



QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2008
OF THE CONDITION AND AFFAIRS OF THE

AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

NAIC Group Code 0108, 0108 NAIC Company Code 30562 Employer's ID Number 36-2797074
(Current Period) (Prior Period)

Organized under the Laws of Illinois, State of Domicile or Port of Entry Illinois
Country of Domicile United States

Incorporated/Organized 03/29/1837 Commenced Business 08/13/1837

Statutory Home Office 1 Kemper Drive, Long Grove, IL 60049-0001
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office 1 Kemper Drive Long Grove, IL 60049-0001 847-320-2000
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 1 Kemper Drive, Long Grove, IL 60049-0001
(Street and Number or P.O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 1 Kemper Drive Long Grove, IL 60049-0001 847-320-3127
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.kemperinsurance.com

Statutory Statement Contact Fredrick Thomas Griffith 847-320-3127
(Name) (Area Code) (Telephone Number) (Extension)
Fred.Griffith@kemperinsurance.com 847-320-3818
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
<u>Douglas Sean Andrews</u>	<u>President and CEO</u>	<u>John Keating Conway</u>	<u>Secretary</u>
<u>Fredrick Thomas Griffith</u>	<u>Chief Financial Officer</u>	<u>Geoffrey Andrew Cooke</u>	<u>Treasurer</u>

OTHER OFFICERS

<u>Frederick Otto Kist</u>	<u>Senior Vice President</u>	<u>Benjamin David Schwartz</u>	<u>Senior Vice President</u>
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DIRECTORS OR TRUSTEES

<u>Douglas Sean Andrews</u>	<u>Peter Bannerman Hamilton</u>	<u>George Ralph Lewis</u>	<u>Arthur James Massolo</u>
<u>David Barrett Mathis</u>			

State of Illinois

ss

County of Lake

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.

Douglas Sean Andrews
President and CEO

John Keating Conway
Secretary

Fredrick Thomas Griffith
Chief Financial Officer

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

Subscribed and sworn to before me this
12th day of November, 2008

b. If no,
1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	9,574,180		9,574,180	9,238,091
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$(994)), cash equivalents (\$0) and short-term investments (\$1,879,766)	1,878,772		1,878,772	1,561,330
6. Contract loans, (including \$ premium notes)			0	0
7. Other invested assets	0	0	0	0
8. Receivables for securities			0	0
9. Aggregate write-ins for invested assets	0	0	0	0
10. Subtotals, cash and invested assets (Lines 1 to 9)	11,452,952	0	11,452,952	10,799,421
11. Title plants less \$ charged off (for Title insurers only)			0	0
12. Investment income due and accrued	107,046		107,046	142,759
13. Premiums and considerations:				
13.1 Uncollected premiums and agents' balances in the course of collection			0	0
13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
13.3 Accrued retrospective premiums			0	0
14. Reinsurance:				
14.1 Amounts recoverable from reinsurers			0	0
14.2 Funds held by or deposited with reinsured companies			0	0
14.3 Other amounts receivable under reinsurance contracts			0	0
15. Amounts receivable relating to uninsured plans			0	0
16.1 Current federal and foreign income tax recoverable and interest thereon			0	0
16.2 Net deferred tax asset	88,438,916	88,438,916	0	0
17. Guaranty funds receivable or on deposit			0	0
18. Electronic data processing equipment and software			0	0
19. Furniture and equipment, including health care delivery assets (\$)			0	0
20. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
21. Receivables from parent, subsidiaries and affiliates			0	0
22. Health care (\$) and other amounts receivable			0	0
23. Aggregate write-ins for other than invested assets	18,666	18,666	0	0
24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 to 23)	100,017,580	88,457,582	11,559,998	10,942,180
25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
26. Total (Lines 24 and 25)	100,017,580	88,457,582	11,559,998	10,942,180
DETAILS OF WRITE-INS				
0901.				
0902.				
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	0	0	0	0
2301. Prepaid expenses	18,666	18,666	0	0
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	18,666	18,666	0	0

**STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE
COMPANY**

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$)		0
2. Reinsurance payable on paid losses and loss adjustment expenses		0
3. Loss adjustment expenses		0
4. Commissions payable, contingent commissions and other similar charges		0
5. Other expenses (excluding taxes, licenses and fees)	900	900
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		0
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))		0
7.2 Net deferred tax liability		0
8. Borrowed money \$ and interest thereon \$		0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$357,001 and including warranty reserves of \$)		0
10. Advance premium		0
11. Dividends declared and unpaid:		
11.1 Stockholders		0
11.2 Policyholders		0
12. Ceded reinsurance premiums payable (net of ceding commissions)		0
13. Funds held by company under reinsurance treaties		0
14. Amounts withheld or retained by company for account of others		0
15. Remittances and items not allocated		0
16. Provision for reinsurance		0
17. Net adjustments in assets and liabilities due to foreign exchange rates		0
18. Drafts outstanding		0
19. Payable to parent, subsidiaries and affiliates	356,660	60,019
20. Payable for securities		0
21. Liability for amounts held under uninsured plans		0
22. Capital notes \$ and interest thereon \$		0
23. Aggregate write-ins for liabilities	0	0
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23)	357,560	60,919
25. Protected cell liabilities		0
26. Total liabilities (Lines 24 and 25)	357,560	60,919
27. Aggregate write-ins for special surplus funds	0	0
28. Common capital stock		0
29. Preferred capital stock		0
30. Aggregate write-ins for other than special surplus funds	1,500,000	1,500,000
31. Surplus notes		0
32. Gross paid in and contributed surplus		0
33. Unassigned funds (surplus)	9,702,438	9,381,261
34. Less treasury stock, at cost:		
34.1 shares common (value included in Line 28 \$)		0
34.2 shares preferred (value included in Line 29 \$)		0
35. Surplus as regards policyholders (Lines 27 to 33, less 34)	11,202,438	10,881,261
36. TOTALS	11,559,998	10,942,180
DETAILS OF WRITE-INS		
2301.		
2302.		
2303.		
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	0	0
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	0	0
3001. Guaranty fund	1,500,000	1,500,000
3002.		
3003.		
3098. Summary of remaining write-ins for Line 30 from overflow page	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above)	1,500,000	1,500,000

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 609,753)	667,496	918,146	1,120,062
1.2 Assumed (written \$)		0	
1.3 Ceded (written \$ 609,753)	667,496	918,146	1,120,062
1.4 Net (written \$ 0)	0	0	0
DEDUCTIONS:			
2. Losses incurred (current accident year \$):			
2.1 Direct	26,955,038	21,327,662	16,155,769
2.2 Assumed		0	
2.3 Ceded	26,955,038	21,327,662	16,155,769
2.4 Net	0	0	0
3. Loss adjustment expenses incurred	0	0	0
4. Other underwriting expenses incurred	84,000	95,667	123,667
5. Aggregate write-ins for underwriting deductions	0	0	0
6. Total underwriting deductions (Lines 2 through 5)	84,000	95,667	123,667
7. Net income of protected cells	0	0	0
8. Net underwriting gain or (loss) (Line 1.4 minus Line 6 + Line 7)	(84,000)	(95,667)	(123,667)
INVESTMENT INCOME			
9. Net investment income earned	377,177	382,391	510,185
10. Net realized capital gains (losses) less capital gains tax of \$	0	0	0
11. Net investment gain (loss) (Lines 9 + 10)	377,177	382,391	510,185
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)		0	0
13. Finance and service charges not included in premiums		0	0
14. Aggregate write-ins for miscellaneous income	0	0	0
15. Total other income (Lines 12 through 14)	0	0	0
16. Net income before dividends to policyholders after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	293,177	286,724	386,518
17. Dividends to policyholders	0	0	0
18. Net income, after dividends to policyholders after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	293,177	286,724	386,518
19. Federal and foreign income taxes incurred	0	0	0
20. Net income (Line 18 minus Line 19)(to Line 22)	293,177	286,724	386,518
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	10,881,261	10,483,076	10,483,076
22. Net income (from Line 20)	293,177	286,724	386,518
23. Net transfers (to) from Protected Cell accounts		0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$		0	0
25. Change in net unrealized foreign exchange capital gain (loss)		0	0
26. Change in net deferred income tax	(112,412)	(114,237)	(207,459)
27. Change in nonadmitted assets	140,412	153,904	219,126
28. Change in provision for reinsurance		0	0
29. Change in surplus notes		0	0
30. Surplus (contributed to) withdrawn from protected cells		0	0
31. Cumulative effect of changes in accounting principles		0	0
32. Capital changes:			
32.1 Paid in		0	0
32.2 Transferred from surplus (Stock Dividend)		0	0
32.3 Transferred to surplus		0	0
33. Surplus adjustments:			
33.1 Paid in		0	0
33.2 Transferred to capital (Stock Dividend)		0	0
33.3 Transferred from capital		0	0
34. Net remittances from or (to) Home Office		0	0
35. Dividends to stockholders		0	0
36. Change in treasury stock		0	0
37. Aggregate write-ins for gains and losses in surplus		0	0
38. Change in surplus as regards policyholders (Lines 22 through 37)	321,177	326,391	398,185
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	11,202,438	10,809,467	10,881,261
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0	0
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)	0	0	0

**STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE
COMPANY**

CASH FLOW

	1 Current Year To Date	2 Prior Year Ended December 31
Cash from Operations		
1. Premiums collected net of reinsurance.....	0	0
2. Net investment income	465,140	556,992
3. Miscellaneous income	0	0
4. Total (Lines 1 to 3)	465,140	556,992
5. Benefits and loss related payments	0	0
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	84,000	123,667
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	0
10. Total (Lines 5 through 9)	84,000	123,667
11. Net cash from operations (Line 4 minus Line 10)	381,140	433,325
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	2,886,339	5,840,999
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,886,339	5,840,999
13. Cost of investments acquired (long-term only):		
13.1 Bonds	3,274,678	6,222,001
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	3,274,678	6,222,001
14. Net increase (or decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(388,339)	(381,002)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied).....	324,641	(2,643)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	324,641	(2,643)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	317,442	49,680
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	1,561,330	1,511,650
19.2 End of period (Line 18 plus Line 19.1)	1,878,772	1,561,330

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

No change.

2. ACCOUNTING CHANGES AND CORRECTION OF ERRORS

No change.

3. BUSINESS COMBINATIONS AND GOODWILL

No change.

4. DISCONTINUED OPERATIONS

No change.

5. INVESTMENTS

No change.

6. JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

No change.

7. INVESTMENT INCOME

No change.

8. DERIVATIVE INSTRUMENTS

No change.

9. INCOME TAXES

A. The components of the Company's net deferred tax asset are as follows:

		September 30, 2008		December 31, 2007
		(in thousands)		
Total of gross deferred tax assets	\$	88,440		88,552
Total of deferred tax liabilities		(1)		(1)
Net deferred tax asset		88,439		88,551
Deferred tax asset nonadmitted		(88,439)		(88,551)
Net admitted deferred tax asset		0		0
Decrease in nonadmitted asset	\$	(112)		

C2. The change in net deferred income taxes is comprised of the following:

		September 30, 2008		December 31, 2007		Change
		(in thousands)				
Total deferred tax assets	\$	88,440		88,552	\$	(112)
Total deferred tax liabilities		(1)		(1)		0
Net deferred tax asset	\$	88,439		88,551		(112)
Tax effect of unrealized gains (losses)						0
Changes in net deferred income tax					\$	(112)

NOTES TO FINANCIAL STATEMENTS

- D. The provision for Federal and foreign income taxes incurred plus the change in deferred income taxes is different from that which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

		September 30, 2008
		(in thousands)
Provision computed at statutory rate	\$	102
Prepaid assets		10
Total	\$	112
Federal and foreign income taxes incurred	\$	0
Change in net deferred income taxes		112
Total statutory income taxes	\$	112

F. No change.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

No change.

11. DEBT

No change.

12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

No change.

13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS

No change.

14. CONTINGENCIES

No change

15. LEASES

No change.

16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

No change.

17. SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

No change.

18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS

No change.

NOTES TO FINANCIAL STATEMENTS

19. **DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS**
No change.
20. **OTHER ITEMS**
No change.
21. **EVENTS SUBSEQUENT**
No change.
22. **REINSURANCE**
No change.
23. **RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION**
No change.
24. **CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES**
No change.
25. **INTERCOMPANY POOLING ARRANGEMENTS**
No change.
26. **STRUCTURED SETTLEMENTS**
No change.
27. **HEALTH CARE RECEIVABLES**
No change.
28. **PARTICIPATING POLICIES**
No change.
29. **PREMIUM DEFICIENCY RESERVES**
No change.
30. **HIGH DEDUCTIBLES**
No change.
31. **DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSE**
No change.
32. **ASBESTOS/ENVIRONMENTAL RESERVES**
No change.
33. **SUBSCRIBER SAVINGS ACCOUNT**
No change.
34. **MULTIPLE PERIL CROP INSURANCE**
No change.

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

**PART 1 - COMMON INTERROGATORIES
GENERAL**

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 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. Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
If yes, complete the Schedule Y - Part 1 - organizational chart.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide the name of 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.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [] NA [X]
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2005
- 6.2 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. 12/31/2005
- 6.3 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). 07/11/2007
- 6.4 By what department or departments?
Illinois.....
- 6.5 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 [] NA []
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] NA []
- 7.1 Has this 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]
- 7.2 If yes, give full information:
.....
- 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 Office of Thrift Supervision (OTS), 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 OTS	6 FDIC	7 SEC

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

- 9.1 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 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.
- 9.11 If the response to 9.1 is No, please explain:
.....
- 9.2 Has the code of ethics for senior managers been amended?..... Yes No
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
.....
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?..... Yes No
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).
.....

