



ANNUAL STATEMENT  
FOR THE YEAR ENDED DECEMBER 31, 2023  
OF THE CONDITION AND AFFAIRS OF THE  
AMERICAN MUTUAL LIFE ASSOCIATION

NAIC Group Code	NAIC Company Code	56286	Employer's ID Number	34-6577472
(Current) (Prior)				
Organized under the Laws of	OH	State of Domicile or Port of Entry	OH	
Country of Domicile	US			
Licensed as business type:	Fraternal Benefit Societies			
Incorporated/Organized	03/13/1914	Commenced Business	11/13/1910	
Statutory Home Office	19424 SOUTH WATERLOO ROAD	CLEVELAND, OH, US 44119		
Main Administrative Office	19424 SOUTH WATERLOO ROAD	CLEVELAND, OH, US 44119	216-531-1900	
			(Telephone)	
Mail Address	19424 SOUTH WATERLOO ROAD	CLEVELAND, OH, US 44119		
Primary Location of Books and Records	19424 SOUTH WATERLOO ROAD	CLEVELAND, OH, US 44119	216-531-1900	
			(Telephone)	
Internet Website Address	WWW.AMERICANMUTUAL.ORG			
Statutory Statement Contact	ANDREW HANIGOSKY	216-531-1900		
		(Telephone)		
	A.HANIGOSKY@AMERICANMUTUAL.ORG			
	(E-Mail)	(Fax)		

OFFICERS

TIMOTHY J PERCIC, PRESIDENT  
ANDREW HANIGOSKY, CFO

DIRECTORS OR TRUSTEES

JOSEPH ZAB	JAMES CZECK
RONALD ZAB	KENNETH SHINE
ALYCE KANE	JAIME LONCAR
JAMES MANNION	CHARLES KOHLI
JACOB YOUNG	CADE JERIC
KAITLIN GINTER	CHARLES KRZIC

State of  
County of SS

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/CEO	Andrew Hanigovsky CFO

Subscribed and sworn to before me  
this 1 day of March, 2024

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

KELLY D. DRAKE  
Notary Public, State of Ohio  
Commission No. 2015-RE-552764  
My Commission Expires  
November 29, 2025

DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2023



LIFE INSURANCE (STATE PAGE)<sup>(b)</sup>

NAIC Group Code: 0000

NAIC Company Code: 56286

Line of Business	1  Premiums and Annuities Considerations	2  Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3  Paid in Cash or Left on Deposit	4  Applied to Pay Renewal Premiums	5  Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6  Other	7  Total (Col. 3+4+5+6)	8  Death and Annuity Benefits	9  Matured Endowments	10  Surrender Values and Withdrawals for Life Contracts	11  All Other Benefits	12  Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial .....												
2. Whole .....	78,774		32,352	3,163	63,132		98,647	209,871	11,059	74,402		295,332
3. Term .....	620			47			47			2,881		2,881
4. Indexed .....												
5. Universal .....												
6. Universal with secondary guarantees .....												
7. Variable .....												
8. Variable universal .....												
9. Credit .....												
10. Other (f) .....												
11. Total Individual Life .....	79,394		32,352	3,210	63,132		98,694	209,871	11,059	77,283		298,213
Group Life												
12. Whole .....												
13. Term .....												
14. Universal .....												
15. Variable .....												
16. Variable universal .....												
17. Credit .....												
18. Other (f) .....												
19. Total Group Life .....												
Individual Annuities												
20. Fixed .....	777,942							1,784,216				1,784,216
21. Indexed .....												
22. Variable with guarantees .....												
23. Variable without guarantees .....												
24. Life contingent payout .....												
25. Other (f) .....												
26. Total Individual Annuities .....	777,942							1,784,216				1,784,216
Group Annuities												
27. Fixed .....												
28. Indexed .....												
29. Variable with guarantees .....												
30. Variable without guarantees .....												
31. Life contingent payout .....												
32. Other (f) .....												
33. Total Group Annuities .....												
Accident and Health												
34. Comprehensive individual (d) .....	4,671							XXX	XXX	XXX		
35. Comprehensive group (d) .....								XXX	XXX	XXX		
36. Medicare Supplement (d) .....								XXX	XXX	XXX		
37. Vision only (d) .....								XXX	XXX	XXX		
38. Dental only (d) .....								XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan (d) .....								XXX	XXX	XXX		
40. Title XVIII Medicare (d) .....	(e)							XXX	XXX	XXX		
41. Title XIX Medicaid (d) .....								XXX	XXX	XXX		
42. Credit A&H .....								XXX	XXX	XXX		
43. Disability income (d) .....								XXX	XXX	XXX		
44. Long-term care (d) .....								XXX	XXX	XXX		
45. Other health (d) .....								XXX	XXX	XXX		
46. Total Accident and Health .....	4,671							XXX	XXX	XXX		
47. Total .....	862,007 (c)		32,352	3,210	63,132		98,694	1,994,087	11,059	77,283		2,082,429

LIFE INSURANCE (STATE PAGE) (CONTINUED)<sup>(b)</sup>

Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit						
		13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
			14	15	16	17	18	19	20	21							
Incurred During Current Year		Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	Unpaid December 31, Current Year	Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	
Individual Life																	
1.	Industrial																
2.	Whole	303,000	355	322,000				355	322,000	99,000	58	378,600	(391)	(137,000)	18,130	32,198,000	
3.	Term	100,000	1	100,000				1	100,000	—	3	45,000	(17)	(225,000)	96	1,592,000	
4.	Indexed																
5.	Universal																
6.	Universal with secondary guarantees																
7.	Variable																
8.	Variable universal																
9.	Credit																
10.	Other (f)																
11.	Total Individual Life	403,000	356	422,000				356	422,000	99,000	61	423,600	(408)	(362,000)	18,226	33,790,000	
Group Life																	
12.	Whole																
13.	Term																
14.	Universal																
15.	Variable																
16.	Variable universal																
17.	Credit															(a)	
18.	Other (f)																
19.	Total Group Life																
Individual Annuities																	
20.	Fixed	1,784,216	26	1,784,216				26	1,784,216	—	20	375,678			495	20,696,834	
21.	Indexed																
22.	Variable with guarantees																
23.	Variable without guarantees																
24.	Life contingent payout																
25.	Other (f)																
26.	Total Individual Annuities	1,784,216	26	1,784,216				26	1,784,216	—	20	375,678			495	20,696,834	
Group Annuities																	
27.	Fixed																
28.	Indexed																
29.	Variable with guarantees																
30.	Variable without guarantees																
31.	Life contingent payout																
32.	Other (f)																
33.	Total Group Annuities																
Accident and Health																	
34.	Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(22)	(552)	232	4,974	
35.	Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36.	Medicare Supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37.	Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38.	Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39.	Federal Employees Health Benefits Plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40.	Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41.	Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42.	Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43.	Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44.	Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45.	Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46.	Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(22)	(552)	232	4,974	
47.	Total	2,187,216	382	2,206,216					382	2,206,216	99,000	81	799,278	(430)	(362,552)	18,953	54,491,808

(a) Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$ , current year \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount: \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$430,540 Group: \$ Total: \$430,540

(d) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life – Other includes the following amounts related to Separate Account policies: Column 1) \$ Column 7) \$ Column 12) \$

2. Group Life – Other includes the following amounts related to Separate Account policies: Column 1) \$ Column 7) \$ Column 12) \$

3. Individual Annuities – Other includes the following amounts related to Separate Account policies: Column 1) \$ Column 7) \$ Column 12) \$

4. Group Annuities – Other includes the following amounts related to Separate Account policies: Column 1) \$ Column 7) \$ Column 12) \$

