reserve Numerator .....	.1,144	1,230
2.5 Reserve Denominator .....	29,313,920	28,499,230
2.6 Reserve Ratio (2.4/2.5) .....	0.000	0.000

3.1 Does this reporting entity have Separate Accounts? ..... Yes [ ] No [ X ]

3.2 If yes, has a Separate Accounts Statement been filed with this Department? ..... Yes [ ] No [ ] N/A [ X ]

3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? ..... \$ .....

3.4 State the authority under which Separate Accounts are maintained:  
.....

3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? ..... Yes [ ] No [ X ]

3.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? ..... Yes [ ] No [ X ]

3.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)"? ..... \$ .....

4. For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:

4.1 Amount of loss reserves established by these annuities during the current year: ..... \$ .....

4.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

1	2 Statement Value on Purchase Date of Annuities (i.e., Present Value)
P&C Insurance Company And Location	

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**GENERAL INTERROGATORIES**

**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

5.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

5.2 If yes, please provide the amount of custodial funds held as of the reporting date. ..... \$ .....

5.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

5.4 If yes, please provide the balance of funds administered as of the reporting date. ..... \$ .....

6.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes [ ] No [ ] N/A [ X ]

6.2 If the answer to 6.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
.....	.....	.....	.....	.....	.....	.....

7. Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

7.1 Direct Premium Written .....	\$ .....
7.2 Total Incurred Claims .....	\$ .....
7.3 Number of Covered Lives .....	.....

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

8. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [ ] No [ X ]

8.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ X ]

**Life, Accident and Health Companies Only:**

9.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)? ..... Yes [ ] No [ X ]

9.2 Net reimbursement of such expenses between reporting entities:

9.21 Paid .....	\$ .....
9.22 Received .....	\$ .....

10.1 Does the reporting entity write any guaranteed interest contracts? ..... Yes [ ] No [ X ]

10.2 If yes, what amount pertaining to these lines is included in:

10.21 Page 3, Line 1 .....	\$ .....
10.22 Page 4, Line 1 .....	\$ .....

11. For stock reporting entities only:

11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: ..... \$ ..... 0

12. Total dividends paid stockholders since organization of the reporting entity:

12.11 Cash .....	\$ .....
12.12 Stock .....	\$ .....

12.11 Cash ..... \$ ..... 0

12.12 Stock ..... \$ ..... 0

13.1 Does the reporting entity reinsurance any Workers' Compensation Carve-Out business defined as: ..... Yes [ ] No [ X ]

Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.

13.2 If yes, has the reporting entity completed the Workers' Compensation Carve-Out Supplement to the Annual Statement? ..... Yes [ ] No [ X ]

13.3 If 13.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
-----------------------------	---------------------------	----------------------

13.31 Earned premium .....	.....
13.32 Paid claims .....	.....
13.33 Claim liability and reserve (beginning of year) .....	.....
13.34 Claim liability and reserve (end of year) .....	.....
13.35 Incurred claims .....	.....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**GENERAL INTERROGATORIES**

**PART 2 - LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

13.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) are:

	Attachment Point	1 Earned Premium	2 Claim Liability and Reserve
13.41	<\$25,000	.....	.....
13.42	\$25,000 - 99,999	.....	.....
13.43	\$100,000 - 249,999	.....	.....
13.44	\$250,000 - 999,999	.....	.....
13.45	\$1,000,000 or more	.....	.....

13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools? ..... \$ ..... 0

**Fraternal Benefit Societies Only:**

14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? ..... Yes [ X ] No [ ]

15. How often are meetings of the subordinate branches required to be held?  
Monthly .....

16. How are the subordinate branches represented in the supreme or governing body?  
Delegates to Quadrennial Convention .....

17. What is the basis of representation in the governing body?  
Quadrennial Convention .....

18.1 How often are regular meetings of the governing body held?  
Every 4 years .....

18.2 When was the last regular meeting of the governing body held? ..... 11/02/2018

18.3 When and where will the next regular or special meeting of the governing body be held?  
Quadrennial Convention .....

18.4 How many members of the governing body attended the last regular meeting? ..... 69

18.5 How many of the same were delegates of the subordinate branches? ..... 59

19. How are the expenses of the governing body defrayed?  
The general expenses of the Quadrennial Convention are accrued through the intervening years and are paid from the Association's General Fund. ....

