# **ANNUAL STATEMENT**

### OF THE

SAN DIEGO INSURANCE COMPANY				
of	SAN DIEGO			
in the state of	CALIFORNIA			

# **TO THE**

**Insurance Department** 

**OF THE** 

FOR THE YEAR ENDED

**December 31, 2010** 

PROPERTY AND CASUALTY



### **ANNUAL STATEMENT**

For the Year Ended December 31, 2010 OF THE CONDITION AND AFFAIRS OF THE

San Diego Insurance Company

NAIC Group Code 0111	0111 NAIC Company Code	e 10837 Employer's ID	Number 33-0763208
(Current Period)  Organized under the Laws of California	(Prior Period)	ate of Domicile or Port of Entry Califo	ornia
Country of Domicile United States of Am			
Incorporated/Organized:	July 10, 1997	Commenced Business	August 22, 1997
Statutory Home Office 525 B Street	(Street and Number)	,,	101 or Town, State and Zip Code)
Main Administrative Office: 525 B Stree	t	(Obsert and Niveless)	
San Diego,	CA 92101	(Street and Number) 619-744-6000	
	(City or Town, State and Zip Code)	(Area Code) (Telepho	ne Number)
Mail Address: 175 Berkeley Street	(Street and Number or P.O. Box)	, Boston, MA 02116	or Town, State and Zip Code)
Primary Location of Books and Records:	175 Berkeley Street	Boston, MA 02116	617-357-9500
Internet Web Site Address www.LibertyMui	(Street and Number)	(City or Town, State and Zip Code)	(Area Code) (Telephone Number)
Statutory Statement Contact: Pamela He	·	617-357-9500 x44689	
Statutani Ci	(Name)	(Area Code) (Telepho	ne Number) (Extension)
Statutory.Co	ompliance@LibertyMutual.com (E-Mail Address)	<del> </del>	617-574-5955 (Fax Number)
	OFFIC	CERS	
	Chairman of the	Board and CEO	
	Edmund Fra	ncis Kelly#	
1. David Henry L	Name	<b>Title</b> President	
2. Dexter Robert I	-	Vice President and Secretary	
3. Laurance Henr	y Soyer Yahia #	Vice President and Treasurer	
	VICE-PRE	SIDENTS	
Name	Title	Name	Title
Anthony Alexander Fontanes	Vice President and Chief Investment Officer	Dennis James Langwell #	Vice President and Chief Financial Officer
John Derek Doyle	DIRECTORS O  Dennis James Langwell #	PR TRUSTEES  Edmund Francis Kelly #	Anthony Alexander Fontanes #
Christopher Charles Mansfield	David Henry Long #	Editional Francis Kelly #	Antiony Alexander Fortalites #
State of Massachusetts			
County of Suffolk ss			
*		fficers of said reporting entity, and that on the repo	orting period stated above, all of the herein described
			ement, together with related exhibits, schedules and
			eporting entity as of the reporting period stated above,
•	·		Accounting Practices and Procedures manual except rocedures, according to the best of their information,
* * * * * * * * * * * * * * * * * * * *	- · · · · · · · · · · · · · · · · · · ·		g with the NAIC, when required, that is an exact copy
(except for formatting differences due to electronic fili	ng) of the enclosed statement. The electronic filing n	nay be requested by various regulators in lieu of or	in addition to the enclosed statement.
(Signature)	(Sig	nature)	(Signature)
David Henry Long #		Robert Legg	Laurance Henry Soyer Yahia #
(Printed Name) 1.		ed Name) 2.	(Printed Name) 3.
President		nt and Secretary	Vice President and Treasurer
(Title)	(7)	Title)	(Title)
Subscribed and sworn to (or affirmed) before me on the	nis		
31st day of January	_ , 2011, by	1.02	inal filing C
		a. Is this an orig b. If no: 1. S	inal filing? [X] Yes [] No tate the amendment number

2. Date filed

3. Number of pages attached

### **ASSETS**

		Current Year		Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
	59,496,778		59,496,778	60,962,476
Mortgage loans on real estate (Schedule B): 3.1 First liens				
Real estate (Schedule A): 4.1 Properties occupied by the company (less \$ 0 encumbrances)				
4.2 Properties held for the production of income (less \$ 0 encumbrances)				
Cash (\$ 0 Schedule F - Part 1) cash equivalents (\$ 0				
Schedule E - Part 2), and short-term investments (\$ 5,861,155, Schedule DA)			5,861,155	5,304,871
Derivatives				
Securities lending reinvested collateral assets	2,462,547		2,462,547	
Subtotals, cash and invested assets (Lines 1 to 11)	67,820,480		67,820,480	66,267,347
Title plants less \$ 0 charged off (for Title insurers only)	432,490		432,490	455,650
Premiums and considerations:  15.1 Uncollected premiums and agents' balances in the course of collection  15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums)				
Reinsurance: 16.1 Amounts recoverable from reinsurers 16.2 Funds held by or deposited with reinsured companies				
Associate as all able salation to the salation and alone				
Current federal and foreign income tax recoverable and interest thereon				
Guaranty funds receivable or on deposit				
Electronic data processing equipment and software				
Furniture and equipment, including health care delivery assets (\$ 0)				
D : 11 ( 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Health care (\$ 0) and other amounts receivable				
Aggregate write-ins for other than invested assets				
Destructed Oall Associate (Press 40 to 05)	68 252 970		68 252 970	66,722,997
From Separate Accounts, Segregated Accounts and Protected Cell Accounts				66,722,997
				,
DETAILS OF WRITE-IN LINES				
Summary of remaining write-ins for Line 11 from overflow page				
Summary of remaining write-ins for Line 25 from overflow page				
	Stocks (Schedule D): 2.1 Preferred stocks 2.2 Common stocks Mortgage loans on real estate (Schedule B): 3.1 First liens 3.2 Other than first liens Real estate (Schedule A): 4.1 Properties occupied by the company (less \$ 0 encumbrances) 4.2 Properties held for the production of income (less \$ 0 encumbrances) 4.3 Properties held for sele (less \$ 0 encumbrances) Cash (\$ 0, Schedule E - Part 1), cash equivalents (\$ 0, Schedule E - Part 2), and short-term investments (\$ 5,861,155, Schedule DA) Contract loans (including \$ 0 premium notes) Derivatives Other invested assets (Schedule BA) Receivables for securities Securities lending reinvested collateral assets Aggregate write-ins for invested assets Subtotals, cash and invested assets (Lines 1 to 11) Title plants less \$ 0 charged off (for Title insurers only) Investment income due and accrued Premiums and considerations: 15.1 Uncollected premiums, agents' balances in the course of collection 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums) 15.3 Accrued retrospective premiums Reinsurance: 16.1 Amounts recoverable from reinsurers 16.2 Funds held by or deposited with reinsured companies 16.3 Other amounts receivable under reinsurance contracts Amounts receivable relating to uninsured plans Current federal and foreign income tax recoverable and interest thereon Net deferred tax asset Guaranty funds receivable or on deposit Electronic data processing equipment and software Furniture and equipment, including health care delivery assets (\$ 0) Net adjustment in assets and liabilities due to foreign exchange rates Receivables from parent, subsidiaries and affiliates Health care (\$ 0) and other amounts receivable Aggregate write-ins for other than invested assets Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) From Separate Accounts, Segregated Accounts and Protected Cell Accounts Total (Lines 28 and 27)	Bonds (Schedule D) Slocks (Schedule D): 2.1 Preferred stocks 2.2 Common stocks Mortgage loans on real estate (Schedule B): 3.1 First liens Real estate (Schedule A): 4.1 Properties occupied by the company (less \$ 0 encumbrances) 4.2 Properties held for the production of income (less \$ 0 encumbrances) 4.3 Properties held for the production of income (less \$ 0 encumbrances) 4.3 Properties held for sale (less \$ 0 encumbrances) 4.3 Properties held for sale (less \$ 0 encumbrances) 4.3 Properties held for sale (less \$ 0 encumbrances) 4.3 Properties held for sale (less \$ 0 encumbrances) 4.3 Properties held for sale (less \$ 0 encumbrances) 4.3 Properties held for sale (less \$ 0 encumbrances) 4.4 Properties held for the production of income (less \$ 0, schedule E - Part 2), and short-term investments (\$ 5, 6,661,155, Schedule DA) 5. Schedule E - Part 2), and short-term investments (\$ 5, 6,661,155, Schedule DA) 6. Schedule E - Part 2), and short-term investments (\$ 5, 6,661,155, Schedule DA) 7. Schedule E - Part 2), and short-term investments (\$ 1, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6,	Bonds (Schedule D) Stocia (Schedule S) Stocia (Schedule S) Stocia (Schedule S) Schedule Stocia (Schedule S) Schedule Stocia (Schedule S) Schedule E-Part 1), and short-term investments (S 5, 861.155, Schedule DA) Schedule E-Part 2), and short-term investments (S 5, 861.155, Schedule DA) Schedule Schedule SA) Schedule Schedule SA) Operatives Other invested assets (Schedule BA) Receivables for securities Scultities (Schedule BA) Receivables for securities Receivables for securities Receivables (Schedule BA) Receivables (Sch	Bonds (Schedule D) Stocks

# LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)		
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)		
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$	1,187,064	623,630
7.2		59,550	40,300
8.	Borrowed money \$ 0 and interest thereon \$ 0		
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded		
	reinsurance of \$ 0 and including warranty reserves of \$ 0)		
	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	, , , , , , , , , , , , , , , , , , , ,		
14.			
15.	Remittances and items not allocated		
16.	Provision for reinsurance (Schedule F, Part 7)		
17.			
18.	Drafts outstanding		4 4 5 4 9 7 9
19.	Payable to parent, subsidiaries and affiliates		1,151,372
20.	Derivatives		
21.		0.460.547	
22. 23.	Payable for securities lending  Liability for amounts held under uninsured plans		
25.		4,453,057	4,361,030
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		6,176,332
27.	Professional and Publishers		0,170,332
28.	Total liabilities (Lines 26 and 27)		6,176,332
29.	Aggregate write-ins for special surplus funds	0,000,007	0,170,002
30.	Common capital stock		
31.	Common capital clock	2 600 000	2 600 000
01.	Preferred capital stock	2,600,000	2,600,000
32	Preferred capital stock		
32. 33.	Preferred capital stock  Aggregate write-ins for other than special surplus funds		2,600,000
33.	Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes		
	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus	52,800,000	
33. 34.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)	52,800,000	52,800,000
33. 34. 35.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:	52,800,000 2,864,373	52,800,000
33. 34. 35.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1 0 shares common (value included in Line 30 \$ 0)	52,800,000 2,864,373	52,800,000
33. 34. 35. 36.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1 0 shares common (value included in Line 30 \$ 0)	52,800,000 2,864,373	52,800,000
33. 34. 35. 36.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	52,800,000 2,864,373	52,800,000 5,146,665
33. 34. 35. 36.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1 0 shares common (value included in Line 30 \$ 0)  36.2 0 shares preferred (value included in Line 31 \$ 0)  Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)  Totals (Page 2, Line 28, Col. 3)	52,800,000 2,864,373 58,264,373	52,800,000 5,146,665 60,546,665
33. 34. 35. 36. 37. 38.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1 0 shares common (value included in Line 30 \$ 0)  36.2 0 shares preferred (value included in Line 31 \$ 0)  Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)  Totals (Page 2, Line 28, Col. 3)	52,800,000 2,864,373 58,264,373 68,252,970	52,800,000 5,146,665 60,546,665 66,722,997
33. 34. 35. 36. 37. 38.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	52,800,000 2,864,373 58,264,373 68,252,970	52,800,000 5,146,665 60,546,665 66,722,997
33. 34. 35. 36. 37. 38. 2501. 2502.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	52,800,000 2,864,373 58,264,373 68,252,970	52,800,000 5,146,665 60,546,665 66,722,997
33. 34. 35. 36. 37. 38. 2501. 2502. 2503.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	52,800,000 2,864,373 58,264,373 68,252,970 4,448,381 4,676	52,800,000 5,146,665 60,546,665 66,722,997
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	52,800,000 2,864,373 58,264,373 68,252,970 4,448,381 4,676	52,800,000 5,146,665 60,546,665 66,722,997 4,352,132 8,898
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	52,800,000 2,864,373 58,264,373 68,252,970 4,448,381 4,676	52,800,000 5,146,665 60,546,665 66,722,997
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599.	Preferred capital stock  Aggregate write-ins for other than special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	52,800,000 2,864,373 58,264,373 68,252,970 4,448,381 4,676	52,800,000 5,146,665 60,546,665 66,722,997 4,352,132 8,898
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902.	Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) Totals (Page 2, Line 28, Col. 3)  DETAILS OF WRITE-IN LINES  Deposit liability Other liabilities  Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	52,800,000 2,864,373 58,264,373 68,252,970 4,448,381 4,676	52,800,000 5,146,665 60,546,665 66,722,997 4,352,132 8,898
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903.	Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	52,800,000 2,864,373 58,264,373 68,252,970 4,448,381 4,676	52,800,000 5,146,665 60,546,665 66,722,997 4,352,132 8,898
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998.	Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) Totals (Page 2, Line 28, Col. 3)  DETAILS OF WRITE-IN LINES  Deposit liability Other liabilities  Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)  Summary of remaining write-ins for Line 29 from overflow page	52,800,000 2,864,373 58,264,373 68,252,970 4,448,381 4,676	52,800,000 5,146,665 60,546,665 66,722,997 4,352,132 8,898
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903.	Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	52,800,000 2,864,373 58,264,373 68,252,970 4,448,381 4,676	52,800,000 5,146,665 60,546,665 66,722,997 4,352,132 8,898

3202. 3203.

3298. Summary of remaining write-ins for Line 32 from overflow page 3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)

# STATEMENT OF INCOME

		1	2
		Current Year	Prior Year
	UNDERWRITING INCOME	Current real	1 Hor Tear
1.	Premiums earned (Part 1, Line 35, Column 4)		
	DEDUCTIONS:		
	Losses incurred (Part 2, Line 35, Column 7)		
3. 4.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1) Other underwriting expenses incurred (Part 3, Line 25, Column 2)	/ 120	1,006
5.	Aggregate write-ins for underwriting deductions		1,000
6.	Total underwriting deductions (Lines 2 through 5)	4,129	1,006
7.	Net income of protected cells		(4.000)
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(4,129)	(1,006)
	INVESTMENT INCOME		
	Net investment income earned (Exhibit of Net Investment Income, Line 17)		2,283,788
10. 11.	Net realized capital gains (losses) less capital gains tax of \$ 73,805 (Exhibit of Capital Gains (Losses))  Net investment gain (loss) (Lines 9 + 10)	137,066 2,290,206	(30,603)
	OTHER INCOME	2,230,200	2,200,100
12	Net gain or (loss) from agents' or premium balances charged off (amount recovered		
12.	\$ 0 amount charged off \$ (988))	988	12,500
13.	Finance and service charges not included in premiums	900	
14.	Aggregate write-ins for miscellaneous income	(7,176)	(3,872)
15.	Total other income (Lines 12 through 14)	(6,188)	8,628
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	2,279,889	2,260,807
17.	Dividends to policyholders		2,200,001.
	Net income, after dividends to policyholders, after capital gains tax and before		
40	all other federal and foreign income taxes (Line 16 minus Line 17)		2,260,807
	Federal and foreign income taxes incurred  Net income (Line 18 minus Line 19) (to Line 22)	4 554 404	876,478 1,384,329
20.	CAPITAL AND SURPLUS ACCOUNT	1,001,404	1,004,020
21	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	60,546,665	E0 214 E26
21.	Net income (from Line 20)	1,551,494	59,214,536 1,384,329
23.	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ 0		
25.	Change in net unrealized foreign exchange capital gain (loss)	(40.050)	(407 200)
26. 27	Change in net deferred income tax  Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3)		(167,300) 115,100
28.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3)  Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		110,100
29.	Change in surplus notes		
30.	Surplus (contributed to) withdrawn from protected cells		
31. 32	Cumulative effect of changes in accounting principles  Capital changes:		
υZ.	32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend)		
	32.3 Transferred to surplus		
33.	Surplus adjustments: 33.1 Paid in		
	33.1 Paid in 33.2 Transferred to capital (Stock Dividend)		
	33.3 Transferred from capital		
34.	Net remittances from or (to) Home Office		
35. 36	Dividends to stockholders  Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)	(3,814,536)	
36. 37.	Aggregate write-ins for gains and losses in surplus		
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	(2,282,292)	1,332,129
39.	Surplus as regards policyholders, as of December 31 current year (Lines 21 plus Line 38) (Page 3, Line 37)	58,264,373	60,546,665

	DETAILS OF WRITE-IN LINES		
0501.			
0502.			
0503.			
0598.	Summary of remaining write-ins for Line 05 from overflow page		
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)		
1401.	Other income /(expense)	(7,176)	(3,872)
1402.			
1403.			
1498.	Summary of remaining write-ins for Line 14 from overflow page		
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	(7,176)	(3,872)
3701.			
3702.			
3703.			
3798.	Summary of remaining write-ins for Line 37 from overflow page		
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		

### **CASH FLOW**

		1	2
	Cash from Operations	Current Year	Prior Year
1.	Premiums collected net of reinsurance		
2.		2,319,991	2,331,503
3.	Miscellaneous income	(6,188)	8,628
4.	Total (Lines 1 through 3)	2,313,803	2,340,131
5.	Benefit and loss related payments		
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.		4,129	1,006
8.			
9.	3 · · · · · · · · · · · · · · · · · · ·	238,767	914,08
10.	3 /	242,896	915,087
11.	Net cash from operations (Line 4 minus Line 10)	2,070,907	1,425,044
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	22,741,428	21,327,210
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains (or losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	22,741,428	21,327,210
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	21,208,550	45,849,986
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets	2,462,547	
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)	23,671,097	45,849,986
14.	Net increase (decrease) in contract loans and premium notes		
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(929,669)	(24,522,776
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders	2 044 520	
	16.6 Other cash provided (applied)	3,229,582	(9,710,373
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to Line 16.4 minus Line 16.5		
	plus Line 16.6)	(584,954)	(9,710,373
	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)	556,284	(32,808,105
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	5,304,871	38,112,976
	19.2 End of year (Line 18 plus Line 19.1)	5,861,155	5,304,871

Note: Supplemental disclosures of cash flow information for non-cash transactions:	
20.0001	
20.0002	
20.0003	

# NONE Underwriting and Investment Exhibit - Part 1

# NONE Underwriting and Investment Exhibit - Part 1A

# NONE Underwriting and Investment Exhibit - Part 1B

# NONE Underwriting and Investment Exhibit - Part 2

# NONE Underwriting and Investment Exhibit - Part 2A

# UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		Loss Adjustment	Other Underwriting	Investment	
		Expenses	Expenses	Expenses	Total
1.	Claim adjustment services:				
	1.1 Direct				
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded				
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)				
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent				
	2.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent				
	2.4 Contingent—direct				
	2.5 Contingent—reinsurance assumed				
	2.6 Contingent—reinsurance ceded				
	2.7 Policy and membership fees				
	2.8 Net commission and brokerage (2.1+2.2-2.3+2.4+2.5-2.6+2.7)				
3.	Allowances to manager and agents				1
	Advertising				553
5.	Boards, bureaus and associations			18	18
	Surveys and underwriting reports				636
7.	Audit of assureds' records				
	Salary and related items:				
٥.	8.1 Salaries			63,341	63,341
				4,485	4,485
a	8.2 Payroll taxes Employee relations and welfare			4,804	4,804
				534	534
	D'and and form				
				1 305	1 305
	Travel and travel items			1,395 1,629	1,395 1,629
	Rent and rent items Equipment			1,761	1,761
				1 154	1
	Cost or depreciation of EDP equipment and software			216	040
	Printing and stationery  Postage, telephone and telegraph, exchange and express			2,136	2,136
	Land and andthe				
	Legal and auditing			3,036	3,036
	Totals (Lines 3 to 18)			85,699	85,699
20.	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty				
	association credits of \$ 0				
	20.2 Insurance department licenses and fees		2,029		2,029
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)		2,100		2,100
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				4,129
	Real estate expenses				
	Real estate taxes				
	Reimbursements by uninsured plans				
	Aggregate write-ins for miscellaneous expenses			14,192	14,192
25.				99,891	(a) 104,020
	Less unpaid expenses—current year				
	Add unpaid expenses—prior year				
29.	Amounts receivable relating to uninsured plans, current year				
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)		4,129	99,891	104,020

DETAILS OF WRITE-IN LINES			
2401. Other expenses		14,192	14,192
2402.	 		
2403.	 		
2498. Sum of remaining write-ins for Line 24 from overflow page			
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)		14,192	14,192

<sup>(</sup>a) Includes management fees of \$ 99,891 to affiliates and \$ 0 to non-affiliates.