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?..... Yes No
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:..... \$

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)..... Yes No
- 11.2 If yes, give full and complete information relating thereto:
.....
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$0
13. Amount of real estate and mortgages held in short-term investments: \$0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?..... Yes No
- 14.2 If yes, please complete the following:

	1		2
	Prior Year-End Book/Adjusted Carrying Value		Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$		\$
14.22 Preferred Stock	\$		\$
14.23 Common Stock	\$		\$
14.24 Short-Term Investments	\$		\$
14.25 Mortgage Loans on Real Estate	\$		\$
14.26 All Other	\$		\$
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0		\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$		\$

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?..... Yes No
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?..... Yes No
If no, attach a description with this statement.

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

16. Excluding items in Schedule E, 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 3, III Conducting Examinations, G - Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [X] No []

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

1 Name of Custodian(s)	2 Custodian Address
BNY Mellon Trust Company of Illinois.....	209 W. Jackson Blvd., Suite 800, Chicago, IL 60606.....

16.2 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)

16.3 Have there been any changes, including name changes in the custodian(s) identified in 16.1 during the current quarter?

Yes [X] No []

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

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
BNY Midwest Trust Company.....	BNY Mellon Trust Company of Illinois.....	07/01/2008.....	Name Change.....

16.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
109875.....	Asset Allocation & Management Company, L.L.C.....	30 North LaSalle St., 35th Floor, Chicago, IL 60602.....

17.1 Have all the filing requirements of the *Purposes and Procedures Manual* of the NAIC Securities Valuation Office been followed?

Yes [X] No []

17.2 If no, list exceptions:

.....

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted.)

PART 2

PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [] No [X] NA []

If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [] No [X]

If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [] No [X]

3.2 If yes, give full and complete information thereto.
.....

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see annual statement instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? Yes [] No [X]

4.2 If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
.....
.....
TOTAL			0	0	0	0	0	0	0	0

SCHEDULE F—CEDED REINSURANCE

Showing all new reinsurers - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Name of Reinsurer	4 Location	5 Is Insurer Authorized? (Yes or No)
		AFFILIATES		
		US INSURERS		
		POOLS AND ASSOCIATIONS		
		ALL OTHER INSURERS		
NONE				

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

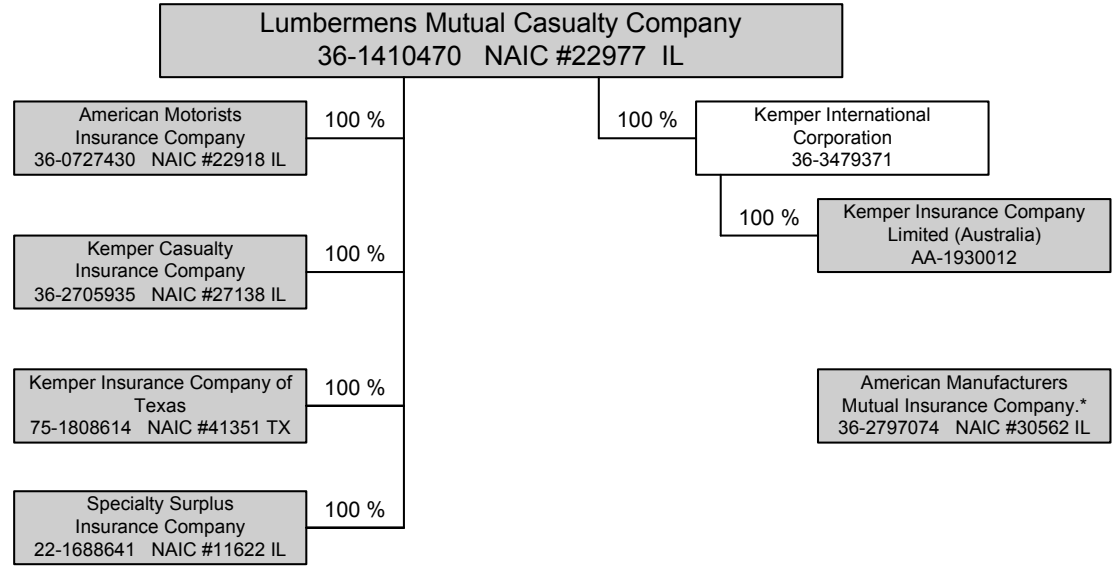
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