20. When and by whom are the officers and directors elected?  
Directors are elected by Delegates to the Convention; Officers are hired by the Board of Directors. ....

21. What are the qualifications for membership?  
Good moral character and health; Slovenian extraction or marriage to one of Slovenian extraction; another who subscribes to the Declaration of Principals in the AMLA Mission Statement. ....

22. What are the limiting ages for admission?  
0-95 .....

23. What is the minimum and maximum insurance that may be issued on any one life?  
\$100 is the minimum; \$50,000 is the maximum issued without Reinsurance; thereafter is limited by the availability of reinsurance. ....

24. Is a medical examination required before issuing a benefit certificate to applicants? ..... Yes [ ] No [ X ]

25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? ..... Yes [ ] No [ X ]

26.1 Are notices of the payments required sent to the members? ..... Yes [ ] No [ ] N/A [ X ]

26.2 If yes, do the notices state the purpose for which the money is to be used? ..... Yes [ ] No [ X ]

27. What proportion of first and subsequent year's payments may be used for management expenses?  
27.11 First Year ..... %  
27.12 Subsequent Years ..... %

28.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? ..... Yes [ ] No [ X ]

28.2 If so, what amount and for what purpose? ..... \$ ..... %

29.1 Does the reporting entity pay an old age disability benefit? ..... Yes [ ] No [ X ]

29.2 If yes, at what age does the benefit commence? .....

30.1 Has the constitution or have the laws of the reporting entity been amended during the year? ..... Yes [ ] No [ X ]

30.2 If yes, when?  
.....

31. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time? ..... Yes [ X ] No [ ]

32.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? ..... Yes [ ] No [ X ]

32.2 If so, was an additional reserve included in Exhibit 5? ..... Yes [ ] No [ ] N/A [ X ]

32.3 If yes, explain  
.....

33.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? ..... Yes [ ] No [ X ]

33.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? ..... Yes [ ] No [ ] N/A [ X ]

34. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? ..... Yes [ ] No [ ]

35.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? ..... Yes [ ] No [ X ]

35.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus?  
.....

Date	Outstanding Lien Amount
.....	.....

**FIVE-YEAR HISTORICAL DATA**

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

\$000 omitted for amounts of life insurance

	1 2020	2 2019	3 2018	4 2017	5 2016
<b>Life Insurance in Force</b>					
(Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4) .....	31,667	33,601	33,365	33,247	33,235
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4) .....	1,992				
3. Credit life (Line 21, Col. 6) .....					
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4) .....					
5. Industrial (Line 21, Col. 2) .....					
6. FEGLI/SGLI (Lines 43 & 44, Col. 4) .....					
7. Total (Line 21, Col. 10) .....	33,659	33,601	33,365	33,247	33,235
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated .....					XXX
<b>New Business Issued</b>					
(Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2) .....	429	693	473	714	511
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2) .....	50				
10. Credit life (Line 2, Col. 6) .....					
11. Group (Line 2, Col. 9) .....					
12. Industrial (Line 2, Col. 2) .....					
13. Total (Line 2, Col. 10) .....	479	693	473	714	511
<b>Premium Income - Lines of Business</b>					
(Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2) .....					
15.1 Ordinary-life insurance (Line 20.4, Col. 3) .....	134,462	182,994	115,225	136,026	137,601
15.2 Ordinary-individual annuities (Line 20.4, Col. 4) .....	1,392,149	966,329	605,116	1,069,272	1,044,765
16. Credit life (group and individual) (Line 20.4, Col. 5) .....					
17.1 Group life insurance (Line 20.4, Col. 6) .....					
17.2 Group annuities (Line 20.4, Col. 7) .....					
18.1 A & H-group (Line 20.4, Col. 8) .....					
18.2 A & H-credit (group and individual) (Line 20.4, Col. 9) .....					
18.3 A & H-other (Line 20.4, Col. 10) .....	6,477	7,386	7,989	8,674	9,469
19. Aggregate of all other lines of business (Line 20.4, Col. 11) .....					
20. Total .....	1,533,088	1,156,709	728,330	1,213,972	1,191,835
<b>Balance Sheet (Pages 2 &amp; 3)</b>					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3) .....	44,234,868	43,393,062	42,523,165	41,962,483	41,229,569
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26) .....	31,966,393	31,090,978	30,306,256	30,868,557	29,818,526
23. Aggregate life reserves (Page 3, Line 1) .....	29,143,319	28,343,691	28,071,870	28,600,000	27,702,000
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1 .....					XXX
24. Aggregate A & H reserves (Page 3, Line 2) .....	38,125	40,125	44,000	47,200	52,800
25. Deposit-type contract funds (Page 3, Line 3) .....	1,399,306	1,554,035	1,079,693	1,053,322	970,521
26. Asset valuation reserve (Page 3, Line 24.01) .....	450,732	407,422	317,310	320,621	420,203
27. Capital (Page 3, Lines 29 and 30) .....					
28. Surplus (Page 3, Line 37) .....	12,268,475	12,302,085	12,216,909	11,093,926	11,411,043
<b>Cash Flow (Page 5)</b>					
29. Net Cash from Operations (Line 11) .....	988,466	591,948	626,274	985,891	725,083
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital .....	12,769,207	12,709,507	12,216,909	11,464,547	11,881,246
31. Authorized control level risk - based capital .....	746,581	565,868	482,239	478,301	554,567
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b>					
(Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1) .....	92.3	95.4	96.9	97.1	96.9
33. Stocks (Lines 2.1 and 2.2) .....	3.2	3.0	1.8	1.8	1.5
34. Mortgage loans on real estate (Lines 3.1 and 3.2) .....	0.0	0.0	0.0	0.1	0.1
35. Real estate (Lines 4.1, 4.2 and 4.3) .....	0.4	0.3	0.2	0.3	0.3
36. Cash, cash equivalents and short-term investments (Line 5) .....	3.7	1.0	0.8	0.6	1.0
37. Contract loans (Line 6) .....	0.3	0.3	0.3	0.3	0.3
38. Derivatives (Page 2, Line 7) .....					
39. Other invested assets (Line 8) .....					
40. Receivables for securities (Line 9) .....					
41. Securities lending reinvested collateral assets (Line 10) .....					
42. Aggregate write-ins for invested assets (Line 11) .....					
43. Cash, cash equivalents and invested assets (Line 12) .....	100.0	100.0	100.0	100.0	100.0