# **EXHIBIT OF NET INVESTMENT INCOME**

		1 Collected During Year	2 Earned During Year
1.	U.S. Government bonds	(a) 1,310,514	1,239,548
1.1	Bonds exempt from U.S. tax	(a)	l
1.2	Other bonds (unaffiliated)	(a) 953,465	1,001,022
1.3	Bonds of affiliates	(a)	1
2.1	Preferred stocks (unaffiliated)	(b)	1
2.11	Preferred stocks of affiliates	(b)	1
2.2	Common stocks (unaffiliated)		1
2.21	Common stocks of affiliates		1
3.	Mortgage loans	(c)	1
4.	Real estate	(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 11,399	11,648
7.	Derivative instruments	. (f)	1
8.	Other invested assets		1
9.	Aggregate write-ins for investment income	811	811
10.	Total gross investment income	2,276,189	2,253,029
11.	Investment expenses		(g) 99,891
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		.(i)
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		99,891
17.	Net investment income (Line 10 minus Line 16)		2,153,138

	DETAILS OF WRITE-IN LINES		
0901.	Miscellaneous Income/(Expense)	811	811
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 09 from overflow page		
0999.	Totals (Lines 0901 through 0903) plus 0998 (Line 09 above)	811	811
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 through 1503) plus 1598 (Line 15 above)		

(a)	Includes \$	48,588 accrual of discount less \$	192,279 amortization of premium and less \$	37,103 paid for accrued interest on purchases.
(b)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued dividends on purchases.
(c)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(d)	Includes \$	0 for company's occupancy of its o	own buildings; and excludes \$ 0 inte	erest on encumbrances.
(e)	Includes \$	528 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(f)	Includes \$	0 accrual of discount less \$	0 amortization of premium.	
(g)	Includes \$	0 investment expenses and \$	0 investment taxes, licenses and fees, e	excluding federal income taxes,
	attributable to	segregated and Separate Accounts.		
(h)	Includes \$	0 interest on surplus notes and \$	0 interest on capital notes.	
(i)	Includes \$	0 depreciation on real estate and	0 depreciation on other invested a	ssets.

# **EXHIBIT OF CAPITAL GAINS (LOSSES)**

		1	2	3	4	5
		Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	187,259		187,259		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	23,612		23,612		
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)					
2.21	Common stocks of affiliates					
	Mortgage loans					
1	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	210,871		210,871		

	DETAILS OF WRITE-IN LINES			
0901.				
0902.				
0903.			 	
0998.	Summary of remaining write-ins for Line 09 from overflow page		 	
0999.	Totals (Lines 0901 through 0903) plus 0998 (Line 09 above)			

### NONE Exhibit of Nonadmitted Assets

#### Note 1 - Summary of Significant Accounting Policies

#### A. Accounting Practices

Effective January 1, 2001, and subject to any deviations prescribed or permitted by the State of California, the accompanying financial statements of San Diego Insurance Company (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners ("NAIC") *Accounting Practices and Procedures Manual* ("APP Manual").

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

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, revenues, and expenses. It also requires estimates in the disclosure of contingent assets and liabilities. Actual results could differ from these estimates.

#### C. Accounting Policies

Premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro-rata methods. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company applies the following accounting policies, where applicable:

- Short term investments are carried at cost, adjusted where appropriate for amortization of premium or discount, or fair value as specified by the Purposes and Procedures Manual of the NAIC Securities Valuation Office (SVO Manual).
- 2. Bonds are carried at cost, adjusted where appropriate for amortization of premium or discount, or fair value as specified by the SVO Manual.
- 3. Common stocks are carried at fair value, except that investments in stocks of subsidiaries, controlled and affiliated ("SCA") companies are carried according to Note 1C(7).
- 4. Preferred stocks are carried at cost or fair value as specified by the SVO Manual. Preferred stocks of SCA companies are carried according to Note 1C(7).
- 5. Mortgage loans are carried at unpaid principal balances, less impairments as specified by the SVO Manual.
- 6. Mortgage backed/asset backed securities are carried at amortized cost or fair value based on guidance in the SVO Manual. Prepayment assumptions for mortgage backed/asset backed securities are updated monthly using the Bloomberg data service. The retrospective adjustment method is used to value all mortgage backed/asset backed securities.
- 7. Investments in SCA companies are carried in accordance with SSAP No. 97, *Investment in Subsidiaries*, Controlled Entities and Affiliates, and the SVO Manual.
- 8. Investments in joint ventures, partnerships, and limited liability companies are carried in accordance with SSAP No. 48, *Joint Ventures, Partnerships and Limited Liability Companies*, and the SVO Manual.
- 9. Derivatives Securities, refer to Note 8.
- 10. Investment income is anticipated as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, *Property Casualty Contracts Premiums*. Refer to Note 30.
- 11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates, and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods, for making such estimates and for establishing the resulting liability, are continually reviewed and follow current standards of practice. Any adjustments to the liability are reflected in the period that they are determined.
- 12. The Company did not change its capitalization policy in 2010.
- 13. The Company has no pharmaceutical rebate receivables.

#### Note 2 - Accounting Changes and Correction of Errors

A. There were no material changes in accounting principles or corrections of errors during the year.

#### Note 3 - Business Combinations and Goodwill

A. Statutory Purchase Method

The Company did not enter into any statutory purchases during the year.

#### B. Statutory Mergers

The Company did not enter into any statutory mergers during the year.

#### C. Impairment Loss

The Company did not recognize an impairment loss during the period.

#### Note 4 - Discontinued Operations

The Company has no discontinued operations.

#### Note 5 - Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

The Company does not invest in Mortgage Loans.

B. Troubled Debt Restructuring for Creditors

Not applicable

C. Reverse Mortgages

The Company has no reverse mortgages.

- D. Loaned Backed Securities
  - 1. Prepayment speed assumptions are updated monthly with data sourced from the Bloomberg data service.
  - 2. All Loaned Backed Securities with a recognized other-than-temporary impairment disclosed in the aggregate during 2010 as of December 31, 2010: None
  - 3. Each Loaned Backed Security with a recognized other-than-temporary impairment held by the Company at December 31, 2010: None
  - 4. All impaired Loaned Backed Securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss as of December 31, 2010:

	1	2
	Less Than 12 Months	Greater Than 12 Months
Gross Unrealized Loss	(33,305)	-
Fair Value of Securities with Unrealized Losses	7,159,575	-

- The Company reviews fixed income securities for impairment on a quarterly basis. Securities are reviewed for both quantitative and qualitative considerations including, but not limited to: (a) the extent of the decline in fair value below book value, (b) the duration of the decline, (c) significant adverse changes in the financial condition or near term prospects of the investment or issuer, (d) significant change in the business climate or credit ratings of the issuer, (e) general market conditions and volatility, (f) industry factors, and (g) the past impairment of the security holding or the issuer. If the Company believes a decline in the value of a particular investment is temporary, the decline is recorded as an unrealized loss in policyholders' equity. If the decline is believed to be "other-than-temporary," and the Company believes it will not be able to collect all cash flows due on its fixed income securities, then the carrying value of the investment is written down to the expected cash flow amount and a realized loss is recorded as a credit impairment.
- E. Repurchase Agreements and Securities Lending
  - 1. The Company did not enter into any repurchase agreements during the year.
  - 2. The Company maintained collateral for loaned securities.
    - (1) For loaned securities, Company policies require a minimum of 102% of the fair value of securities loaned to be maintained as collateral. Cash collateral received is invested in short-term investments.
    - (2) The Company has not pledged any of its assets as collateral.
    - (3) Sources of collateral are cash and securities. Cash collateral is reinvested by the lending agent in short term securities.

3. Aggregate Amount of Contractually open cash collateral positions:

Aging of Collateral	Total Fair Value
Open	\$ 2,462,913
30 Days or Less	-
31 to 60 Days	-
61 to 90 Days	-
Greater than 90 Days	-
Sub-Total	2,462,913
Securities Received	873,094
Total Collateral Received	\$ 3,336,007

4. Securities Lending Transactions Administered by an Affiliated Agent

The Company's security lending transactions are not administered by an affiliate agent.