GRAND TOTAL DURING THE YEAR 2023



LIFE INSURANCE (STATE PAGE)<sup>(b)</sup>

NAIC Group Code: 0000

NAIC Company Code: 56286

Line of Business	1  Premiums and Annuities Considerations	2  Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3  Paid in Cash or Left on Deposit	4  Applied to Pay Renewal Premiums	5  Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6  Other	7  Total (Col. 3+4+5+6)	8  Death and Annuity Benefits	9  Matured Endowments	10  Surrender Values and Withdrawals for Life Contracts	11  All Other Benefits	12  Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial .....												
2. Whole .....	78,774		32,352	3,163	63,132		98,647	209,871	11,059	74,402		295,332
3. Term .....	620			47			47			2,881		2,881
4. Indexed .....												
5. Universal .....												
6. Universal with secondary guarantees .....												
7. Variable .....												
8. Variable universal .....												
9. Credit .....												
10. Other (f) .....												
11. Total Individual Life .....	79,394		32,352	3,210	63,132		98,694	209,871	11,059	77,283		298,213
Group Life												
12. Whole .....												
13. Term .....												
14. Universal .....												
15. Variable .....												
16. Variable universal .....												
17. Credit .....												
18. Other (f) .....												
19. Total Group Life .....												
Individual Annuities												
20. Fixed .....	777,942							1,784,216				1,784,216
21. Indexed .....												
22. Variable with guarantees .....												
23. Variable without guarantees .....												
24. Life contingent payout .....												
25. Other (f) .....												
26. Total Individual Annuities .....	777,942							1,784,216				1,784,216
Group Annuities												
27. Fixed .....												
28. Indexed .....												
29. Variable with guarantees .....												
30. Variable without guarantees .....												
31. Life contingent payout .....												
32. Other (f) .....												
33. Total Group Annuities .....												
Accident and Health												
34. Comprehensive individual (d) .....	4,671							XXX	XXX	XXX		
35. Comprehensive group (d) .....								XXX	XXX	XXX		
36. Medicare Supplement (d) .....								XXX	XXX	XXX		
37. Vision only (d) .....								XXX	XXX	XXX		
38. Dental only (d) .....								XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan (d) .....								XXX	XXX	XXX		
40. Title XVIII Medicare (d) .....	(e)							XXX	XXX	XXX		
41. Title XIX Medicaid (d) .....								XXX	XXX	XXX		
42. Credit A&H .....								XXX	XXX	XXX		
43. Disability income (d) .....								XXX	XXX	XXX		
44. Long-term care (d) .....								XXX	XXX	XXX		
45. Other health (d) .....								XXX	XXX	XXX		
46. Total Accident and Health .....	4,671							XXX	XXX	XXX		
47. Total .....	862,007 (c)		32,352	3,210	63,132		98,694	1,994,087	11,059	77,283		2,082,429

24.GT

LIFE INSURANCE (STATE PAGE) (CONTINUED)<sup>(b)</sup>

Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits									Policy Exhibit						
		13	Claims Settled During Current Year								22	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
			14	15	16	17	18	19	20	21							
Incurred During Current Year		Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	Unpaid December 31, Current Year	Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	Number of Pols/Certs	Amount	
Individual Life																	
1.	Industrial																
2.	Whole	303,000	355	322,000				355	322,000	99,000	58	378,600	(391)	(137,000)	18,130	32,198,000	
3.	Term	100,000	1	100,000				1	100,000	—	3	45,000	(17)	(225,000)	96	1,592,000	
4.	Indexed																
5.	Universal																
6.	Universal with secondary guarantees																
7.	Variable																
8.	Variable universal																
9.	Credit																
10.	Other (f)																
11.	Total Individual Life	403,000	356	422,000				356	422,000	99,000	61	423,600	(408)	(362,000)	18,226	33,790,000	
Group Life																	
12.	Whole																
13.	Term																
14.	Universal																
15.	Variable																
16.	Variable universal																
17.	Credit															(a)	
18.	Other (f)																
19.	Total Group Life																
Individual Annuities																	
20.	Fixed	1,784,216	26	1,784,216				26	1,784,216	—	20	375,678			495	20,696,834	
21.	Indexed																
22.	Variable with guarantees																
23.	Variable without guarantees																
24.	Life contingent payout																
25.	Other (f)																
26.	Total Individual Annuities	1,784,216	26	1,784,216				26	1,784,216	—	20	375,678			495	20,696,834	
Group Annuities																	
27.	Fixed																
28.	Indexed																
29.	Variable with guarantees																
30.	Variable without guarantees																
31.	Life contingent payout																
32.	Other (f)																
33.	Total Group Annuities																
Accident and Health																	
34.	Comprehensive individual (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(22)	(552)	232	4,974	
35.	Comprehensive group (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36.	Medicare Supplement (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37.	Vision only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38.	Dental only (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39.	Federal Employees Health Benefits Plan (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40.	Title XVIII Medicare (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41.	Title XIX Medicaid (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42.	Credit A&H	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43.	Disability income (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44.	Long-term care (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45.	Other health (d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46.	Total Accident and Health	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			(22)	(552)	232	4,974	
47.	Total	2,187,216	382	2,206,216					382	2,206,216	99,000	81	799,278	(430)	(362,552)	18,953	54,491,808

(a) Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$ , current year \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount: \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$430,540 Group: \$ Total: \$430,540

(d) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life – Other includes the following amounts related to Separate Account policies: Column 1) \$ Column 7) \$ Column 12) \$

2. Group Life – Other includes the following amounts related to Separate Account policies: Column 1) \$ Column 7) \$ Column 12) \$

3. Individual Annuities – Other includes the following amounts related to Separate Account policies: Column 1) \$ Column 7) \$ Column 12) \$

4. Group Annuities – Other includes the following amounts related to Separate Account policies: Column 1) \$ Column 7) \$ Column 12) \$

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

		1
		Amount
1.	Reserve as of December 31, prior year.....	259,189
2.	Current year's realized pre-tax capital gains/(losses) of \$      transferred into the reserve net of taxes of \$      .....	
3.	Adjustment for current year's liability gains/(losses) released from the reserve.....	
4.	Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	259,189
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	33,816
6.	Reserve as of December 31, current year (Line 4 minus Line 5).....	225,373

AMORTIZATION

		1	2	3	4
		Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/ (Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1+2+3)
Year of Amortization					
1.	2023.....	33,816			33,816
2.	2024.....	23,156			23,156
3.	2025.....	17,017			17,017
4.	2026.....	10,506			10,506
5.	2027.....	5,049			5,049
6.	2028.....	1,951			1,951
7.	2029.....	1,853			1,853
8.	2030.....	4,037			4,037
9.	2031.....	7,767			7,767
10.	2032.....	11,649			11,649
11.	2033.....	15,086			15,086
12.	2034.....	17,093			17,093
13.	2035.....	16,731			16,731
14.	2036.....	16,092			16,092
15.	2037.....	15,441			15,441
16.	2038.....	14,102			14,102
17.	2039.....	13,110			13,110
18.	2040.....	11,873			11,873
19.	2041.....	9,871			9,871
20.	2042.....	6,683			6,683
21.	2043.....	4,261			4,261
22.	2044.....	2,235			2,235
23.	2045.....	383			383
24.	2046.....	(314)			(314)
25.	2047.....	(259)			(259)
26.	2048.....				
27.	2049.....				
28.	2050.....				
29.	2051.....				
30.	2052.....				
31.	2053 and Later.....				
32.	Total (Lines 1 to 31).....	259,189			259,189

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1	2	3	4	5	6	
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Real Estate and Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year.....	463,820		463,820	313,184	13,932	327,117	790,937
2. Realized capital gains/(losses) net of taxes-General Account.....				(296,019)		(296,019)	(296,019)
3. Realized capital gains/(losses) net of taxes-Separate Accounts.....							
4. Unrealized capital gains/(losses) net of deferred taxes-General Account.....	27,770		27,770	391,981		391,981	419,751
5. Unrealized capital gains/(losses) net of deferred taxes-Separate Accounts.....							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....							
7. Basic contribution.....	111,249		111,249	—	—	—	111,249
8. Accumulated balances (Lines 1 through 5 - 6 + 7).....	602,839		602,839	409,146	13,932	423,078	1,025,917
9. Maximum reserve.....	515,455		515,455	125,768	13,052	138,820	654,275
10. Reserve objective.....	318,223		318,223	125,515	13,052	138,567	456,790
11. 20% of (Line 10 - Line 8).....	(56,923)		(56,923)	(56,726)	(176)	(56,902)	(113,825)
12. Balance before transfers (Lines 8 + 11).....	545,916		545,916	352,420	13,756	366,176	912,092
13. Transfers.....							
14. Voluntary contribution.....							
15. Adjustment down to maximum/up to zero.....	(30,461)		(30,461)	(226,652)	(704)	(227,356)	(257,817)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	515,455		515,455	125,768	13,052	138,820	654,275