	1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid		
		2	3	4	5	6	7	
States, etc.	Active Status	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	
1. Alabama	AL	L	(2,577)	6,092	78,377	380,483	921,008	562,823
2. Alaska	AK	L	2,054	9,023	429	(1)	(865)	112,366
3. Arizona	AZ	L	284	7,220	322,346	186,702	3,706,511	4,804,396
4. Arkansas	AR	L	(26)	0	1,159,000	3,847,461	4,679,811	5,490,030
5. California	CA	L	207,928	218,503	11,557,249	13,249,906	34,412,178	45,809,865
6. Colorado	CO	L	170	11,650	180,741	2,125,313	507,274	673,760
7. Connecticut	CT	L	3,314	10,931	1,288,048	1,553,476	5,049,626	6,116,801
8. Delaware	DE	L	1,757	2,381	76,062	214,404	1,778,596	1,568,576
9. District of Columbia	DC	L	(26)	(61)	78,019	(35,472)	565,833	482,748
10. Florida	FL	N	16,685	87,741	1,146,779	923,467	4,942,330	4,399,064
11. Georgia	GA	L	(1,427)	27,531	298,681	163,859	2,452,975	2,788,949
12. Hawaii	HI	L	(13,676)	(191)	10,309	(12,454)	30,889	130,907
13. Idaho	ID	L	1,132	1,270	0	0	(66)	(9,274)
14. Illinois	IL	L	38,248	52,872	961,218	4,335,424	3,770,416	4,895,134
15. Indiana	IN	L	974	1,414	600,890	87,367	132,923	967,730
16. Iowa	IA	L	185,296	8,782	464,583	132,527	876,759	927,936
17. Kansas	KS	L	1,111	4,075	50,449	56,985	49,667	213,677
18. Kentucky	KY	L	593	450	254,829	225,617	1,927,249	2,210,836
19. Louisiana	LA	L	3,564	4,953	233,565	284,441	470,090	939,634
20. Maine	ME	L	92	(229)	69,135	19,004	553,447	634,202
21. Maryland	MD	L	(13,518)	(3,257)	921,748	877,698	762,027	1,778,351
22. Massachusetts	MA	L	(58,317)	(80,743)	337,660	712,978	6,264,031	8,574,525
23. Michigan	MI	L	5,988	14,749	304,477	847,366	5,825,937	5,005,126
24. Minnesota	MN	L	91,965	20,382	473,377	945,426	1,189,302	1,271,529
25. Mississippi	MS	L	(725)	2,273	47,321	593,417	296,000	1,042,311
26. Missouri	MO	L	(31,995)	2,131	198,974	134,792	1,280,223	1,511,594
27. Montana	MT	L	6,729	1,920	774,836	344,897	22,455	934,406
28. Nebraska	NE	L	2,501	6,095	67,412	133,382	831,690	906,520
29. Nevada	NV	L	10,258	2,650	38,890	1,490,101	437,842	764,720
30. New Hampshire	NH	L	1,855	7,286	37,699	408,706	1,200,047	1,233,094
31. New Jersey	NJ	L	9,947	53,721	946,368	1,088,530	5,835,095	5,338,596
32. New Mexico	NM	L	(2,651)	6,213	127,259	81,328	392,945	542,609
33. New York	NY	L	348,587	338,999	7,890,379	10,560,113	40,847,960	49,854,419
34. North Carolina	NC	L	(111,406)	6,738	1,237,046	954,554	866,408	1,352,718
35. North Dakota	ND	L	18	11	0	0	(44)	(2,806)
36. Ohio	OH	L	3,331	2,850	637,922	613,201	2,130,357	2,221,747
37. Oklahoma	OK	L	0	0	111,742	41,074	408,414	588,918
38. Oregon	OR	L	52,999	16,849	210,430	187,385	2,051,987	2,356,269
39. Pennsylvania	PA	L	(2,115)	(30,480)	2,943,777	2,629,180	13,365,496	7,626,945
40. Rhode Island	RI	L	938	645	34,452	97,394	259,092	7,199
41. South Carolina	SC	L	372	(807)	969,735	(79,961)	1,183,792	1,463,285
42. South Dakota	SD	L	(175,500)	224	26,025	89,402	232,869	312,568
43. Tennessee	TN	L	7,593	10,075	144,291	142,189	1,531,806	1,728,559
44. Texas	TX	L	401	(3,654)	821,462	845,343	3,442,323	3,622,720
45. Utah	UT	L	492	4,133	4,929	46	13,741	88,259
46. Vermont	VT	L	59	(365)	95,410	140,549	432,928	786,761
47. Virginia	VA	L	5,096	26,283	328,259	239,586	2,502,348	2,830,211
48. Washington	WA	L	(3,155)	220	216,847	94,409	138,045	527,374
49. West Virginia	WV	L	214	344	0	200,000	(2,324)	(12,272)
50. Wisconsin	WI	L	6,469	13,355	363,174	690,122	720,137	758,853
51. Wyoming	WY	L	3,161	105	0	0	(33)	(1,575)
52. American Samoa	AS	N	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0
57. Canada	CN	N	0	0	0	0	0	0
58. Aggregate Other Alien	OT	XXX	4,692	1,328	0	0	0	(1,389)
59. Totals	(a) 50		609,753	874,680	39,142,610	52,841,716	161,289,547	188,732,304
DETAILS OF WRITE-INS								
5801. Europe	XXX		0	0	0	0	0	(643)
5802. Asia	XXX		0	0	0	0	0	(746)
5803. Africa	XXX		4,692	1,328	0	0	0	0
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0
5899. Totals (Lines 5801 through 5803 plus 5898) (Line 58 above)	XXX		4,692	1,328	0	0	0	(1,389)