- 5. Collateral Reinvestment
  - a. Aggregate Amount Cash Collateral Reinvested

	Amortized Cost	Fair Value
Open		
30 Days or Less	\$ 1,318,639	\$ 1,318,668
31 to 60 Days	1,059,408	1,059,457
61 to 90 Days	84,758	84,787
90 to 120 Days	-	-
121 to 180 Days	-	-
181 to 365 Days	-	-
1 to 2 Years	-	-
2 to 3 Years	-	-
Greater than 3 Years	-	-
Subtotal	2,462,804	2,462,913
Securities Received	873,094	873,094
Total Collateral Reinvested	\$ 3,335,899	\$ 3,336,007

b. Maturity profile of the cash reinvestment program sufficiently matches loan profile with liquidity demands consistent with an open loan program.

#### F. Real Estate

The Company does not own real estate.

G. Investments in Low-Income Housing Tax Credits

The Company does not hold investments in low-income housing tax credits.

### Note 6 - Joint Ventures, Partnerships & Limited Liability Companies

A. Investments in joint ventures, partnerships and limited liability companies that exceed 10% of its admitted assets.

The Company has no investments in joint ventures, partnerships, or limited liability companies.

B. The Impairments on joint ventures, partnerships or limited liability companies

The Company does not own any investments in joint ventures, partnerships, and limited liability companies.

### Note 7 - Investment Income

A. Accrued Investment Income

The Company does not admit investment income due and accrued if amounts are over 90 days past due (over 180 days for mortgage loans in default).

B. Amounts Nonadmitted

No amounts were excluded as of December 31, 2010.

#### **Note 8 - Derivative Instruments**

The Company's investment activities do not include derivatives. However, the Company may acquire derivatives as additions to bond, common stock, or preferred stock investments. These derivatives are ancillary to the overall investment and are immaterial to the underlying investment portfolio.

#### **Note 9 - Income Taxes**

The components of the net deferred tax assets (DTAs) and liabilities (DTLs) recognized in the Company's Assets, Liabilities, Surplus and Other Funds are as follows:

	Dec	ember 31	, 2010	Dec	ember 31,	2009		Change	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
			(Col  1 + 2)			(Col  4 + 5)	(Col 1 - 4)	(Col 2- 5)	(Col  7 + 8)
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
Gross Deferred Tax Assets	150	0	150	0	13,087	13,087	150	(13,087)	(12,937)
Statutory Valuation Allowance Adjustment	0	0	0	0	0	0	0	0	0
Adjusted Gross Deferred Tax Assets	150	0	150	0	13,087	13,087	150	(13,087)	(12,937)
Deferred Tax Liabilities	(59,280)	(420)	(59,700)	(39,387)	(14,000)	(53,387)	(19,893)	13,580	(6,313)
Net DTA (DTL)	(59,130)	(420)	(59,550)	(39,387)	(913)	(40,300)	(19,743)	493	(19,250)
Deferred Tax Assets Nonadmitted	0	0	0	0	0	0	0	0	0
Net Admitted DTA (DTL)	(59,130)	(420)	(59,550)	(39,387)	(913)	(40,300)	(19,743)	493	(19,250)

The Company has not elected to admit additional DTAs pursuant to SSAP No. 10R, paragraph 10e. The current period election does not differ from the prior reporting period.

The Company has a net DTL; therefore, all DTAs and DTLs are admitted. Adjusted gross and net admitted DTAs are not impacted by tax planning strategies.

- B. The Company does not have any DTLs described in SSAP No. 10R, Income Taxes, paragraph 6d.
- C. The provisions for income taxes incurred on earnings for the years ended December 31 are:

	2010	2009
Federal	728,395	876,478
Foreign	0	0
Realized capital gains	73,805	(16,478)
Federal and foreign income taxes incurred	802,200	860,000

The Company's DTAs and DTLs result primarily from accrual of market discount.

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

	2010
Change in net deferred income tax (without unrealized gain or loss)	(19,250)
Change in tax effect of unrealized (gains) losses	0
Total change in net deferred income tax	(19,250)

- D. Effective tax rates approximate the current statutory rate of 35%.
- The amount of Federal income taxes incurred and available for recoupment in the event of future losses is \$823,000 from the current year and \$819,000 from the preceding year.

The Company has no remaining net operating loss carry forward available to offset future net income subject to Federal

The Company does not have deposits admitted under Section 6603 of the Internal Revenue Services Code.

F. The Company's Federal income tax return is consolidated with the following entities:

Access Insurance Services, Co. America First Insurance Company American Economy Insurance Company American States Insurance Company American States Lloyds Insurance Company Avomark Insurance Company (merged 2/23/2010) Berkeley Holding Company Associates, Inc. Bridgefield Casualty Insurance Company Capitol Court Corporation

Capitol Agency, Inc., The (Ohio corporation) Dissolved

11/17/2010

Cascade Disability Management, Inc. Commercial Aviation Insurance, Inc.

AMBCO Capital Corporation America First Lloyds Insurance Company American Fire & Casualty Company American States Insurance Company of Texas American States Preferred Insurance Company Barrier Ridge LLC Berkeley Management Corporation

Bridgefield Employers Insurance Company Capitol Agency, Inc., The (Arizona corporation)

Capitol Agency, Inc., The (Tennessee corporation) (Dissolved

Colorado Casualty Insurance Company

Companies Agency of New York, Inc. (Dissolved 3/3/2010)

Companies Agency of Pennsylvania, Inc. (Dissolved

9/9/2010)

Copley Venture Capital, Inc. Emerald City Insurance Agency, Inc. Excelsior Insurance Company

First National Insurance Company of America Florida State Agency, Inc. (Dissolved 8/20/2010)

Florida State Agency, Inc. (Dissolved 8/20/2010) General America Corporation of Texas

Golden Eagle Insurance Corporation Hawkeye-Security Insurance Company

Indiana Insurance Company

LEXCO Limited

Liberty Assignment Corporation Liberty Financial Services, Inc. Liberty Insurance Corporation Liberty Insurance Underwriters Inc. Liberty International Holdings Inc.

Liberty Life Holdings Inc. Liberty Management Services, Inc. Liberty Mutual Agency Corporation

Liberty Mutual Group Inc. Liberty Mutual Insurance Company Liberty Northwest Insurance Corporation

Liberty RE (Bermuda) Limited Liberty Surplus Insurance Corporation LIU Specialty Insurance Agency Inc. LM Insurance Corporation

LM Property & Casualty Insurance Company

LRE Properties, Inc.

Mid-American Fire & Casualty Company

OCASCO Budget, Inc. Ohio Casualty Corporation Open Seas Solutions, Inc.

Peerless Indemnity Insurance Company

Pilot Insurance Services, Inc. S.C. Bellevue, Inc. Safeco Corporation

Safeco Insurance Company of America Safeco Insurance Company of Indiana Safeco Lloyds Insurance Company

Safeco Properties, Inc.

San Diego Insurance Company St. James Insurance Company Ltd.

State Agency, Inc. (Wisconsin corporation) (Dissolved

8/24/2010)

Summit Consulting, Inc. of Louisiana
The First Liberty Insurance Corporation
The Ohio Casualty Insurance Company
Wausau General Insurance Company
West American Insurance Company

Winmar of the Desert, Inc. Winmar-Metro, Inc.

Consolidated Insurance Company Diversified Settlements, Inc.

Employers Insurance Company of Wausau

F.B. Beattie & Co., Inc. First State Agency Inc.

General America Corporation

General Insurance Company of America

Gulf States AIF, Inc.

Heritage-Summit HealthCare, Inc. Insurance Company of Illinois Liberty-USA Corporation Liberty Energy Canada, Inc. Liberty Hospitality Group, Inc. Liberty Insurance Holdings, Inc. Liberty International Europe Inc.

Liberty Life Assurance Company of Boston Liberty Lloyds of Texas Insurance Company

Liberty Mexico Holdings Inc.

Liberty Mutual Fire Insurance Company Liberty Mutual Holding Company Inc. Liberty Mutual Personal Insurance Company Liberty Personal Insurance Company Liberty Sponsored Insurance (Vermont) Inc.

LIH-RE of America Corporation LM General Insurance Company LM Personal Insurance Company LMHC Massachusetts Holdings Inc.

Mid-American Agency, Inc. (Dissolved 8/20/2010)

North Pacific Insurance Company

OCI Printing, Inc.

Ohio Security Insurance Company Oregon Automobile Insurance Company

Peerless Insurance Company Rianoc Research Corporation SAFECARE Company, Inc. Safeco General Agency, Inc. Safeco Insurance Company of Illinois

Safeco Insurance Company of Oregon
Safeco National Insurance Company
Safeco Surplus Lines Insurance Company

SCIT, Inc.

State Agency, Inc. (Indiana corporation) (Dissolved 8/23/2010)

Summit Consulting, Inc.
Summit Holding Southeast, Inc.
The Midwestern Indemnity Company
The Netherlands Insurance Company

The National Corporation

Wausau Business Insurance Company Wausau Underwriters Insurance Company

Winmar Company, Inc. Winmar Oregon, Inc.

The method of federal income tax allocation is subject to a written agreement. Allocation is based upon separate return calculations with credit applied for losses as appropriate. The Company has the enforceable right to recoup prior year payments in the event of future losses.

#### Note 10 - Information Concerning Parent, Subsidiaries and Affiliates

- D. All of the outstanding shares of capital stock of the Company are held by Liberty Mutual Insurance Company ("LMIC"), a Massachusetts insurance company. The ultimate parent of LMIC is Liberty Mutual Holding Company Inc., a Massachusetts company.
- B. Transactions between the Company and its affiliates are listed on Schedule Y Part 2.
- C. There have been no material transactions with the Company's affiliates during 2010.
- D. At December 31, 2010, the Company reported a net \$1,826,379 due to affiliates. In general, the terms of the inter-company arrangements require settlement at least quarterly.
- E. The Company has not made any guarantees or initiated any undertakings for the benefit of affiliates which result in a material contingent exposure of the Company's or affiliates' assets or liabilities.