**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2020	2 2019	3 2018	4 2017	5 2016
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
44. Affiliated bonds (Schedule D Summary, Line 12, Col. 1) .....					
45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1) .....					
46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1), .....					
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) .....					
48. Affiliated mortgage loans on real estate .....					
49. All other affiliated .....					
50. Total of above Lines 44 to 49 .....					
51. Total Investment in Parent included in Lines 44 to 49 above .....					
<b>Total Nonadmitted and Admitted Assets</b>					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2) .....	194,536	183,663	142,550	63,187	66,531
53. Total admitted assets (Page 2, Line 28, Col. 3) .....	44,234,868	43,393,062	42,523,165	41,962,483	41,229,569
<b>Investment Data</b>					
54. Net investment income (Exhibit of Net Investment Income) .....	2,316,357	2,441,505	2,238,182	1,999,261	2,110,552
55. Realized capital gains (losses) (Page 4, Line 34, Column 1) .....				(300,000)	(192,750)
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1) .....	(114,322)	(86,250)			
57. Total of above Lines 54, 55 and 56 .....	2,202,035	2,355,255	2,238,182	1,699,261	1,917,802
<b>Benefits and Reserve Increases (Page 6)</b>					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 and 8) .....	1,801,030	1,905,661	1,327,762	1,273,439	1,501,340
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6) .....	1,804	3,535	3,646	5,231	5,577
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2) .....	335,457	386,765	(842,646)	24,789	75,888
61. Increase in A & H reserves (Line 19, Col. 6) .....	(2,000)	1,469	(3,200)	(5,600)	(5,000)
62. Dividends to policyholders and refunds to members (Line 30, Col. 1) .....	92,701	91,177	90,635	94,750	94,850
<b>Operating Percentages</b>					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23, less Line 6)/(Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.0 .....	65.6	90.3	139.2	89.0	84.1
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0 .....	0.9	0.4	0.8	1.3	0.6
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2) .....	(3.8)	(31.5)	20.6	(1.9)	49.0
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2) .....					43.0
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2) .....					
<b>A &amp; H Claim Reserve Adequacy</b>					
68. Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2) .....					
69. Prior years' claim liability and reserve - group health (Schedule H, Part 3, Line 3.2 Col. 2) .....					
70. Incurred losses on prior years' claims-health other than group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2) .....					
71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2) .....					
<b>Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33)</b>					
72. Industrial life (Page 6.1, Col. 2) .....					
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12) .....	13,968	5,646	930,733	259,557	509,799
74. Ordinary - individual annuities (Page 6, Col. 4) .....	265,394	494,642	467,881	(96,945)	(231,714)
75. Ordinary-supplementary contracts .....	XXX	XXX			
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7) .....					
77. Group life (Page 6.2, Col. 1 Less Cols. 7 and 9) .....					
78. Group annuities (Page 6, Col. 5) .....					
79. A & H-group (Page 6.5, Col. 3) .....					
80. A & H-credit (Page 6.5, Col. 10) .....					
81. A & H-other (Page 6.5, Col. 1 less Cols. 3 and 10) .....	6,649	2,382	7,543	9,043	4,774
82. Aggregate of all other lines of business (Page 6, Col. 8) .....					
83. Fraternal (Page 6, Col. 7) .....	(166,750)	(208,850)	(206,670)	(270,858)	(184,635)
84. Total (Page 6, Col. 1) .....	119,260	293,820	1,199,487	(99,203)	98,224