ASSET VALUATION RESERVE

BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS

DEFAULT COMPONENT

Line Number	NAIC Designation	Description	1 Book / Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1+2+3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4x5)	7 Factor	8 Amount (Cols. 4x7)	9 Factor	10 Amount (Cols. 4x9)
1		LONG-TERM BONDS Exempt Obligations .....	9,576,856	XXX	XXX	9,576,856	—	—	—	—	—	—
2.1	1	NAIC Designation Category 1.A .....	2,841,786	XXX	XXX	2,841,786	0.0002	568	0.0007	1,989	0.0013	3,694
2.2	1	NAIC Designation Category 1.B .....	418,399	XXX	XXX	418,399	0.0004	167	0.0011	460	0.0023	962
2.3	1	NAIC Designation Category 1.C .....		XXX	XXX		0.0006		0.0018		0.0035	
2.4	1	NAIC Designation Category 1.D .....	1,125,700	XXX	XXX	1,125,700	0.0007	788	0.0022	2,477	0.0044	4,953
2.5	1	NAIC Designation Category 1.E .....	799,980	XXX	XXX	799,980	0.0009	720	0.0027	2,160	0.0055	4,400
2.6	1	NAIC Designation Category 1.F .....	1,966,362	XXX	XXX	1,966,362	0.0011	2,163	0.0034	6,686	0.0068	13,371
2.7	1	NAIC Designation Category 1.G .....	2,547,148	XXX	XXX	2,547,148	0.0014	3,566	0.0042	10,698	0.0085	21,651
2.8		Subtotal NAIC 1 (2.1 + 2.2 + 2.3 + 2.4 + 2.5 + 2.6 + 2.7) .....	9,699,376	XXX	XXX	9,699,376	XXX	7,973	XXX	24,470	XXX	49,032
3.1	2	NAIC Designation Category 2.A .....	2,947,455	XXX	XXX	2,947,455	0.0021	6,190	0.0063	18,569	0.0105	30,948
3.2	2	NAIC Designation Category 2.B .....	11,207,434	XXX	XXX	11,207,434	0.0025	28,019	0.0076	85,176	0.0127	142,334
3.3	2	NAIC Designation Category 2.C .....	8,158,582	XXX	XXX	8,158,582	0.0036	29,371	0.0108	88,113	0.0180	146,854
3.4	2	Subtotal NAIC 2 (3.1 + 3.2 + 3.3) .....	22,313,470	XXX	XXX	22,313,470	XXX	63,579	XXX	191,858	XXX	320,137
4.1	3	NAIC Designation Category 3.A .....	1,350,508	XXX	XXX	1,350,508	0.0069	9,319	0.0183	24,714	0.0262	35,383
4.2	3	NAIC Designation Category 3.B .....	1,444,723	XXX	XXX	1,444,723	0.0099	14,303	0.0264	38,141	0.0377	54,466
4.3	3	NAIC Designation Category 3.C .....		XXX	XXX		0.0131		0.0350		0.0500	
4.4		Subtotal NAIC 3 (4.1 + 4.2 + 4.3) .....	2,795,231	XXX	XXX	2,795,231	XXX	23,621	XXX	62,855	XXX	89,849
5.1	4	NAIC Designation Category 4.A .....		XXX	XXX		0.0184		0.0430		0.0615	
5.2	4	NAIC Designation Category 4.B .....	521,998	XXX	XXX	521,998	0.0238	12,424	0.0555	28,971	0.0793	41,394
5.3	4	NAIC Designation Category 4.C .....		XXX	XXX		0.0310		0.0724		0.1034	
5.4		Subtotal NAIC 4 (5.1 + 5.2 + 5.3) .....	521,998	XXX	XXX	521,998	XXX	12,424	XXX	28,971	XXX	41,394
6.1	5	NAIC Designation Category 5.A .....		XXX	XXX		0.0472		0.0846		0.1410	
6.2	5	NAIC Designation Category 5.B .....		XXX	XXX		0.0663		0.1188		0.1980	
6.3	5	NAIC Designation Category 5.C .....		XXX	XXX		0.0836		0.1498		0.2496	
6.4		Subtotal NAIC 5 (6.1 + 6.2 + 6.3) .....		XXX	XXX		XXX		XXX		XXX	
7	6	NAIC 6 .....		XXX	XXX		0.0000		0.2370		0.2370	
8		Total Unrated Multi-Class Securities Acquired by Conversion .....		XXX	XXX		XXX		XXX		XXX	
9		Total Long-Term Bonds (Sum of Lines 1+2.8+3.4+4.4+5.4+6.4+7+8) .....	44,906,931	XXX	XXX	44,906,931	XXX	107,597	XXX	308,154	XXX	500,413
10	1	PREFERRED STOCKS Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
11	2	High Quality .....	445,440	XXX	XXX	445,440	0.0021	935	0.0064	2,851	0.0106	4,722
12	3	Medium Quality .....	274,480	XXX	XXX	274,480	0.0099	2,717	0.0263	7,219	0.0376	10,320
13	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
14	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
15	6	In or Near Default .....		XXX	XXX		0.0000		0.2370		0.2370	
16		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
17		Total Preferred Stocks (Sum of Lines 10 through 16) .....	719,920	XXX	XXX	719,920	XXX	3,653	XXX	10,070	XXX	15,042



ASSET VALUATION RESERVE (CONTINUED)  
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS  
DEFAULT COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book / Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
SHORT-TERM BONDS												
18		Exempt Obligations .....		XXX	XXX		—		—		—	
19.1	1	NAIC Designation Category 1.A .....		XXX	XXX		0.0002		0.0007		0.0013	
19.2	1	NAIC Designation Category 1.B .....		XXX	XXX		0.0004		0.0011		0.0023	
19.3	1	NAIC Designation Category 1.C .....		XXX	XXX		0.0006		0.0018		0.0035	
19.4	1	NAIC Designation Category 1.D .....		XXX	XXX		0.0007		0.0022		0.0044	
19.5	1	NAIC Designation Category 1.E .....		XXX	XXX		0.0009		0.0027		0.0055	
19.6	1	NAIC Designation Category 1.F .....		XXX	XXX		0.0011		0.0034		0.0068	
19.7	1	NAIC Designation Category 1.G .....		XXX	XXX		0.0014		0.0042		0.0085	
19.8		Subtotal NAIC 1 (19.1 + 19.2 + 19.3 + 19.4 + 19.5 + 19.6 + 19.7) .....		XXX	XXX		XXX		XXX		XXX	
20.1	2	NAIC Designation Category 2.A .....		XXX	XXX		0.0021		0.0063		0.0105	
20.2	2	NAIC Designation Category 2.B .....		XXX	XXX		0.0025		0.0076		0.0127	
20.3	2	NAIC Designation Category 2.C .....		XXX	XXX		0.0036		0.0108		0.0180	
20.4		Subtotal NAIC 2 (20.1 + 20.2 + 20.3) .....		XXX	XXX		XXX		XXX		XXX	
21.1	3	NAIC Designation Category 3.A .....		XXX	XXX		0.0069		0.0183		0.0262	
21.2	3	NAIC Designation Category 3.B .....		XXX	XXX		0.0099		0.0264		0.0377	
21.3	3	NAIC Designation Category 3.C .....		XXX	XXX		0.0131		0.0350		0.0500	
21.4		Subtotal NAIC 3 (21.1 + 21.2 + 21.3) .....		XXX	XXX		XXX		XXX		XXX	
22.1	4	NAIC Designation Category 4.A .....		XXX	XXX		0.0184		0.0430		0.0615	
22.2	4	NAIC Designation Category 4.B .....		XXX	XXX		0.0238		0.0555		0.0793	
22.3	4	NAIC Designation Category 4.C .....		XXX	XXX		0.0310		0.0724		0.1034	
22.4		Subtotal NAIC 4 (22.1 + 22.2 + 22.3) .....		XXX	XXX		XXX		XXX		XXX	
23.1	5	NAIC Designation Category 5.A .....		XXX	XXX		0.0472		0.0846		0.1410	
23.2	5	NAIC Designation Category 5.B .....		XXX	XXX		0.0663		0.1188		0.1980	
23.3	5	NAIC Designation Category 5.C .....		XXX	XXX		0.0836		0.1498		0.2496	
23.4		Subtotal NAIC 5 (23.1 + 23.2 + 23.3) .....		XXX	XXX		XXX		XXX		XXX	
24	6	NAIC 6 .....		XXX	XXX		—		0.2370		0.2370	
25		Total Short-Term Bonds (18 + 19.8 + 20.4 + 21.4 + 22.4 + 23.4 + 24) .....		XXX	XXX		XXX		XXX		XXX	
DERIVATIVE INSTRUMENTS												
26		Exchange Traded .....		XXX	XXX		0.0005		0.0016		0.0033	
27	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
28	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
29	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
30	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
31	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
32	6	In or Near Default .....		XXX	XXX		—		0.2370		0.2370	
33		Total Derivative Instruments .....		XXX	XXX		XXX		XXX		XXX	
34		Total (Lines 9+ 17 + 25 + 33) .....	45,626,851	XXX	XXX	45,626,851	XXX	111,249	XXX	318,223	XXX	515,455