F. Refer to Note 26 for information regarding inter-company reinsurance.

The Company is a party to an investment management agreement with Liberty Mutual Group Inc. ("LMGI") and a cash management agreement with Liberty Mutual Investment Advisors LLC ("LMIA"). Under these agreements, LMGI and LMIA provide services to the Company.

The Company is a party to a management services agreement with LMIC. Under the agreement, LMIC may provide services related to common management functions including, but not limited to, accounting, financial, tax and auditing, information technology and support, purchasing, payroll and employee benefits, policy administration, real estate management, legal, general administration, as well as consulting and other services as the parties may request.

There is a management services agreement with Golden Eagle Insurance Corporation ("GEIC") under which GEIC provides the Company with services of personnel and related overhead expenses.

The Company is party to a Federal Tax Sharing Agreement between LMIC and affiliates (Refer to Note 9F).

- G. The Company is a member of a holding company structure as illustrated in Schedule Y Part 1.
- H. The Company does not own shares of any upstream intermediate or ultimate parent, either directly or indirectly via a downstream subsidiary, controlled or affiliated company.
- The Company does not own investments in subsidiary, controlled or affiliated companies that exceed 10% of its admitted assets
- J. The Company does not own any investments in subsidiary, controlled or affiliated entities.
- K. The Company does not hold any investments in foreign insurance subsidiaries.
- L. The Company does not hold any investments in downstream non-insurance holding companies.

#### Note 11 - Debt

A. Debt (Including Capital Notes)

The Company has no debt, including capital notes.

B. Federal Home Loan Bank Agreements

The Company has not entered into any agreements with the Federal Home Loan Bank.

# Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

The Company does not have any direct employees and therefore, does not have any direct obligations for a defined benefit plan, deferred compensation arrangements, compensated absences or other post retirement benefit plans. Services for the operation of the Company are provided under provisions of the management services agreements as described in note 10 F.

#### Note 13 - Capital and Surplus, Shareholders' Dividend restrictions and Quasi-Reorganizations

- 1. The Company has 1,000,000 shares authorized and 26,000 issued and outstanding as of December 31, 2010. All shares have a stated par value of \$100.
- 2. Preferred Stock

Not applicable

- 3. There are no dividend restrictions.
- 4. For the year ended December 31, 2010 the Company paid an ordinary dividend to its parent in the amount of \$3,814,536.
- 5. The maximum amount of dividends that can be paid by California-domiciled insurance companies to shareholders without prior approval of the Insurance Commissioner is the greater of (a) 10% of surplus or (b) net income, subject to the availability of accumulated undistributed earnings. The maximum dividend payout that may be made without prior approval in 2011 is \$2,864,373.
- 6. The Company does not have restricted unassigned surplus.
- The Company had no advances to surplus.
- 8. The Company does not hold stock for special purposes.
- 9. The Company does not hold special surplus funds.
- 10. The portion of unassigned funds (surplus) represented by cumulative net unrealized gains and (losses) is \$0.

#### 11. Surplus Notes

Not applicable

12. Quasi re-organization (dollar impact)

Not applicable

13. Quasi re-organization (effective date)

Not applicable

#### Note 14 - Contingencies

#### A. Contingent Commitments

The Company has made no commitments, contingent commitments or guarantees on behalf of affiliates, except as indicated in Note 10E.

#### B. Assessments

The Company was not subject to guaranty fund assessments, as it did not write business in 2010.

#### C. Gain Contingencies

Not applicable

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

The Company did not have claims related extra contractual obligation losses or bad faith losses stemming from lawsuits in the current period.

#### E. All Other Contingencies

Lawsuits arise against the Company in the normal course of business. Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the financial position of the Company.

As disclosed in Note 9 F, the Company is a member of a controlled group for federal income tax purposes, and that group includes Liberty Mutual Group Inc. ("LMGI"). LMGI is the plan sponsor of the Liberty Mutual Retirement Benefit Plan, a qualified plan under federal law. Pursuant to federal law, if LMGI has not made the minimum required contributions with respect to the Liberty Mutual Retirement Benefit Plan, the Company, jointly and severally with all other members of the controlled group, would be contingently liable to make such contributions.

#### Note 15 - Leases

#### A. Lessee Leasing Arrangements

The Company has no net lease obligations (refer to Note 26).

B. Leasing as a Significant Part of Lessor's Business Activities

Leasing is not a significant part of the Company's business activities.

# $\underline{\textbf{Note 16-Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with } \underline{\textbf{Concentrations of Credit Risk}}$

The Company is not exposed to financial instruments with off-balance sheet risk or concentration of credit risk.

#### Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

#### A. Transfers of Receivables Reported as Sales

The Company did not have any transfers of receivables reported as sales during the year.

#### B. Transfers and Servicing of Financial Assets

The Company participates in a Securities Lending Program to generate additional income, whereby certain fixed income and mortgage backed securities are loaned for a period of time from the Company's portfolio to qualifying third parties, via a lending agent. The Company does not participate in term loans; therefore, the Company does not have contractual collateral transactions that extend beyond one year from the reporting date. Borrowers of these securities provide collateral equal to or in excess of 102% of the market value of the loaned securities. Acceptable collateral may be in the form of cash or U.S. Government securities, such as Treasuries and Agency Bonds. Collateral is not restricted and currently \$0 extends beyond one year from December 31, 2010. The market value of the loaned securities is monitored and additional collateral is obtained if the market value of the collateral falls below 102% of the market value of the loaned securities. Additionally, the lending agent indemnifies the Company against borrower defaults. Cash collateral is carried as an asset with an offsetting liability on the balance sheet, as the Company can exercise discretion as to how the collateral is invested. The loaned securities remain a recorded asset of the Company.

At December 31, 2010 the total fair value of securities on loan was \$3,240,339, with corresponding collateral value of \$3,336,007 of which \$2,462,913 represents cash collateral.

#### C. Wash Sales

The Company did not have any wash sale transactions during the year.

#### Note 18 - Gain or Loss from Uninsured Accident and Health Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only (ASO) Plans

Not applicable

B. Administrative Services Contract (ASC) Plans

Not applicable

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contracts

Not applicable

#### Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

The Company has no direct premiums written or produced through managing general agents or third party administrators.

#### Note 20 - Fair Value Measurements

Pursuant to the guidance in SSAP No. 100, Fair Value Measurements, the Company has no assets or liabilities measured at fair value.

#### Note 21 - Other Items

A. Extraordinary Items

The Company has no extraordinary items to report.

B. Troubled Debt Restructuring: Debtors

Not applicable

- C. Other Disclosures
  - 1) Assets in the amount of \$2,258,175 and \$2,137,103 as of December 31, 2010 and 2009, respectively, were on deposit with government authorities or trustees as required by law.
- D. The Company does not carry premium receivable on its Balance Sheet.
- E. Business Interruption Insurance Recoveries

The Company does not purchase business interruption coverage.

F. State Transferable Tax Credits

The Company does not hold state transferable tax credits.

- G. Subprime-Mortgage-Related Risk Exposure
  - 1. The Company has not purchased securities characterized by the market as subprime. The Company reviews such factors as average FICO scores, loan to value ratios, and levels of documentation when evaluating securities.
  - 2. The Company does not have any direct exposure through investments in sub-prime mortgage loans.
  - 3. The Company does not have any direct exposure through other investments.
  - 4. The Company does not have any underwriting exposure to sub-prime mortgage risk.

#### Note 22 - Events Subsequent

A. The Company evaluated subsequent events through February 24, 2010, the date the financial statements were available to be issued.

There were no events subsequent to December 31, 2010 that would require disclosure.

#### Note 23 - Reinsurance

A-F. The Company has not entered into any assumed or ceded reinsurance contracts.

#### G. Reinsurance Accounted for as a Deposit

The Company entered into a 100% Inter-company Quota Share Reinsurance Agreement with LMIC determined to be of a deposit type nature on August 22, 1997. Upon inception of the contract, the Company recorded a deposit asset and deposit liability of \$1,215,843,000. At the reporting date, the Company had a remaining deposit balance of \$4,448,381 after taking into account additional funding from Golden Eagle Insurance Company Trust of \$10,632,077.

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements

The Company has not entered into any property and casualty run-off agreements which qualify for prospective reinsurance accounting treatment, pursuant to SSAP No. 62R, *Property and Casualty Reinsurance*.

#### Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

The Company does not have net accrued retrospective premiums (refer to Note 26).

#### Note 25 - Changes in Incurred Losses and Loss Adjustment Expenses

The Company has no net exposure to changes in incurred losses and loss adjustment expenses (refer to Note 26).

#### Note 26 - Intercompany Pooling Arrangements

The Company participates in a 100% Inter-company Quota Share Reinsurance Agreement with LMIC. (refer to Note 23, G)

#### **Note 27- Structured Settlements**

- A. As a result of purchased annuities with the claimant as payee, The Company no longer carries reserves of \$3,530,578 after applying Inter-Company Reinsurance Agreement percentages. The Company is contingently liable should the issuers of the purchased annuities fail to perform under the terms of the annuities. The amount of unrecorded loss contingencies related to the purchased annuities was \$3,530,578 as of December 31, 2010.
- B. A summary of purchased structured settlement annuities exceeding 1% of policyholders' surplus and whereby the company has not obtained a release of liability from the claimant is as follows:

	Licensed in Company's State	
Life Insurance Company and Location	of Domicile (Yes/No)	Statement Value of Annuities
Liberty Life Assurance Company of Boston		_
Boston, Massachusetts	Yes	\$3,530,578

#### Note 28 - Health Care Receivables

Not applicable

#### Note 29 - Participating Policies

Not applicable

#### Note 30 - Premium Deficiency Reserves

Not applicable

#### Note 31 - High Dollar Deductible Policies

The Company does not have any high deductible policies (refer to Note 26).

#### Note 32 - Discounting of Liabilities for Unpaid Losses and Unpaid Loss Adjustment Expenses

The Company has no net loss and loss adjustment expense reserves (refer to Note 26).