(a) Insert the number of L responses except for Canada and Other Alien.

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



* American Manufacturers Mutual Insurance Company is an affiliated mutual company.
Insurers are identified by shaded boxes. Percentages show common stock ownership as of 9/30/2008.

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire	2,366	1,394	58.9	43.0
2. Allied Lines	650	422	64.9	259.3
3. Farmowners multiple peril			0.0	0.0
4. Homeowners multiple peril	(690)	(164,571)	23,850.9	8,926.7
5. Commercial multiple peril		6,284,588	0.0	(43,550.5)
6. Mortgage guaranty			0.0	0.0
8. Ocean marine		675	0.0	(48.4)
9. Inland marine	(149)	(201,175)	135,016.8	43.2
10. Financial guaranty			0.0	0.0
11.1 Medical malpractice - occurrence			0.0	0.0
11.2 Medical malpractice - claims-made			0.0	0.0
12. Earthquake	1,371	26	1.9	1.5
13. Group accident and health			0.0	0.0
14. Credit accident and health			0.0	0.0
15. Other accident and health			0.0	0.0
16. Workers' compensation	225,746	17,140,863	7,593.0	4,127.2
17.1 Other liability - occurrence	(60,854)	2,282,507	(3,750.8)	114,784.4
17.2 Other liability - claims-made		98,279	0.0	0.0
18.1 Products liability - occurrence	5,211	1,264,252	24,261.2	(100,011.7)
18.2 Products liability - claims-made			0.0	0.0
19.1,19.2 Private passenger auto liability	(192)	(493,221)	256,885.9	(1,142,108.7)
19.3,19.4 Commercial auto liability	9,256	142,830	1,543.1	222,172.0
21. Auto physical damage	(72)	55,604	(77,227.8)	(2,311,070.0)
22. Aircraft (all perils)			0.0	0.0
23. Fidelity		(2,225)	0.0	0.0
24. Surety	484,853	544,790	112.4	(258.7)
26. Burglary and theft			0.0	0.0
27. Boiler and machinery			0.0	0.0
28. Credit			0.0	0.0
29. International			0.0	0.0
30. Warranty			0.0	0.0
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business	0	0	0.0	0.0
35. TOTALS	667,496	26,955,038	4,038.2	2,322.9
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0.0	0.0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1	2	3
	Current Quarter	Current Year to Date	Prior Year Year to Date
1. Fire	0	3,202	(4,568)
2. Allied Lines	0	879	(1,306)
3. Farmowners multiple peril	0		0
4. Homeowners multiple peril	(433)	(690)	(1,920)
5. Commercial multiple peril	0		(2,182)
6. Mortgage guaranty	0		0
8. Ocean marine	0		258
9. Inland marine	(156)	(111)	(2)
10. Financial guaranty	0		0
11.1 Medical malpractice - occurrence	0		0
11.2 Medical malpractice - claims-made	0		0
12. Earthquake	0	2,005	(2,169)
13. Group accident and health	0		0
14. Credit accident and health	0		0
15. Other accident and health	0		0
16. Workers' compensation	89,724	225,751	502,180
17.1 Other liability - occurrence	2,172	(60,848)	7,606
17.2 Other liability - claims-made	0		0
18.1 Products liability - occurrence	0	5,211	6,904
18.2 Products liability - claims-made	0		0
19.1,19.2 Private passenger auto liability	14	(192)	216
19.3,19.4 Commercial auto liability	835	9,256	719
21. Auto physical damage	(94)	(72)	2
22. Aircraft (all perils)	0		0
23. Fidelity	0		0
24. Surety	124,503	425,362	368,942
26. Burglary and theft	0		0
27. Boiler and machinery	0		0
28. Credit	0		0
29. International	0		0
30. Warranty	0		0
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business	0	0	0
35. TOTALS	216,565	609,753	874,680
DETAILS OF WRITE-INS			
3401.			
3402.			
3403.			
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2008 Loss and LAE Payments on Claims Reported as of Prior Year-End	2008 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2008 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11 + 12)
1. 2005 + Prior .....			.0			.0				.0	.0	.0	.0
2. 2006 .....			.0			.0				.0	.0	.0	.0
3. Subtotals 2006 + Prior .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2007 .....			.0			.0				.0	.0	.0	.0
5. Subtotals 2007 + Prior .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2008	XXX	XXX	XXX	XXX		.0	XXX			.0	XXX	XXX	XXX
7. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Prior Year-End's Surplus As Regards Policyholders	10,881										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1. 0.0	2. 0.0	3. 0.0
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4. 0.0