ASSET VALUATION RESERVE (CONTINUED)  
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS  
DEFAULT COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book / Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
		<b>MORTGAGE LOANS</b>										
		In Good Standing:										
35		Farm Mortgages – CM1 – Highest Quality .....			XXX		0.0011		0.0057		0.0074	
36		Farm Mortgages – CM2 – High Quality .....			XXX		0.0040		0.0114		0.0149	
37		Farm Mortgages – CM3 – Medium Quality .....			XXX		0.0069		0.0200		0.0257	
38		Farm Mortgages – CM4 – Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
39		Farm Mortgages – CM5 – Low Quality .....			XXX		0.0183		0.0486		0.0628	
40		Residential Mortgages – Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
41		Residential Mortgages – All Other .....			XXX		0.0015		0.0034		0.0046	
42		Commercial Mortgages – Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
43		Commercial Mortgages – All Other – CM1 – Highest Quality .....			XXX		0.0011		0.0057		0.0074	
44		Commercial Mortgages – All Other – CM2 – High Quality .....			XXX		0.0040		0.0114		0.0149	
45		Commercial Mortgages – All Other – CM3 – Medium Quality .....			XXX		0.0069		0.0200		0.0257	
46		Commercial Mortgages – All Other – CM4 – Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
47		Commercial Mortgages – All Other – CM5 – Low Quality .....			XXX		0.0183		0.0486		0.0628	
		Overdue, Not in Process:										
48		Farm Mortgages .....			XXX		0.0480		0.0868		0.1371	
49		Residential Mortgages – Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
50		Residential Mortgages - All Other .....			XXX		0.0029		0.0066		0.0103	
51		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
52		Commercial Mortgages - All Other .....			XXX		0.0480		0.0868		0.1371	
		In Process of Foreclosure:										
53		Farm Mortgages .....			XXX		–		0.1942		0.1942	
54		Residential Mortgages - Insured or Guaranteed .....			XXX		–		0.0046		0.0046	
55		Residential Mortgages - All Other .....			XXX		–		0.0149		0.0149	
56		Commercial Mortgages - Insured or Guaranteed .....			XXX		–		0.0046		0.0046	
57		Commercial Mortgages - All Other .....			XXX		–		0.1942		0.1942	
58		Total Schedule B Mortgages (Sum of Lines 35 through 57) .....			XXX		XXX		XXX		XXX	
59		Schedule DA Mortgages .....			XXX		0.0034		0.0114		0.0149	
60		Total Mortgage Loans on Real Estate (Lines 58 + 59) .....			XXX		XXX		XXX		XXX	

ASSET VALUATION RESERVE  
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS  
EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book / Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
		<b>COMMON STOCK</b>										
1		Unaffiliated Public .....	791,682	XXX	XXX	791,682	—	—	0.1580 (a)	125,086	0.1580 (a)	125,086
2		Unaffiliated Private .....		XXX	XXX		—	—	0.1945		0.1945	
3		Federal Home Loan Bank .....	70,300	XXX	XXX	70,300	—	—	0.0061	429	0.0097	682
4		Affiliated Life with AVR .....		XXX	XXX		—	—	—	—	—	—
		Affiliated Investment Subsidiary:										
5		Fixed Income Exempt Obligations .....					XXX		XXX		XXX	
6		Fixed Income Highest Quality .....					XXX		XXX		XXX	
7		Fixed Income High Quality .....					XXX		XXX		XXX	
8		Fixed Income Medium Quality .....					XXX		XXX		XXX	
9		Fixed Income Low Quality .....					XXX		XXX		XXX	
10		Fixed Income Lower Quality .....					XXX		XXX		XXX	
11		Fixed Income In or Near Default .....					XXX		XXX		XXX	
12		Unaffiliated Common Stock Public .....					—	—	0.1580 (a)		0.1580 (a)	
13		Unaffiliated Common Stock Private .....					—	—	0.1945		0.1945	
14		Real Estate .....					(b)		(b)		(b)	
15		Affiliated-Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX		—	—	0.1580		0.1580	
16		Affiliated - All Other .....		XXX	XXX		—	—	0.1945		0.1945	
17		Total Common Stock (Sum of Lines 1 through 16) .....	861,982			861,982	XXX	—	XXX	125,515	XXX	125,768
		<b>REAL ESTATE</b>										
18		Home Office Property (General Account only) .....	143,117			143,117	—	—	0.0912	13,052	0.0912	13,052
19		Investment Properties .....					—	—	0.0912		0.0912	
20		Properties Acquired in Satisfaction of Debt .....					—	—	0.1337		0.1337	
21		Total Real Estate (Sum of Lines 18 through 20) .....	143,117			143,117	XXX	—	XXX	13,052	XXX	13,052
		<b>OTHER INVESTED ASSETS INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS</b>										
22		Exempt Obligations .....		XXX	XXX		—	—	—	—	—	—
23	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
24	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
25	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
26	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
27	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
28	6	In or Near Default .....		XXX	XXX		—	—	0.2370		0.2370	
29		Total with Bond Characteristics (Sum of Lines 22 through 28) .....		XXX	XXX		XXX	—	XXX	—	XXX	—