#### Note 33 - Asbestos/Environmental Reserves

The Company has no net exposure to asbestos and environmental claims (refer to Note 26).

#### Note 34 - Subscriber Savings Accounts

The Company is not a reciprocal insurance company.

### Note 35 - Multiple Peril Crop Insurance

Not applicable

#### Note 36 - Financial Guarantee Insurance

Not applicable

### PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

	Is the reporting entity a member of an Insurance Holding Company System consisting persons, one or more of which is an insurer?	g of two or more affiliated	Yes [X] No [ ]
	If yes, did the reporting entity register and file with its domiciliary State Insurance Cor Superintendent or with such regulatory official of the state of domicile of the principal System, a registration statement providing disclosure substantially similar to the standard Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Com and model regulations pertaining thereto, or is the reporting entity subject to standard substantially similar to those required by such Act and regulations?	insurer in the Holding Company dards adopted by the National pany System Regulatory Act	Yes [ X ] No [ ] N/A [ ]
			California
1.3	State Regulating?		California
	Has any change been made during the year of this statement in the charter, by-laws, settlement of the reporting entity?	articles of incorporation, or deed of	Yes[]No[X]
2.2	If yes, date of change:		
3.1	State as of what date the latest financial examination of the reporting entity was made	e or is being made.	12/31/2008
	State the as of date that the latest financial examination report became available from the reporting entity. This date should be the date of the examined balance sheet and completed or released.		12/31/2008
	State as of what date the latest financial examination report became available to other the state of domicile or the reporting entity. This is the release date or completion da not the date of the examination (balance sheet date).		06/01/2010
3.4	By what department or departments? California Department of Insurance		
	Have all financial statement adjustments within the latest financial examination report subsequent financial statement filed with departments?	t been accounted for in a	Yes[] No[] N/A [X]
3.6	Have all of the recommendations within the latest financial examination report been c	complied with?	Yes [ X ] No [ ] N/A [ ]
	During the period covered by this statement, did any agent, broker, sales representat sales/service organization or any combination thereof under common control (other the reporting entity) receive credit or commissions for or control a substantial part (more of business measured on direct premiums) of:  4.11 sales of ne	than salaried employees of the than 20 percent of any major line w business?	Yes[] No[X]
	4.12 renewals?		Yes[]No[X]
	During the period covered by this statement, did any sales/service organization owne reporting entity or an affiliate, receive credit or commissions for or control a substantiany major line of business measured on direct premiums) of:	· ·	
	4.21 sales of ne 4.22 renewals?		Yes [ ] No [X] Yes [ ] No [X]
5.1	Has the reporting entity been a party to a merger or consolidation during the period c	overed by this statement?	Yes[]No[X]
	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (us any entity that has ceased to exist as a result of the merger or consolidation.	se two letter state abbreviation) for	
	1	2	3
	Name of Entity	NAIC Company Code	State of Domicile
		00000 00000	

Yes[]No[X]

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration,

if applicable) suspended or revoked by any governmental entity during the reporting period?

	ull information:						
1 Does any fo	reign (non-United States) person or entity directly or	indirectly control 10% or more of the repor	rting entity?		Yes	[ ] No[X]	
-		,	0 ,				
2 If yes,	<ul><li>7.21 State the percentage of foreign control.</li></ul>						
	· · · · · ·	rson(s) or entity(s); or if the entity is a muti	ual or				
		or attorney-in-fact and identify the type of	f entity(s)				
	(e.g., individual, corporation, governmer	nt, manager or attorney-in-fact).					
	1		2				
	Nationality	Туре с	of Entity				
le the comp	any a subsidiary of a bank holding company regulate	d by the Federal Reserve Roard?			Vac	[ ] No[X]	
is the compa	arry a subsidiary of a bank floiding company regulate	d by the rederal Neserve Board:			163	[ ] NO[X	
If response t	to 8.1 is yes, please identify the name of the bank ho	lding company.					
		r r 0			V	f 1 N - f V	
is the compa	any affiliated with one or more banks, thrifts or securi	ties firms?			Yes	[ ] No[X	
		pervision (OTS), the Federal Deposit Insur					
	(FDIC) and the Securities Exchange Commission (S						
Corporation	(FDIC) and the Securities Exchange Commission (S	EC)] and identify the affiliate's primary fed		4	5	6	7
Corporation	(FDIC) and the Securities Exchange Commission (S	EC)] and identify the affiliate's primary fed	leral	4 OCC	5 OTS	6 FDIC	7 SEC
Corporation	(FDIC) and the Securities Exchange Commission (S  1  Affiliate	EC)] and identify the affiliate's primary fed  2  Location	deral 3				
Corporation	(FDIC) and the Securities Exchange Commission (S  1  Affiliate	EC)] and identify the affiliate's primary fed  2  Location	deral 3				
Corporation regulator.	(FDIC) and the Securities Exchange Commission (S  1  Affiliate  Name  name and address of the independent certified public annual audit? ng, LLP	EC)] and identify the affiliate's primary fed  2  Location  (City, State)	3 FRB	OCC	OTS		
Corporation regulator.  What is the reconduct the Ernst & Your	(FDIC) and the Securities Exchange Commission (S  1  Affiliate  Name  name and address of the independent certified public annual audit? ng, LLP lon Street	EC)] and identify the affiliate's primary fed  2  Location (City, State)	3 FRB	OCC	OTS		
Corporation regulator.  What is the reconduct the Ernst & Your 200 Clarend	(FDIC) and the Securities Exchange Commission (S  1  Affiliate  Name  name and address of the independent certified public annual audit? ng, LLP lon Street	EC)] and identify the affiliate's primary fed  2  Location (City, State)	3 FRB	OCC	OTS		
What is the reconduct the Ernst & Your 200 Clarend Boston, MA	(FDIC) and the Securities Exchange Commission (S  1 Affiliate Name  name and address of the independent certified public annual audit? ng, LLP on Street 02116  urer been granted any exemptions to the prohibited no	2 Location (City, State)  accountant or accounting firm retained to	3 FRB	OCC	OTS		
What is the r conduct the Ernst & Your 200 Clarend Boston, MA	(FDIC) and the Securities Exchange Commission (S  1  Affiliate  Name  name and address of the independent certified public annual audit? ng, LLP lon Street 02116	2 Location (City, State)  accountant or accounting firm retained to	3 FRB	OCC	OTS		SEC
What is the reconduct the Ernst & Your 200 Clarend Boston, MA	(FDIC) and the Securities Exchange Commission (S  1 Affiliate Name  name and address of the independent certified public annual audit? ng, LLP lon Street 02116  urer been granted any exemptions to the prohibited numerator requirements as allowed in Section 7H of the American security.	2 Location (City, State)  c accountant or accounting firm retained to con-audit services provided by the certified annual Financial Reporting Model Regulation	3 FRB	OCC	OTS	FDIC	SEC
What is the reconduct the Ernst & Your 200 Clarend Boston, MA	(FDIC) and the Securities Exchange Commission (S  1 Affiliate Name  name and address of the independent certified public annual audit? ng, LLP lon Street 02116  urer been granted any exemptions to the prohibited number of the Amor substantially similar state law or regulation?	2 Location (City, State)  c accountant or accounting firm retained to con-audit services provided by the certified annual Financial Reporting Model Regulation	3 FRB	OCC	OTS	FDIC	SEC
Corporation regulator.  What is the reconduct the Ernst & Your 200 Clarend Boston, MA  Has the insurpublic account Audit Rule),  If response to the state of the	(FDIC) and the Securities Exchange Commission (S  1 Affiliate Name  name and address of the independent certified public annual audit? ng, LLP lon Street 02116  urer been granted any exemptions to the prohibited number of the Amor substantially similar state law or regulation?	2 Location (City, State)  c accountant or accounting firm retained to con-audit services provided by the certified annual Financial Reporting Model Regulativemption:	3 FRB	OCC	OTSYes	FDIC	SEC
What is the reconduct the Ernst & Your 200 Clarend Boston, MA  Has the insurpublic account Audit Rule),  If response to the insurpublic account Rule insurpublic account Ru	1 Affiliate Name  name and address of the independent certified public annual audit? ng, LLP lon Street 02116  urer been granted any exemptions to the prohibited nuntant requirements as allowed in Section 7H of the A or substantially similar state law or regulation?  to 10.1 is "yes," provide information related to this exemptions to the audit committee of the prohibited of the A or substantially similar state law or regulation?	2 Location (City, State)  c accountant or accounting firm retained to con-audit services provided by the certified annual Financial Reporting Model Regulation:  emption:  ttee requirements as allowed in Section 1 milar state law or regulation?	3 FRB	OCC	OTSYes	FDIC	SEC
Corporation regulator.  What is the report of the Ernst & Your 200 Clarend Boston, MA  Has the insurpublic account Audit Rule),  If response to the insurance of the insurance o	1 Affiliate Name  name and address of the independent certified public annual audit? ng, LLP lon Street 02116  urer been granted any exemptions to the prohibited nuntant requirements as allowed in Section 7H of the A or substantially similar state law or regulation?  to 10.1 is "yes," provide information related to this exemptions to the audit commitment of the A or substantially similar state law or regulation?	2 Location (City, State)  c accountant or accounting firm retained to con-audit services provided by the certified annual Financial Reporting Model Regulation:  emption:  ttee requirements as allowed in Section 1 milar state law or regulation?	3 FRB	OCC	OTSYes	FDIC	SEC