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STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. 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 on "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 question.



RESPONSE

- 1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?NO.....
- 2. Will Supplement A to Schedule T (Medical Malpractice Supplement) be filed with this statement?NO.....
- 3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?NO.....

Explanation:

- 1.
- 2.
- 3.

Bar Code:

- 1. 
3 0 5 6 2 2 0 0 8 4 9 0 0 0 0 0 3
- 2. 
3 0 5 6 2 2 0 0 8 4 5 5 0 0 0 0 3
- 3. 
3 0 5 6 2 2 0 0 8 3 6 5 0 0 0 0 3

OVERFLOW PAGE FOR WRITE-INS

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1 (a).....	10,997,589	2,299,106	1,824,492	(18,257)	11,265,446	10,997,589	11,453,945	10,799,420
2. Class 2 (a).....	.0	.0	.0	.0	.0	.0	.0	.0
3. Class 3 (a).....	.0	.0	.0	.0	.0	.0	.0	.0
4. Class 4 (a).....	.0	.0	.0	.0	.0	.0	.0	.0
5. Class 5 (a).....	.0	.0	.0	.0	.0	.0	.0	.0
6. Class 6 (a).....	0	0	0	0	0	0	0	0
7. Total Bonds	10,997,589	2,299,106	1,824,492	(18,257)	11,265,446	10,997,589	11,453,945	10,799,420
PREFERRED STOCK								
8. Class 1.....	.0	.0	.0	.0	.0	.0	.0	.0
9. Class 2.....	.0	.0	.0	.0	.0	.0	.0	.0
10. Class 3.....	.0	.0	.0	.0	.0	.0	.0	.0
11. Class 4.....	.0	.0	.0	.0	.0	.0	.0	.0
12. Class 5.....	.0	.0	.0	.0	.0	.0	.0	.0
13. Class 6.....	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	10,997,589	2,299,106	1,824,492	(18,257)	11,265,446	10,997,589	11,453,945	10,799,420

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$.....0 ; NAIC 2 \$.....0 ; NAIC 3 \$.....0 ; NAIC 4 \$.....0 ; NAIC 5 \$.....0 ; NAIC 6 \$.....0

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**STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE
COMPANY**

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
8299999 Totals	1,879,766	XXX	1,879,766	4,308	0

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	561,667	1,511,650
2. Cost of short-term investments acquired	4,970,776	11,120,430
3. Accrual of discount.....	0	2,606
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	0	0
6. Deduct consideration received on disposals.....	3,652,677	12,073,019
7. Deduct amortization of premium.....	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	1,879,766	561,667
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	1,879,766	561,667

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

**STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE
COMPANY**

SCHEDULE E-VERIFICATION

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	999,663	0
2. Cost of cash equivalents.....	0	2,990,799
3. Accrual of discount.....	338	8,863
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	0	0
6. Deduct consideration received on disposals.....	1,000,000	2,000,000
7. Deduct amortization of premium.....	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	0	999,663
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	0	999,663

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator ^(a)
52108H-FL-3	LBUBS 2001-C3 A2		09/22/2008	WACHOVIA BANK		509,375	500,000	1,238	1FE
4599999	- Total - Bonds - Industrial, Misc.					509,375	500,000	1,238	XXX
6099997	- Total - Bonds - Part 3					509,375	500,000	1,238	XXX
6099999	- Total - Bonds					509,375	500,000	1,238	XXX
6599999	- Total - Preferred Stocks					0	XXX	0	XXX
7299999	- Total - Common Stocks					0	XXX	0	XXX
7399999	- Total - Preferred and Common Stocks					0	XXX	0	XXX
7499999 - Totals						509,375	XXX	1,238	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