**ASSET VALUATION RESERVE (CONTINUED)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book / Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS</b>										
30	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
31	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
32	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
33	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
34	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
35	6	In or Near Default .....		XXX	XXX		—	—	0.2370		0.2370	
36		Affiliated Life with AVR .....		XXX	XXX		—	—	—	—	—	—
37		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36) .....		XXX	XXX		XXX	—	XXX	—	XXX	—
		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS</b>										
		In Good Standing Affiliated:										
38		Mortgages - CM1 - Highest Quality .....			XXX		0.0011		0.0057		0.0074	
39		Mortgages - CM2 - High Quality .....			XXX		0.0040		0.0114		0.0149	
40		Mortgages - CM3 - Medium Quality .....			XXX		0.0069		0.0200		0.0257	
41		Mortgages - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
42		Mortgages - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
43		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
44		Residential Mortgages - All Other .....		XXX	XXX		0.0015		0.0034		0.0046	
45		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
		Overdue, Not in Process Affiliated:										
46		Farm Mortgages .....			XXX		0.0480		0.0868		0.1371	
47		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
48		Residential Mortgages - All Other .....			XXX		0.0029		0.0066		0.0103	
49		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
50		Commercial Mortgages -- All Other .....			XXX		0.0480		0.0868		0.1371	
		In Process of Foreclosure Affiliated:										
51		Farm Mortgages .....			XXX		—	—	0.1942		0.1942	
52		Residential Mortgages - Insured or Guaranteed .....			XXX		—	—	0.0046		0.0046	
53		Residential Mortgages - All Other .....			XXX		—	—	0.0149		0.0149	
54		Commercial Mortgages - Insured or Guaranteed .....			XXX		—	—	0.0046		0.0046	
55		Commercial Mortgages - All Other .....			XXX		—	—	0.1942		0.1942	
56		Total Affiliated (Sum of Lines 38 through 55) .....			XXX		XXX	—	XXX		XXX	
57		Unaffiliated - In Good Standing With Covenants .....			XXX		(c)		(c)		(c)	
58		Unaffiliated - In Good Standing Defeased With Government Securities .....			XXX		0.0011		0.0057		0.0074	
59		Unaffiliated - In Good Standing Primarily Senior .....			XXX		0.0040		0.0114		0.0149	
60		Unaffiliated - In Good Standing All Other .....			XXX		0.0069		0.0200		0.0257	
61		Unaffiliated - Overdue, Not in Process .....			XXX		0.0480		0.0868		0.1371	
62		Unaffiliated - In Process of Foreclosure .....			XXX		—	—	0.1942		0.1942	
63		Total Unaffiliated (Sum of Lines 57 through 62) .....			XXX		XXX	—	XXX		XXX	
64		Total with Mortgage Loan Characteristics (Lines 56 + 63) .....			XXX		XXX	—	XXX		XXX	

ASSET VALUATION RESERVE (CONTINUED)  
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS  
EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book / Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
65		Unaffiliated Public		XXX	XXX		—	—	0.1580 (a)		0.1580 (a)	
66		Unaffiliated Private		XXX	XXX		—	—	0.1945		0.1945	
67		Affiliated Life with AVR		XXX	XXX		—	—				
68		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	XXX		—	—	0.1580		0.1580	
69		Affiliated Other - All Other		XXX	XXX		—	—	0.1945		0.1945	
70		Total with Common Stock Characteristics (Sum of Lines 65 through 69)		XXX	XXX		XXX	—	XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
71		Home Office Property (General Account only)					—	—	0.0912		0.0912	
72		Investment Properties					—	—	0.0912		0.0912	
73		Properties Acquired in Satisfaction of Debt					—	—	0.1337		0.1337	
74		Total with Real Estate Characteristics (Sum of Lines 71 through 73)					XXX	—	XXX		XXX	
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
75		Guaranteed Federal Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
76		Non-guaranteed Federal Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
77		Guaranteed State Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
78		Non-guaranteed State Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
79		All Other Low Income Housing Tax Credit					0.0273		0.0600		0.0975	
80		Total LIHTC (Sum of Lines 75 through 79)					XXX		XXX		XXX	
RESIDUAL TRANCHES OR INTERESTS												
81		Fixed Income Instruments – Unaffiliated		XXX			—	—	0.1580		0.1580	
82		Fixed Income Instruments – Affiliated		XXX	XXX		—	—	0.1580		0.1580	
83		Common Stock – Unaffiliated		XXX	XXX		—	—	0.1580		0.1580	
84		Common Stock – Affiliated		XXX	XXX		—	—	0.1580		0.1580	
85		Preferred Stock – Unaffiliated		XXX	XXX		—	—	0.1580		0.1580	
86		Preferred Stock – Affiliated		XXX	XXX		—	—	0.1580		0.1580	
87		Real Estate – Unaffiliated					—	—	0.1580		0.1580	
88		Real Estate – Affiliated					—	—	0.1580		0.1580	
89		Mortgage Loans – Unaffiliated		XXX	XXX		—	—	0.1580		0.1580	
90		Mortgage Loans – Affiliated		XXX	XXX		—	—	0.1580		0.1580	
91		Other – Unaffiliated		XXX	XXX		—	—	0.1580		0.1580	
92		Other – Affiliated		XXX	XXX		—	—	0.1580		0.1580	
93		Total Residual Tranches or Interests (Sum of Lines 81 through 92)					XXX	—	XXX		XXX	
ALL OTHER INVESTMENTS												
94		NAIC 1 Working Capital Finance Investments		XXX			—	—	0.0042		0.0042	
95		NAIC 2 Working Capital Finance Investments		XXX			—	—	0.0137		0.0137	
96		Other Invested Assets - Schedule BA		XXX			—	—	0.1580		0.1580	
97		Other Short-Term Invested Assets - Schedule DA		XXX			—	—	0.1580		0.1580	
98		Total All Other (Sum of Lines 94, 95, 96 and 97)		XXX			XXX	—	XXX		XXX	
99		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80, 93 and 98)		XXX	XXX		XXX	—	XXX	—	XXX	—

(a) Times the company's weighted average portfolio beta (Minimum .1215, Maximum .2431).  
(b) Determined using same factors and breakdowns used for directly owned real estate.  
(c) This will be the factor associated with the risk category determined in the company generated worksheet.

**ASSET VALUATION RESERVE**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**REPLICATIONS (SYNTHETIC) ASSETS**

1	2	3	4	5	6	7	8	9
RSAT Number	Type	CUSIP (6 digits)	Description of Asset(s)	NAIC Designation or Other Description of Asset	Value of Asset	AVR Basic Contribution	AVR Reserve Objective	AVR Maximum Reserve
0599999 – Totals.....								

NONE

SCHEDULE F

Showing all claims for death losses and all other contract claims resisted or compromised during the year, and  
all claims for death losses and all other contract claims resisted December 31 of current year

1	2	3	4	5	6	7	8
Contract Numbers	Claim Numbers	State of Residence of Claimant	Year of Claim for Death or Disability	Amount Claimed	Amount Paid During the Year	Amount Resisted Dec. 31 of Current Year	Why Compromised or Resisted
5399999 – Totals .....							XXX .....

NONE

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

PART 1 – ANALYSIS OF UNDERWRITING OPERATIONS

		Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
		1	2	3	4	5	6	7	8	9	10	11	12	13	14
		Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%
1.	Premiums written.....	4,953	XXX		XXX		XXX		XXX		XXX		XXX		XXX
2.	Premiums earned.....	4,848	XXX		XXX		XXX		XXX		XXX		XXX		XXX
3.	Incurred claims.....	729	15.0												
4.	Cost containment expenses.....														
5.	Incurred claims and cost containment expenses (Lines 3 and 4).....	729	15.0												
6.	Increase in contract reserves.....	(3,500)	(72.2)												
7.	Commissions (a).....														
8.	Other general insurance expenses.....														
9.	Taxes, licenses and fees.....														
10.	Total other expenses incurred.....														
11.	Aggregate write-ins for deductions.....														
12.	Gain from underwriting before dividends or refunds.....	7,619	157.2												
13.	Dividends or refunds.....														
14.	Gain from underwriting after dividends or refunds.....	7,619	157.2												
Details of Write-Ins															
1101.	.....														
1102.	.....														
1103.	.....														
1198..	Summary of remaining write-ins for Line 11 from overflow page.....														
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....														

		Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health	
		15	16	17	18	19	20	21	22	23	24	25	26
		Amount	%	Amount	%	Amount	%	Amount	%	Amount	%	Amount	%
1.	Premiums written.....		XXX		XXX		XXX		XXX		XXX	4,953	XXX
2.	Premiums earned.....		XXX		XXX		XXX		XXX		XXX	4,848	XXX
3.	Incurred claims.....											729	15.0
4.	Cost containment expenses.....												
5.	Incurred claims and cost containment expenses (Lines 3 and 4).....											729	15.0
6.	Increase in contract reserves.....											(3,500)	(72.2)
7.	Commissions (a).....												
8.	Other general insurance expenses.....												
9.	Taxes, licenses and fees.....												
10.	Total other expenses incurred.....												
11.	Aggregate write-ins for deductions.....												
12.	Gain from underwriting before dividends or refunds.....											7,619	157.2
13.	Dividends or refunds.....												
14.	Gain from underwriting after dividends or refunds.....											7,619	157.2
Details of Write-Ins													
1101.	.....												
1102.	.....												
1103.	.....												
1198..	Summary of remaining write-ins for Line 11 from overflow page.....												
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....												