10.5	Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting  Model Regulation as allowed in Section 17A of the Model Regulation, or substantially similar state law or regulation?	Yes[] No[X]
10.6	If response to 10.5 is "yes," provide information related to this exemption:	
10.7	Has the reporting entity established an Audit Committee in compliance with the domilicary state insurance law?	Yes [X] No [ ] N/A [ ]
10.8	If the response to 10.7 is no or n/a, please explain:	
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? William Finn 175 Berkeley Street, Boston, MA 02116 Officer of Liberty Mutual Group Inc.	
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes[]No[X]
	<ul><li>12.11 Name of real estate holding company</li><li>12.12 Number of parcels involved</li><li>12.13 Total book/adjusted carrying value</li></ul>	\$
	If yes, provide explanation:  EOD LINITED STATES PRANCHES OF ALIEN REPORTING ENTITIES ONLY.	
	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:  What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?	
13.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?	Yes[]No[X]
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes[]No[X]
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes[] No[] N/A [X]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?  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.	Yes [X] No []
4.11	If the response to 14.1 is no, please explain:	

14.2	2 Has the code of ethics for senior managers been amended?	Yes[X] No[]	
14.21	1 If the response to 14.2 is yes, provide information related to amendment(s). During the 1st quarter, Liberty Mutual Group published several non-material changes to its Code of Business Ethics a designed to clarify existing Code provisions.		
14.3	3 Have any provisions of the code of ethics been waived for any of the specified officers?	Yes[]No[X]	
14.31	1 If the response to 14.3 is yes, provide the nature of any waiver(s).		
	BOARD OF DIRECTORS		
15.	5. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a		
	subordinate committee thereof?	Yes[X] No[]	
16.	6. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?	Yes [X] No [ ]	
17.	7. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?	Yes [X] No [ ]	
	FINANCIAL		
18.	B. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?	Yes[]No[X]	
19.1	1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):		
	19.11 To directors or other officers	\$	0_
	19.12 To stockholders not officers	·	0_
	19.13 Trustees, supreme or grand (Fraternal only)	\$	0_
19.2	2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):		
	19.21 To directors or other officers	\$	<u>)</u>
	19.22 To stockholders not officers	\$	<u>)</u>
	19.23 Trustees, supreme or grand (Fraternal only)	\$	0
20.1	1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?	Yes[] No[X]	
20.2	2 If yes, state the amount thereof at December 31 of the current year:  20.21 Rented from others	\$	0
	20.22 Portion others	· <del></del>	0
	20.23 Leased from others	\$	0
	20.24 Other	\$	0
21.1	1. Does this statement include payments for accomments as described in the Appual Statement Instructions other than		
21.1	1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?	Yes[]No[X]	
21.2	2 If answer is yes:		
	21.21 Amount paid as losses or risk adjustment	\$	0 0
	21.22 Amount paid as expenses	\$	<u>)</u>
	21.23 Other amounts paid	\$	0
22.1	1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this		
	statement?	Yes[] No[X]	
22.0	2. If yes, indicate any amounts receivable from parent included in the Page 2 amount	¢	n
///	A investigation of a supplier of the suppli	,	

### **INVESTMENT**

23.1	Were all the stocks, bonds and other securities owned De exclusive control, in the actual possession of the reporting addressed in 23.3)			Yes[X] N	o[]
23.2	If no, give full and complete information relating thereto:				
23.3	For security lending programs, provide a description of th securities, and whether collateral is carried on or off-balar				
	information is also provided) Please reference Note 17B.				
23.4	Does the company's security lending program meet the re Risk-Based Capital Instructions?	equirements fo	or a conforming program as outlined in the	Yes[X] N	o[] N/A []
23.5	If answer to 23.4 is yes, report amount of collateral for co	nforming progi	rams.	\$	3,335,641
23.6	If answer to 23.4 is no, report amount of collateral for other	er programs.		\$	0
23.7	Does your securities lending program require 102% (dom counterparty at the outset of the contract?	estic securitie	s) and 105% (foreign securities) from the	Yes[X] N	o[] N/A []
23.8	Does the reporting entity non-admit when the collateral re	eceived from th	ne counterparty falls below 100%?	Yes[X] N	o[] N/A[]
23.9	Does the reporting entity or the reporting entity's securitie Agreement (MLSA) to conduct securities lending?	s lending ager	nt utilize the Master Securities lending	Yes[X] N	o[] N/A []
24.1	Were any of the stocks, bonds or other assets of the reporting exclusively under the control of the reporting entity or has a put option contract that is currently in force? (Exclude s	the reporting	entity sold or transferred any assets subject to	Yes[X] N	0[]
24.2	If yes, state the amount thereof at December 31 of the cu	rrent year:			
		24.21	Subject to repurchase agreements	\$	0
		24.22	Subject to reverse repurchase agreements	\$	0
		24.23	Subject to dollar repurchase agreements		0
		24.24	Subject to reverse dollar repurchase agreements	œ.	0
		24.25	Pledged as collateral	\$	0
		24.26	Placed under option agreements	\$	0
		24.27	Letter stock or securities restricted as to sale	\$	0
		24.28	On deposit with state or other regulatory body	\$	2,258,175
		24.29	Other	\$	0
24.3	For category (24.27) provide the following:				
	1		2	3	
	Nature of Restriction		Description	Amount	
					.0.
					0
25.1	Does the reporting entity have any hedging transactions r	reported on Sc	hedule DB?	Yes[] No	[X]
25.2	If yes, has a comprehensive description of the hedging pr If no, attach a description with this statement.	ogram been n	nade available to the domiciliary state?	Yes[] No	[X] N/A [ ]
26.1	Were any preferred stocks or bonds owned as of December		urrent year mandatorily convertible into	V	
oc c	equity, or, at the option of the issuer, convertible into equi			Yes[] No	
20.2	If yes, state the amount thereof at December 31 of the cu	пені уеаг.		Φ	0

27.	Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically
	in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned
	throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in
	accordance with Section 1, III General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or
	Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes[X] No[]

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

1	2		
Name of Custodian(s)	Custodian's Address		
JP Morgan Chase	1 Chase Manhattan Plaza, New York, NY 10005		

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

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

27.03 Have there been any changes, including name changes, in the custodian(s) identified in 27.01 during the current year?

Yes[]No[X]

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

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

27.05 Identify all investment advisors, broker/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	2	3
Central Registration Depository Number(s)	Name(s)	Address
N/A	Liberty Mutual Investment Advisors, LLC	175 Berkeley Street, Boston, MA 02116
N/A	Liberty Mutual Group, Inc.	175 Berkeley Street, Boston, MA 02116

28.1 Does the reporting entity have any diversified mutual funds reported in Schedule D – Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes[]No[X]

 $28.2\,$  If yes, complete the following schedule:

1	2	3
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value
		0
		0
		0
28.2999 TOTAL	0	

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

1	1 2 3		4
		Amount of Mutual Fund's	
Name of Mutual Fund	Name of Significant Holding	Book/Adjusted Carrying Value	
(from above table)	of the Mutual Fund	Attributable to the Holding	Date of Valuation
		0	
		0	
		0	

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

		1	2	3
				Excess of Statement
				over Fair Value (-),
		Statement (Admitted)		or Fair Value over
		Value	Fair Value	Statement (+)
29.1	Bonds	65,357,933	67,396,712	2,038,779
29.2	Preferred stocks			
29.3	Totals	65,357,933	67,396,712	2,038,779

	29.2	Preferred stocks	0				
	29.3	Totals	65,357,933	67,396,712	2,038,779		
	The prin	mary source is published uni tive Data Corporation, follow	ilized in determining the fair values: it prices from the NAIC Securities Valuat red by backfill from Bloomberg and Marki ncial instruments or by using industry red	t. Lastly, management dete	rmines fair value based on		
30.1	Was the	e rate used to calculate fair v	alue determined by a broker or custodian	for any of the securities in S	Schedule D?	Yes[]No[X]	
		-	e reporting entity have a copy of the broke ic copy) for all brokers or custodians used			Yes[]No[X]	
30.3	If the ar	nswer to 30.2 is no, describe	the reporting entity's process for determine	ning a reliable pricing			
	source	for purposes of disclosure of	fair value for Schedule D:				
	price ch	hange and tolerance guideli	methodology of its vendors on an annual ines. Vendor prices falling outside the g ed internally by the insurer are reviewe	guidelines are further revie	wed by management on a		
31.1	Have al followe	- ·	e Purposes and Procedures Manual of th	e NAIC Securities Valuation	Office been	Yes[X] No[]	
				OTHER			
32.1	Amount	t of payments to Trade assoc	ciations, service organizations and statistic	cal or Rating Bureaus, if any	?	\$	0_
	total pa		d the amount paid if any such payment re s, service organizations and statistical or re				
			1		2	$\neg$	
			Name		Amount Paid		
						0	
33.1	Amount	t of payments for legal expen	ises, if any?			\$	0
			nount paid if any such payment represente the period covered by this statement.	ed 25% or more of the total			
			1		2		
			Name		Amount Paid	0	

\$\_\_\_\_\_0

34.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments

of government, if any?