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: .....

## ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association

## EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group		10 Total Amount of Insurance	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	Number of			
							7 Policies	8 Certificates		
1. In force end of prior year .....			19,762	.33,601					.33,601	
2. Issued during year .....			64	.479					.479	
3. Reinsurance assumed .....										
4. Revived during year .....										
5. Increased during year (net) .....			64	.479						
6. Subtotals, Lines 2 to 5 .....									.479	
7. Additions by dividends during year .....	XXX		XXX	.135	XXX		XXX	XXX	.135	
8. Aggregate write-ins for increases .....										
9. Totals (Lines 1 and 6 to 8) .....			19,826	.34,215					.34,215	
Deductions during year:										
10. Death .....			311	.248			XXX		.248	
11. Maturity .....			.18	.10			XXX		.10	
12. Disability .....							XXX			
13. Expiry .....			5	.6					.6	
14. Surrender .....			.50	.45					.45	
15. Lapse .....			.41	.247			XXX	XXX	.247	
16. Conversion .....										
17. Decreased (net) .....										
18. Reinsurance .....										
19. Aggregate write-ins for decreases .....										
20. Totals (Lines 10 to 19) .....			425	.556					.556	
21. In force end of year (b) (Line 9 minus Line 20) .....			19,401	.33,659					.33,659	
22. Reinsurance ceded end of year .....	XXX		XXX	.4,179	XXX		XXX	XXX	.4,179	
23. Line 21 minus Line 22 .....	XXX		XXX	.29,480	XXX	(a)	XXX	XXX	.29,480	
<b>DETAILS OF WRITE-INS</b>										
0801. ....										
0802. ....										
0803. ....										
0898. Summary of remaining write-ins for Line 8 from overflow page .....										
0899. TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above) .....										
1901. ....										
1902. ....										
1903. ....										
1998. Summary of remaining write-ins for Line 19 from overflow page .....										
1999. TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above) .....										

Life, Accident and Health Companies Only:

(a) Group \$ ..... ; Individual \$ .....

Fraternal Benefit Societies Only:

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates ..... 0 , Amount \$ ..... 3,162

Additional accidental death benefits included in life certificates were in amount \$ ..... 0 , Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [ ] No [ X ]

If not, how are such expenses met?

From operational gains .....

**EXHIBIT OF LIFE INSURANCE**

(\$000 Omitted for Amounts of Life Insurance) (Continued)

**ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR**

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends .....	XXX		XXX	3,162
25. Other paid-up insurance .....			19,173	28,103
26. Debit ordinary insurance .....	XXX	XXX		

**ADDITIONAL INFORMATION ON ORDINARY INSURANCE**

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
27. Term policies - decreasing .....				
28. Term policies - other .....	1	.50	154	1,992
29. Other term insurance - decreasing .....	XXX		XXX	
30. Other term insurance .....	XXX		XXX	
31. Totals (Lines 27 to 30) .....	1	.50	154	1,992
Reconciliation to Lines 2 and 21:				
32. Term additions .....	XXX		XXX	
33. Totals, extended term insurance .....	XXX	XXX		
34. Totals, whole life and endowment .....	63	429	19,247	31,667
35. Totals (Lines 31 to 34) .....	64	479	19,401	33,659

**CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS**

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial .....				
37. Ordinary .....		479		33,659
38. Credit Life (Group and Individual) .....				
39. Group .....				
40. Totals (Lines 36 to 39) .....		479		33,659

**ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE**

	Credit Life		Group	
	1 Number of Individual Policies	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
41. Amount of insurance included in Line 2 ceded to other companies .....	XXX		XXX	
42. Number in force end of year if the number under ceded group is omitted on a pro-rata basis .....				XXX
43. Federal Employees' Group Life Insurance included in Line 21 .....				
44. Servicemen's Group Life Insurance included in Line 21 .....				
45. Group Permanent Insurance included in Line 21 .....				