(a) Includes \$ reported as "Contract, membership and other fees retained by agents."



SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (CONTINUED)

PART 2 - RESERVES AND LIABILITIES

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Premium Reserves:													
1. Unearned premiums .....	105												105
2. Advance premiums .....													
3. Reserve for rate credits .....													
4. Total premium reserves, current year .....	105												105
5. Total premium reserves, prior year .....	84												84
6. Increase in total premium reserves .....	21												21
B. Contract Reserves:													
1. Additional reserves (a) .....													
2. Reserve for future contingent benefits .....	29,000												29,000
3. Total contract reserves, current year .....	29,000												29,000
4. Total contract reserves, prior year .....	32,500												32,500
5. Increase in contract reserves .....	(3,500)												(3,500)
C. Claim Reserves and Liabilities:													
1. Total current year .....													
2. Total prior year .....													
3. Increase .....													

PART 3 - TEST OF PRIOR YEARS CLAIM RESERVES AND LIABILITIES

1. Claims paid during the year:													
1.1. On claims incurred prior to current year .....													
1.2. On claims incurred during current year .....	729												729
2. Claim reserves and liabilities, December 31, current year:													
2.1. On claims incurred prior to current year .....													
2.2. On claims incurred during current year .....													
3. Test:													
3.1. Lines 1.1 and 2.1 .....													
3.2. Claim reserves and liabilities, December 31, prior year .....													
3.3. Line 3.1 minus Line 3.2 .....													

PART 4 - REINSURANCE

A. Reinsurance Assumed:													
1. Premiums written .....													
2. Premiums earned .....													
3. Incurred claims .....													
4. Commissions .....													
B. Reinsurance Ceded:													
1. Premiums written .....													
2. Premiums earned .....													
3. Incurred claims .....													
4. Commissions .....													

(a) Includes \$ premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

		1	2	3	4	5	6	7	8	9	10	11	12	13
		Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health	Total
A.	Direct:													
	1. Incurred Claims .....												729	729
	2. Beginning Claim Reserves and Liabilities .....													
	3. Ending Claim Reserves and Liabilities .....													
	4. Claims Paid .....												729	729
B.	Assumed Reinsurance:													
	1. Incurred Claims .....													
	2. Beginning Claim Reserves and Liabilities .....													
	3. Ending Claim Reserves and Liabilities .....													
	4. Claims Paid .....													
C.	Ceded Reinsurance:													
	1. Incurred Claims .....													
	2. Beginning Claim Reserves and Liabilities .....													
	3. Ending Claim Reserves and Liabilities .....													
	4. Claims Paid .....													
D.	Net:													
	1. Incurred Claims .....												729	729
	2. Beginning Claim Reserves and Liabilities .....													
	3. Ending Claim Reserves and Liabilities .....													
	4. Claims Paid .....												729	729
E.	Net Incurred Claims and Cost Containment Expenses:													
	1. Incurred Claims and Cost Containment Expenses .....												729	729
	2. Beginning Reserves and Liabilities .....													
	3. Ending Reserves and Liabilities .....													
	4. Paid Claims and Cost Containment Expenses .....												729	729

(41) Schedule S - Part 1 - Section 1

**NONE**

(42) Schedule S - Part 1 - Section 2

**NONE**

(43) Schedule S - Part 2

**NONE**

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities  
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
General Account, Authorized, Affiliates, U.S., Captive														
88099	75-1608507	07/01/2005	OptimumRe	TX	CO/I	ADB	—			1,749				
88099	75-1608507	07/01/2005	OptimimRe	TX	YRT/I	OL	1,020,000			1,550				
0199999 – General Account, Authorized, Affiliates, U.S., Captive							1,020,000			3,299				
0399999 – General Account, Authorized, Affiliates, U.S., Total							1,020,000			3,299				
0799999 – General Account, Authorized, Total Authorized Affiliates							1,020,000			3,299				
1199999 – Total General Account Authorized							1,020,000			3,299				
4599999 – Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							1,020,000			3,299				
9199999 – Total U.S.							1,020,000			3,299				
9999999 – Total (Sum of 4599999 and 9099999)							1,020,000			3,299				

(45) Schedule S - Part 3 - Section 2

**NONE**

(46) Schedule S - Part 4

**NONE**

(46) Schedule S - Part 4 - Bank Information

**NONE**

(47) Schedule S - Part 5

**NONE**

(47) Schedule S - Part 5 - Bank Information

**NONE**

SCHEDULE S - PART 6

Five-Year Exhibit of Reinsurance Ceded Business  
(\$000 Omitted)

		1	2	3	4	5
		2023	2022	2021	2020	2019
A.	OPERATIONS ITEMS					
1.	Premiums and annuity considerations for life and accident and health contracts.....	3	4	4	3	4
2.	Commissions and reinsurance expense allowances.....					
3.	Contract claims.....					
4.	Surrender benefits and withdrawals for life contracts.....					
5.	Dividends to policyholders and refunds to members.....					
6.	Reserve adjustments on reinsurance ceded.....					
7.	Increase in aggregate reserves for life and accident and health contracts.....					
B.	BALANCE SHEET ITEMS					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....					
9.	Aggregate reserves for life and accident and health contracts.....					
10.	Liability for deposit-type contracts.....					
11.	Contract claims unpaid.....					
12.	Amounts recoverable on reinsurance.....					
13.	Experience rating refunds due or unpaid.....					
14.	Policyholders' dividends and refunds to members (not included in Line 10).....					
15.	Commissions and reinsurance expense allowances due.....					
16.	Unauthorized reinsurance offset.....					
17.	Offset for reinsurance with Certified Reinsurers.....					
C.	UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18.	Funds deposited by and withheld from (F).....					
19.	Letters of credit (L).....					
20.	Trust agreements (T).....					
21.	Other (O).....					
D.	REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22.	Multiple Beneficiary Trust.....					
23.	Funds deposited by and withheld from (F).....					
24.	Letters of credit (L).....					
25.	Trust agreements (T).....					
26.	Other (O).....					

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12)	47,293,562		47,293,562
2. Reinsurance (Line 16)			
3. Premiums and considerations (Line 15)	1,688		1,688
4. Net credit for ceded reinsurance	XXX		
5. All other admitted assets (balance)	644,913		644,913
6. Total assets excluding Separate Accounts (Line 26)	47,940,163		47,940,163
7. Separate Account assets (Line 27)			
8. Total assets (Line 28)	47,940,163		47,940,163
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2)	33,178,853		33,178,853
10. Liability for deposit-type contracts (Line 3)	1,341,305		1,341,305
11. Claim reserves (Line 4)	109,242		109,242
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)	100,000		100,000
13. Premium & annuity considerations received in advance (Line 8)			
14. Other contract liabilities (Line 9)	225,373		225,373
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)			
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)			
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)			
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)			
19. All other liabilities (balance)	905,419		905,419
20. Total liabilities excluding Separate Accounts (Line 26)	35,860,192		35,860,192
21. Separate Account liabilities (Line 27)			
22. Total liabilities (Line 28)	35,860,192		35,860,192
23. Capital & surplus (Line 38)	12,079,971	XXX	12,079,971
24. Total liabilities, capital & surplus (Line 39)	47,940,163		47,940,163
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves		XXX	XXX
26. Claim reserves		XXX	XXX
27. Policyholder dividends/reserves		XXX	XXX
28. Premium & annuity considerations received in advance		XXX	XXX
29. Liability for deposit-type contracts		XXX	XXX
30. Other contract liabilities		XXX	XXX
31. Reinsurance ceded assets		XXX	XXX
32. Other ceded reinsurance recoverables		XXX	XXX
33. Total ceded reinsurance recoverables		XXX	XXX
34. Premiums and considerations		XXX	XXX
35. Reinsurance in unauthorized companies		XXX	XXX
36. Funds held under reinsurance treaties with unauthorized reinsurers		XXX	XXX
37. Reinsurance with Certified Reinsurers		XXX	XXX
38. Funds held under reinsurance treaties with Certified Reinsurers		XXX	XXX
39. Other ceded reinsurance payables/offsets		XXX	XXX
40. Total ceded reinsurance payable/offsets		XXX	XXX
41. Total net credit for ceded reinsurance		XXX	XXX