E04

STATEMENT AS OF SEPTEMBER 30, 2008 OF THE AMERICAN MANUFACTURERS MUTUAL INSURANCE COMPANY

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Maturity Date	NAIC Designation or Market Indicator (a)	
313946-R8-8	FHR 2654 OY		09/01/2008	MBS PAYDOWN		52,411	52,411	52,075	52,345	.0	.66	.0	.66	.0	52,411	.0	.0	.0	1,563	12/01/2010	1FE	
31394H-FV-8	FHR 2660 ML		08/01/2008	MBS PAYDOWN		37,037	37,037	36,540	36,421	.0	616	.0	616	.0	37,037	.0	.0	.0	789	08/01/2008	1FE	
31394L-U7-5	FHR 2707 ON		09/01/2008	MBS PAYDOWN		73,439	73,439	72,510	72,675	.0	764	.0	764	.0	73,439	.0	.0	.0	1,958	01/01/2009	1FE	
31394X-EB-8	FHR 2781 TX		09/01/2008	MBS PAYDOWN		49,459	49,459	48,196	48,749	.0	711	.0	711	.0	49,459	.0	.0	.0	895	04/01/2009	1FE	
31395F-TQ-7	FHR 2857 TE		09/01/2008	MBS PAYDOWN		50,564	50,564	50,153	50,354	.0	210	.0	210	.0	50,564	.0	.0	.0	1,339	11/01/2009	1FE	
31395M-G7-8	FHR 2937 JC		09/01/2008	MBS PAYDOWN		32,424	32,424	32,201	32,310	.0	113	.0	113	.0	32,424	.0	.0	.0	1,065	10/01/2009	1FE	
31395P-DP-4	FHR 2943 JB		09/01/2008	MBS PAYDOWN		79,809	79,809	80,158	.0	.0	(27)	.0	(27)	.0	79,809	.0	.0	.0	602	01/01/2010	1FE	
319999 - Bonds - Special Revenues						375,143	375,143	371,832	292,854	0	2,453	0	2,453	0	375,143	0	0	0	8,211	XXX	XXX	
12613X-CR-0	CNH 2005 - A A4B		09/15/2008	MBS PAYDOWN		49,044	49,044	48,968	.0	.0	113	.0	113	.0	49,044	.0	.0	.0	1,215	01/15/2009	1FE	
161505-DK-5	CCMSC 1999-2 A2		09/01/2008	MBS PAYDOWN		2,941	2,941	3,034	.0	.0	(25)	.0	(25)	.0	2,941	.0	.0	.0	105	11/01/2009	1FE	
201728-DP-4	CMAC 1998-C2 C		08/01/2008	MBS PAYDOWN		221,435	221,435	221,193	.0	.0	260	.0	260	.0	221,435	.0	.0	.0	6,922	08/01/2008	1FE	
361849-DY-5	GMACC 1998-C2 A2		07/01/2008	MBS PAYDOWN		25,858	25,858	25,975	25,905	.0	(48)	.0	(48)	.0	25,858	.0	.0	.0	968	07/01/2008	1FE	
57117P-AD-6	MLR 2006-1A A3		09/15/2008	MBS PAYDOWN		88,368	88,368	88,810	.0	.0	(271)	.0	(271)	.0	88,368	.0	.0	.0	2,358	05/15/2009	1FE	
655356-JF-1	NASC 1998-D6 A1B		09/11/2008	MBS PAYDOWN		6,875	6,875	6,940	6,982	.0	(107)	.0	(107)	.0	6,875	.0	.0	.0	283	04/11/2009	1FE	
92922F-JF-6	WAMU 2003-AR11 A6		08/01/2008	MBS PAYDOWN		500,000	500,000	498,438	.0	.0	1,563	.0	1,563	.0	500,000	.0	.0	.0	9,630	08/01/2008	1FE	
92927F-AA-1	WINW 2006-A A		09/15/2008	MBS PAYDOWN		41,869	41,869	42,012	17,425	.0	(48)	.0	(48)	.0	41,869	.0	.0	.0	1,328	05/15/2010	1FE	
459999 - Bonds - Industrial and Miscellaneous						936,389	936,389	935,369	50,313	0	1,438	0	1,438	0	936,389	0	0	0	22,809	XXX	XXX	
609997 - Bonds - Part 4						1,311,533	1,311,533	1,307,201	343,166	0	3,891	0	3,891	0	1,311,533	0	0	0	31,020	XXX	XXX	
609999 - Total - Bonds						1,311,533	1,311,533	1,307,201	343,166	0	3,891	0	3,891	0	1,311,533	0	0	0	31,020	XXX	XXX	
659999 - Total - Preferred Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
729999 - Total - Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
739999 - Total - Preferred and Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
749999 Totals						1,311,533	XXX	1,307,201	343,166	0	3,891	0	3,891	0	1,311,533	0	0	0	0	31,020	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

E05

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule E - Part 2 - Cash Equivalents
NONE