**ADDITIONAL ACCIDENTAL DEATH BENEFITS**

46. Amount of additional accidental death benefits in force end of year under ordinary policies	3,409
---	-------

**BASIS OF CALCULATION OF ORDINARY TERM INSURANCE**

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Income, Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Children, etc., policies and riders included above.
47.1 Not Applicable .....
47.2 Not Applicable .....

**POLICIES WITH DISABILITY PROVISIONS**

Disability Provisions	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium .....		1,263		2,443				
49. Disability Income .....		XXX		XXX				
50. Extended Benefits .....								
51. Other .....								
52. Total .....	(a)	1,263	(a)	2,443	(a)		(a)	

(a) See the Annual Audited Financial Reports section of the annual statement instructions

**EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES**

SUPPLEMENTARY CONTRACTS

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year .....		17		
2. Issued during year .....		8		
3. Reinsurance assumed .....				
4. Increased during year (net) .....				
5. Total (Lines 1 to 4) .....		25		
Deductions during year:				
6. Decreased (net) .....		2		
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....		2		
9. In force end of year (line 5 minus line 8) .....		23		
10. Amount on deposit .....	(a) .....	475,208		(a) .....
11. Income now payable .....		23		
12. Amount of income payable .....	(a)	280,123	(a)	(a)

ANNUITIES

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year .....		476		
2. Issued during year .....		29		
3. Reinsurance assumed .....				
4. Increased during year (net) .....				
5. Totals (Lines 1 to 4) .....		505		
Deductions during year:				
6. Decreased (net) .....		18		
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....		18		
9. In force end of year (line 5 minus line 8) .....		487		
Income now payable:				
10. Amount of income payable .....	(a)	XXX	XXX	(a)
Deferred fully paid:				
11. Account balance .....	XXX	(a) 16,926,590	XXX	(a)
Deferred not fully paid:				
12. Account balance .....	XXX	(a)	XXX	(a)

ACCIDENT AND HEALTH INSURANCE

	Group		Credit		Other	
	1 Certificates	2 Premiums in Force	3 Policies	4 Premiums in Force	5 Policies	6 Premiums in Force
1. In force end of prior year .....					321	6,610
2. Issued during year .....						
3. Reinsurance assumed .....						
4. Increased during year (net) .....	XXX		XXX			XXX
5. Totals (Lines 1 to 4) .....	XXX		XXX		321	XXX
Deductions during year:						
6. Conversions .....	XXX	XXX	XXX	XXX	XXX	XXX
7. Decreased (net) .....	XXX		XXX		16	XXX
8. Reinsurance ceded .....	XXX		XXX			XXX
9. Totals (Lines 6 to 8) .....	XXX		XXX		16	XXX
10. In force end of year (line 5 minus line 9) .....	(a)		(a)		305 (a)	6,642

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

				1 Deposit Funds	2 Dividend Accumulations
				Contracts	Contracts
1. In force end of prior year .....				63	2,359
2. Issued during year .....					49
3. Reinsurance assumed .....					
4. Increased during year (net) .....					
5. Totals (Lines 1 to 4) .....				63	2,408
Deductions During Year:					
6. Decreased (net) .....				2	23
7. Reinsurance ceded .....					
8. Totals (Lines 6 and 7) .....				2	23
9. In force end of year (line 5 minus line 8) .....				61	2,385
10. Amount of account balance .....				(a) 267,223	(a) 656,875

(a) See the Annual Audited Financial Reports section of the annual statement instructions.

**ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association**  
**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS <sup>(b)</sup>**

Allocated by States and Territories

States, Etc.	Active Status (a)	Life Contracts			Direct Business Only		Total Columns 2 through 5 (b)	Deposit-Type Contracts
		2		3	4	5		
		Life Insurance Premiums	Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations			
1. Alabama	AL	N						
2. Alaska	AK	N						
3. Arizona	AZ	N						
4. Arkansas	AR	N						
5. California	CA	N						
6. Colorado	CO	N						
7. Connecticut	CT	N						
8. Delaware	DE	N						
9. District of Columbia	DC	N						
10. Florida	FL	N						
11. Georgia	GA	N						
12. Hawaii	HI	N						
13. Idaho	ID	N						
14. Illinois	IL	N						
15. Indiana	IN	N						
16. Iowa	IA	N						
17. Kansas	KS	N						
18. Kentucky	KY	N						
19. Louisiana	LA	N						
20. Maine	ME	N						
21. Maryland	MD	N						
22. Massachusetts	MA	N						
23. Michigan	MI	N						
24. Minnesota	MN	N						
25. Mississippi	MS	N						
26. Missouri	MO	N						
27. Montana	MT	N						
28. Nebraska	NE	N						
29. Nevada	NV	N						
30. New Hampshire	NH	N						
31. New Jersey	NJ	N						
32. New Mexico	NM	N						
33. New York	NY	N						
34. North Carolina	NC	N						
35. North Dakota	ND	N						
36. Ohio	OH	L	76,307	1,392,149	6,477		1,474,933	180,339
37. Oklahoma	OK	N						
38. Oregon	OR	N						
39. Pennsylvania	PA	N						
40. Rhode Island	RI	N						
41. South Carolina	SC	N						
42. South Dakota	SD	N						
43. Tennessee	TN	N						
44. Texas	TX	N						
45. Utah	UT	N						
46. Vermont	VT	N						
47. Virginia	VA	N						
48. Washington	WA	N						
49. West Virginia	WV	N						
50. Wisconsin	WI	N						
51. Wyoming	WY	N						
52. American Samoa	AS	N						
53. Guam	GU	N						
54. Puerto Rico	PR	N						
55. U.S. Virgin Islands	VI	N						
56. Northern Mariana Islands	MP	N						
57. Canada	CAN	N						
58. Aggregate Other Alien	OT	XXX						
59. Subtotal		XXX	76,307	1,392,149	6,477		1,474,933	180,339
90. Reporting entity contributions for employee benefits plans		XXX						
91. Dividends or refunds applied to purchase paid-up additions and annuities		XXX	61,298				61,298	
92. Dividends or refunds applied to shorten endowment or premium paying period		XXX						
93. Premium or annuity considerations waived under disability or other contract provisions		XXX						
94. Aggregate or other amounts not allocable by State		XXX						
95. Totals (Direct Business)		XXX	137,605	1,392,149	6,477		1,536,231	180,339
96. Plus reinsurance assumed		XXX						
97. Totals (All Business)		XXX	137,605	1,392,149	6,477		1,536,231	180,339
98. Less reinsurance ceded		XXX	3,143				3,143	
99. Totals (All Business) less Reinsurance Ceded		XXX	134,462	1,392,149	(c)	6,477	1,533,088	180,339
<b>DETAILS OF WRITE-INS</b>								
58001.		XXX						
58002.		XXX						
58003.		XXX						
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX						
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX						
9401.		XXX						
9402.		XXX						
9403.		XXX						
9498.	Summary of remaining write-ins for Line 94 from overflow page	XXX						
9499.	Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)	XXX						

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1 R - Registered - Non-domiciled RRGs.....

E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... Q - Qualified - Qualified or accredited reinsurer.....

N - None of the above - Not allowed to write business in the state..... 56

(b) Explanation of basis of allocation by states, etc., of premiums and annuity considerations

Ohio - 100%

(c) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4, and 16.4, Cols. 8, 9, 10, or with Schedule H, Part 1, Line 1, indicate which: Exhibit 1, Lines 6.4, 10.4, and 16.4, Cols. 8, 9, 10..

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

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ANNUAL STATEMENT FOR THE YEAR 2020 OF THE American Mutual Life Association  
**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Exhibit 2 Line 9.3

	Insurance				5 Investment	6 Fraternal	7 Total			
	1 Life	Accident and Health		4 All Other Lines of Business						
		2 Cost Containment	3 All Other							
09.304. Fraternal Events .....						26,947	26,947			
09.305. Consulting Services .....	970						970			
09.306. Data Processing .....	14,265						14,265			
09.397. Summary of remaining write-ins for Line 9.3 from overflow page	15,235					26,947	42,182			