SCHEDULE T – PART 2  
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN  
Allocated By States And Territories

			Direct Business Only			
			1	2	3	4
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)
1.	Alabama	AL				
2.	Alaska	AK				
3.	Arizona	AZ				
4.	Arkansas	AR				
5.	California	CA				
6.	Colorado	CO				
7.	Connecticut	CT				
8.	Delaware	DE				
9.	District of Columbia	DC				
10.	Florida	FL				
11.	Georgia	GA				
12.	Hawaii	HI				
13.	Idaho	ID				
14.	Illinois	IL				
15.	Indiana	IN				
16.	Iowa	IA				
17.	Kansas	KS				
18.	Kentucky	KY				
19.	Louisiana	LA				
20.	Maine	ME				
21.	Maryland	MD				
22.	Massachusetts	MA				
23.	Michigan	MI				
24.	Minnesota	MN				
25.	Mississippi	MS				
26.	Missouri	MO				
27.	Montana	MT				
28.	Nebraska	NE				
29.	Nevada	NV				
30.	New Hampshire	NH				
31.	New Jersey	NJ				
32.	New Mexico	NM				
33.	New York	NY				
34.	North Carolina	NC				
35.	North Dakota	ND				
36.	Ohio	OH	79,394	777,942		430,540
37.	Oklahoma	OK				
38.	Oregon	OR				
39.	Pennsylvania	PA				
40.	Rhode Island	RI				
41.	South Carolina	SC				
42.	South Dakota	SD				
43.	Tennessee	TN				
44.	Texas	TX				
45.	Utah	UT				
46.	Vermont	VT				
47.	Virginia	VA				
48.	Washington	WA				
49.	West Virginia	WV				
50.	Wisconsin	WI				
51.	Wyoming	WY				
52.	American Samoa	AS				
53.	Guam	GU				
54.	Puerto Rico	PR				
55.	U.S. Virgin Islands	VI				
56.	Northern Mariana Islands	MP				
57.	Canada	CAN				
58.	Aggregate Other Alien	OT				
59.	Totals		79,394	777,942		430,540



(53) Schedule Y - Part 1A - Detail of Insurance Holding Company System

**NONE**

(53) Schedule Y - Part 1A - Explanation

**NONE**

(54) Schedule Y - Part 2

**NONE**

(55) Schedule Y - Part 3

**NONE**

SUPPLEMENTAL EXHIBIT AND SCHEDULE INTERROGATORIES  
REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

	Response
<b>March Filing</b>	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?.....	YES
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?.....	YES
4. Will an actuarial opinion be filed by March 1?.....	YES
<b>April Filing</b>	
5. Will Management's Discussion and Analysis be filed by April 1?.....	YES
6. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit – Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies).....	WAIVED
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?.....	YES
<b>June Filing</b>	
8. Will an audited financial report be filed by June 1?.....	YES
9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?.....	YES

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your statement filing **if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below.** If the supplement is required of your company but is not being filed for whatever reason, enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.


















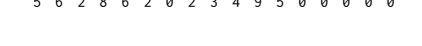










<b>March Filing</b>	
10. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies).....	NO
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....	NO
12. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?.....	NO
13. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?.....	YES
14. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?.....	YES
15. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
16. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
17. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
18. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
19. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
20. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
22. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
23. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
24. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
25. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
26. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
27. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
28. Will the Workers' Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies).....	NO
29. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?.....	YES
30. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
31. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?.....	NO
32. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?.....	NO
33. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	NO
34. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
35. Will the Health Supplement be filed with the state of domicile and the NAIC by March 1?.....	YES
36. Will the Market Conduct Annual Statement (MCAS) Premium exhibit for the Year be filed with appropriate jurisdictions and with the NAIC by March 1?.....	NO
<b>April Filing</b>	
37. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?.....	NO
38. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?.....	NO

SUPPLEMENTAL EXHIBIT AND SCHEDULE INTERROGATORIES








	Response
39. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies).....	NO.....
40. Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	NO.....
41. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?.....	NO.....
42. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?.....	NO.....
43. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?.....	NO.....
44. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?.....	NO.....
45. Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?.....	NO.....
46. Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?.....	NO.....
47. Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?.....	NO.....

August Filing

48. Will Management’s Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?.....	YES.....
---	----------

Explanation	Barcode
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	
17.	
18.	
19.	
20.	
21.	
22.	
23.	
24.	
25.	
26.	
27.	
28.	
29.	
30.	
31.	
32.	
33.	
34.	
35.	
36.	
37.	
38.	
39.	
40.	

SUPPLEMENTAL EXHIBIT AND SCHEDULE INTERROGATORIES

Explanation	Barcode
41.	 5 6 2 8 6 2 0 2 3 2 1 6 0 0 0 0 0
42.	 5 6 2 8 6 2 0 2 3 4 3 5 0 0 0 0 0
43.	 5 6 2 8 6 2 0 2 3 3 4 5 0 0 0 0 0
44.	 5 6 2 8 6 2 0 2 3 2 8 6 0 0 0 0 0
45.	 5 6 2 8 6 2 0 2 3 4 5 7 0 0 0 0 0
46.	 5 6 2 8 6 2 0 2 3 4 5 8 0 0 0 0 0
47.	 5 6 2 8 6 2 0 2 3 4 5 9 0 0 0 0 0
48.	

OVERFLOW PAGE FOR WRITE-INS

EXHIBIT 2 - GENERAL EXPENSES

	Insurance				5	6	7
	1	Accident and Health		4			
		2	3				
		Cost					
	Life	Containment	All Other	All Other Lines of Business	Investment	Fraternal	Total
09.304. FRATERNAL EVENTS .....						28,167	28,167
09.305. CONSULTING SERVICES .....	11,592						11,592
09.306. DATA PROCESSING .....	17,148						17,148
09.397. Summary of remaining write-ins for Line 9.3 from overflow page .....	28,740					28,167	56,907

OVERFLOW PAGE FOR WRITE-INS



SCHEDULE O SUPPLEMENT  
For The Year Ended December 31, 2023  
(To Be Filed by March 1)

Of The: American Mutual Life Association

Address (City, State and Zip Code): CLEVELAND, OH, US 44119

NAIC Group Code: 0000

NAIC Company Code: 56286

Employer's ID Number: 34-6577472

SUPPLEMENTAL SCHEDULE O – PART 1  
Development of Incurred Losses  
(\$000 Omitted)

SECTION A – GROUP ACCIDENT AND HEALTH

		Cumulative Net Amounts Paid Policyholders				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023 (a)
1.	Prior.....					
2.	2019.....					
3.	2020.....	XXX				
4.	2021.....	XXX	XXX			
5.	2022.....	XXX	XXX	XXX		
6.	2023.....	XXX	XXX	XXX	XXX	

SECTION B – OTHER ACCIDENT AND HEALTH

		Cumulative Net Amounts Paid Policyholders				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023 (a)
1.	Prior.....					
2.	2019.....					
3.	2020.....	XXX				
4.	2021.....	XXX	XXX			
5.	2022.....	XXX	XXX	XXX		
6.	2023.....	XXX	XXX	XXX	XXX	

SECTION C – CREDIT ACCIDENT AND HEALTH

		Cumulative Net Amounts Paid Policyholders				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023 (a)
1.	Prior.....					
2.	2019.....					
3.	2020.....	XXX				
4.	2021.....	XXX	XXX			
5.	2022.....	XXX	XXX	XXX		
6.	2023.....	XXX	XXX	XXX	XXX	

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

SUPPLEMENTAL SCHEDULE O – PART 1  
Development of Incurred Losses  
(\$000 Omitted)

SECTION D – OTHER COVERAGES USING THE DEVELOPMENT METHOD

		Cumulative Net Amounts Paid Policyholders				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023 (a)
1.	Prior.....	NONE				
2.	2019.....					
3.	2020.....					
4.	2021.....					
5.	2022.....					
6.	2023.....	XXX	XXX	XXX	XXX	

SECTION E – OTHER COVERAGES USING THE DEVELOPMENT METHOD

		Cumulative Net Amounts Paid Policyholders				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023 (a)
1.	Prior.....	NONE				
2.	2019.....					
3.	2020.....					
4.	2021.....					
5.	2022.....					
6.	2023.....	XXX	XXX	XXX	XXX	

SECTION F – OTHER COVERAGES USING THE DEVELOPMENT METHOD

		Cumulative Net Amounts Paid Policyholders				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023 (a)
1.	Prior.....	NONE				
2.	2019.....					
3.	2020.....					
4.	2021.....					
5.	2022.....					
6.	2023.....	XXX	XXX	XXX	XXX	

SECTION G – OTHER COVERAGES USING THE DEVELOPMENT METHOD

		Cumulative Net Amounts Paid Policyholders				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023 (a)
1.	Prior.....	NONE				
2.	2019.....					
3.	2020.....					
4.	2021.....					
5.	2022.....					
6.	2023.....	XXX	XXX	XXX	XXX	



(Supp-465.2) Part 2 - Section A - Group Accident and Health

NONE

(Supp-465.2) Part 2 - Section B - Other Accident and Health

NONE

(Supp-465.2) Part 2 - Section C - Credit Accident and Health

NONE

(Supp-465.2) Part 2 - Section D

NONE

(Supp-465.2) Part 2 - Section E

NONE

(Supp-465.2) Part 2 - Section F

NONE

(Supp-465.2) Part 2 - Section G

NONE

(Supp-465.3) Part 3 - Section A - Group Accident and Health

NONE

(Supp-465.3) Part 3 - Section B - Other Accident and Health

NONE

(Supp-465.3) Part 3 - Section C - Credit Accident and Health

NONE

(Supp-465.3) Part 3 - Section D

NONE

(Supp-465.3) Part 3 - Section E

NONE

(Supp-465.3) Part 3 - Section F

NONE

(Supp-465.3) Part 3 - Section G

NONE

SUPPLEMENTAL SCHEDULE O – PART 4

Development of Incurred Losses  
(\$000 Omitted)

SECTION A – GROUP ACCIDENT AND HEALTH

		Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023
1.	2019	NONE				
2.	2020					
3.	2021					
4.	2022			XXX		
5.	2023		XXX	XXX	XXX	

SECTION B – OTHER ACCIDENT AND HEALTH

		Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023
1.	2019	NONE				
2.	2020					
3.	2021					
4.	2022			XXX		
5.	2023		XXX	XXX	XXX	

SECTION C – CREDIT ACCIDENT AND HEALTH

		Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023
1.	2019	NONE				
2.	2020					
3.	2021					
4.	2022			XXX		
5.	2023		XXX	XXX	XXX	

SUPPLEMENTAL SCHEDULE O – PART 4  
Development of Incurred Losses  
(\$000 Omitted)

SECTION D – OTHER COVERAGES USING THE DEVELOPMENT METHOD

		Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023
1.	2019	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
		XXX	XXX	XXX	XXX	XXX

SECTION E – OTHER COVERAGES USING THE DEVELOPMENT METHOD

		Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023
1.	2019	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
		XXX	XXX	XXX	XXX	XXX

SECTION F – OTHER COVERAGES USING THE DEVELOPMENT METHOD

		Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023
1.	2019	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
		XXX	XXX	XXX	XXX	XXX

SECTION G – OTHER COVERAGES USING THE DEVELOPMENT METHOD

		Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
		1	2	3	4	5
Years in Which Losses Were Incurred		2019	2020	2021	2022	2023
1.	2019	NONE				
2.	2020					
3.	2021					
4.	2022					
5.	2023					
		XXX	XXX	XXX	XXX	XXX

SUPPLEMENTAL SCHEDULE O – PART 5  
(\$000 Omitted)

RESERVE AND LIABILITY METHODOLOGY - EXHIBITS 6 AND 8

		1	2
Line of Business		Methodology	Amount
1.	Industrial life	Other	109
2.	Ordinary life		
3.	Individual annuity		
4.	Supplementary contracts		
5.	Credit life		
6.	Group life		
7.	Group annuities		
8.	Group accident and health		
9.	Credit accident and health		
10.	Other accident and health		
11.	Total	XXX	109



**HEALTH SUPPLEMENTS**  
For The Year Ended December 31, 2023  
(To Be Filed by March 1)

Of The: American Mutual Life Association

Address (City, State and Zip Code): CLEVELAND, OH, US 44119

NAIC Group Code: 0000

NAIC Company Code: 56286

Employer's ID Number: 34-6577472

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	Comprehensive (Hospital and Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non- Health
1. Net premium income	4,776	4,776												
2. Change in unearned premium reserves and reserve for rate credit														
3. Fee-for-service (net of \$ medical expenses)														XXX
4. Risk revenue														XXX
5. Aggregate write-ins for other health care related revenues														XXX
6. Aggregate write-ins for other non-health care related revenues		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
7. Total revenues (Lines 1 to 6)	4,776	4,776												
8. Hospital/medical benefits	729	729												XXX
9. Other professional services														XXX
10. Outside referrals														XXX
11. Emergency room and out-of-area														XXX
12. Prescription drugs														XXX
13. Aggregate write-ins for other hospital and medical														XXX
14. Incentive pool, withhold adjustments and bonus amounts														XXX
15. Subtotal (Lines 8 to 14)	729	729												XXX
16. Net reinsurance recoveries														XXX
17. Total hospital and medical (Lines 15 minus 16)	729	729												XXX
18. Non-health claims (net)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19. Claims adjustment expenses including \$ cost containment expenses														
20. General administrative expenses														
21. Increase in reserves for accident and health contracts	(3,500)	(3,500)												XXX
22. Increase in reserves for life contracts		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Lines 17 to 22)	(2,771)	(2,771)												
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	7,547	7,547												
Details of Write-Ins														
0501.														XXX
0502.														XXX
0503.														XXX
0598. Summary of remaining write-ins for Line 05 from overflow page														XXX
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)														XXX
0601.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698. Summary of remaining write-ins for Line 06 from overflow page		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1301.														XXX
1302.														XXX
1303.														XXX
1398. Summary of remaining write-ins for Line 13 from overflow page														XXX
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)														XXX

OVERFLOW PAGE FOR WRITE-INS

**EXHIBIT 3**  
HEALTH CARE RECEIVABLES

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
0799999 – Gross Health Care Receivables.....						

NONE

EXHIBIT 3A

ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

		Health Care Receivables Collected or Offset During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5	6
		1	2	3	4		
Type of Health Care Receivable		On Amounts Accrued Prior to January 1 of Current Year	On Amounts Accrued During the Year	On Amounts Accrued December 31 of Prior Year	On Amounts Accrued During the Year	Health Care Receivables from Prior Years (Cols. 1 + 3)	Estimated Health Care Receivables Accrued as of December 31 of Prior Year
1.	Pharmaceutical rebate receivables .....						
2.	Claim overpayment receivables .....						
3.	Loans and advances to providers .....						
4.	Capitation arrangement receivables .....						
5.	Risk sharing receivables .....						
6.	Other health care receivables .....						
7.	Totals (Lines 1 through 6) .....						

NONE

Note that the accrued amounts in Columns 3, 4 and 6 are the total health care receivables, not just the admitted portion.