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

1	2
Name	Amount Paid
	0
	0
	0

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	Yes[]No[X]			
1.2	If yes, indicate premium earned on U.S. business	s only.		\$0
1.3	What portion of Item (1.2) is not reported on the I 1.31 Reason for excluding	Medica	re Supplement Insurance Experience Exhibit?	\$0
1.5	Indicate amount of earned premium attributable t Indicate total incurred claims on all Medicare Sup Individual policies:		dian and/or Other Alien not included in Item (1.2) above. nt insurance.	\$0 \$
		Most	current three years:	
		1.61	Total premium earned	\$0
		1.62 1.63	Total incurred claims  Number of covered lives	\$0
		1.00	Number of covered lives	
		All yea	ars prior to most current three years:	
		1.64	Total premium earned	\$0
		1.65 1.66	Total incurred claims  Number of covered lives	\$0
1.7	Group policies:	1.00	Number of covered lives	
		Most	current three years:	
		1.71	Total premium earned	\$0
		1.72	Total incurred claims  Number of covered lives	\$0
		1.73	Number of covered lives	
		All yea	ars prior to most current three years:	
		1.74	Total premium earned	\$0
		1.75	Total incurred claims	\$0
2	Health Test:	1.76	Number of covered lives 1 2	
	Tiourium Tool.		Current Year Prior Year	
		2.1	Premium Numerator         \$	
		2.2	Premium Denominator \$ 0 \$ 0	
		2.3 2.4	Premium Ratio (2.1/2.2)         0.00         0.00           Reserve Numerator         \$ 0 \$         0	
		2.5	Reserve Denominator \$ 0 \$ 0	
		2.6	Reserve Ratio (2.4/2.5) 0.00 0.00	
	Does the reporting entity issue both participating			Yes [ ] No [ X ]
3.2	If yes, state the amount of calendar year premiur	ns writt	en on:	
		3.21	Participating policies	\$0_
		3.22	Non-participating policies	\$0
4.	For Mutual reporting entities and Reciprocal Excl	nanges	only:	
4.1	Does the reporting entity issue assessable policies	es?		Yes[]No[X]
4.2	Does the reporting entity issue non-assessable p	olicies		Yes[]No[X]
4.3	If assessable policies are issued, what is the external	ent of th	ne contingent liability of the policyholders?	0
4.4	Total amount of assessments paid or ordered to	be paid	during the year on deposit notes or contingent premiums.	\$ 0
5.	For Reciprocal Exchanges Only:			
	Does the exchange appoint local agents?			Yes[]No[X]
	If yes, is the commission paid:			
	, , , , , , , , , , , , , , , , , , ,	5.21	Out of Attorney's-in-fact compensation	Yes [ ] No [ ] N/A [ X ]
		5.22	As a direct expense of the exchange	Yes [ ] No [ ] N/A [ X ]
		J.ZZ	As a direct expense of the exertange	103[]NO[]NA[A]
5.3	What expenses of the Exchange are not paid out	of the	compensation of the Attorney-in-fact?	
5.4	Has any Attorney-in-fact compensation, continge	nt on fu	Ifillment of certain conditions, been deferred?	Yes[]No[X]
5.5	If yes, give full information			
	What provision has this reporting entity made to compensation contract issued without limit loss: The Company does not write workers' compensation		itself from an excessive loss in the event of a catastrophe under a workers'	

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:  See Note 23G			
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  See Note 23G			
6.1	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its			
0.4	estimated probable maximum loss attributable to a single loss event or occurrence?	Yes [	] No [ X ]	
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss  The Company does not have any policies in force, so no catastrophe reinsurance is necessary.			
7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes [	] No [ X ]	
7.2	If yes, indicate the number of reinsurance contracts containing such provisions.			0
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes [	] No [ X ]	
8.1	Has this 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 this risk, or portion thereof, reinsured?	Yes [	] No [ X ]	
8.2	If yes, give full information			
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;  (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;  (c) Aggregate stop loss reinsurance coverage;  (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such			
	provisions which are only triggered by a decline in the credit status of the other party;  (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or  (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.	Yes [	] No [ X ]	
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:  (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or  (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes [	] No [X]	
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.			
9.4	Except for transactions meeting the requirements of paragraph 32 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes [	] No [ X ]	
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.			
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:	· -	V11. 5 -	
	<ul><li>(a) The entity does not utilize reinsurance; or,</li><li>(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation</li></ul>	Yes [	X]No[]	
	supplement; or  (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an	Yes [	] No [ X ]	
	attestation supplement.	Yes [	] No [ X ]	

#### PART 2 – PROPERTY & CASUALTY INTERROGATORIES

10.			entity would have been required to charge had it retained the risks. Has this been done?	Yes[]No[]N/A[X]
		e reporting entity of		Yes[]No[X]
12.1		eporting entity rec	orded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the	
	amoun	it of corresponding	g liabilities recorded for:  12.11 Unpaid losses \$	0
			12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$	0
12.2	Of the	amount on Line 1	5.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	0_
12.3			derwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes ds covering unpaid premiums and/or unpaid losses?	Yes[]No[]N/A[X]
12.4	If yes, ¡	provide the range	of interest rates charged under such notes during the period covered by this statement:	0.00
			12.41 From 12.42 To	0.00
12.5	promis	sory notes taken b	ollateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or by a reporting or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses atures of commercial policies?	Yes[]No[X]
12.6	If yes,	state the amount	thereof at December 31 of current year:	
			12.61 Letters of Credit \$	0
			12.62 Collateral and other funds \$	
13.1	Larges	t net aggregate ar	mount insured in any one risk (excluding workers' compensation):	0
13.2		any reinsurance co tement provision?	ontract considered in the calculation of this amount include an aggregate limit of recovery without also including a	Yes[]No[X]
13.3			surance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic sligatory contracts) considered in the calculation of the amount.	0
14.1	Is the c	company a cedant	t in a multiple cedant reinsurance contract?	Yes[]No[X]
14.2	If yes, p	please describe th	ne method of allocating and recording reinsurance among the cedants:	
14.3	If the a		res, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance	Yes[]No[X]
	001111010			
14.4	If the a	inswer to 14.3 is n	no, are all the methods described in 14.2 entirely contained in written agreements?	Yes[]No[X]
14.5	If the a	inswer to 14.4 is n	no, please explain:	
15.1	Has the	e reporting entity (	guaranteed any financed premium accounts?	Yes[]No[X]
15.2	If yes,	give full information	on	
16.1			write any warranty business? wing information for each of the following types of warranty coverage:	Yes[]No[X]
	<b>,</b> -, ·	<del>-</del> ·	1 2 3 4 5 Direct Losses Direct Written Direct Premium Direct Premium	
	10.44	Ham.:	Incurred Unpaid Premium Unearned Earned	
	16.11 16.12	Home Products	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0	
	16.13 16.14	Automobile Other*	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0	
	* Disc	close type of cover	rage:	

### PART 2 – PROPERTY & CASUALTY INTERROGATORIES

17.	1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that it excludes from Schedule F – Part 5.	Yes [ ] No [ ]	X ]
	Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F – Part 5. Provide the following information for this exemption:		
	17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3		
	excluded from Schedule F - Part 5	\$	0
	17.12 Unfunded portion of Interrogatory 17.11	\$	0
	17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$	0
	17.14 Case reserves portion of Interrogatory 17.11	\$	0
	17.15 Incurred but not reported portion of Interrogatory 17.11	\$	0
	17.16 Unearned premium portion of Interrogatory 17.11	\$	0
	17.17 Contingent commission portion of Interrogatory 17.11	\$	0
	Provide the following information for all other amounts included in Schedule F – Part 3 and excluded from Schedule F – Part 5, not included a 17.18 Gross amount of unauthorized reinsurance in Schedule F – Part 3	oove.	
	excluded from Schedule F – Part 5	\$	0
	17.19 Unfunded portion of Interrogatory 17.18	\$	0
	17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$	0
	17.21 Case reserves portion of Interrogatory 17.18	\$	0
	17.22 Incurred but not reported portion of Interrogatory 17.18	\$	0
	17.23 Unearned premium portion of Interrogatory 17.18	\$	0
	17.24 Contingent commission portion of Interrogatory 17.18	\$	0
18.1	Do you act as a custodian for health savings accounts?	Yes [ ] No [ ]	X ]
18.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$	0
18.3	Do you act as an administrator for health savings accounts?	Yes [ ] No [ ]	X ]
18.4	If yes, please provide the balance of the funds adminstered as of the reporting date.	\$	0

# FIVE - YEAR HISTORICAL DATA

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

1. L 2. P 3. P 4. A 5. N 6. T N 7. L 8. P 9. P 10. A	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) iability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) Honproportional reinsurance lines (Lines 31, 32 & 33) Fotal (Line 35)  Het Premiums Written (Page 8, Part 1B, Col. 6) iability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	2010	2009	2008	2007	2006
1. L 2. P 3. P 4. A 5. N 6. T N 7. L 8. P 9. P 10. A	Property lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) Roproportional reinsurance lines (Lines 31, 32 & 33) Fotal (Line 35) Ret Premiums Written (Page 8, Part 1B, Col. 6)					
1. L 2. P 3. P 4. A 5. N 6. T N 7. L 8. P 9. P 10. A	Property lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) Roproportional reinsurance lines (Lines 31, 32 & 33) Fotal (Line 35) Ret Premiums Written (Page 8, Part 1B, Col. 6)					
2. P 3. P 4. A 5. N 6. T N 7. L 8. P 9. P 10. A	Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) Jonproportional reinsurance lines (Lines 31, 32 & 33) Fotal (Line 35) Jet Premiums Written (Page 8, Part 1B, Col. 6)					
4. A 5. N 6. T N 7. L 8. P 9. P 10. A 11. N	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  Jonproportional reinsurance lines (Lines 31, 32 & 33)  Total (Line 35)  Jet Premiums Written (Page 8, Part 1B, Col. 6)					
4. A 5. N 6. T N 7. L 8. P 9. P 10. A 11. N	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  Jonproportional reinsurance lines (Lines 31, 32 & 33)  Total (Line 35)  Jet Premiums Written (Page 8, Part 1B, Col. 6)					
5. N 6. T N 7. L 8. P 9. P 10. A 11. N	lonproportional reinsurance lines (Lines 31, 32 & 33)  Total (Line 35)  let Premiums Written (Page 8, Part 1B, Col. 6)					
7. L 8. P 9. P 10. A	let Premiums Written (Page 8, Part 1B, Col. 6)					
7. L 8. P 9. P 10. A 11. N	, <del>-</del> , , , , , , , , , , , , , , , , , , ,					
8. P 9. P 10. A 11. N	iability lines (Lines 11 1 11 2 16 17 1 17 2 17 3 18 1 18 2 19 1 19 2 & 19 3 19 4)					
9. P 10. A 11. N						
10. A 11. N	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
11. N	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
	lonproportional reinsurance lines (Lines 31, 32 & 33)					
ı	otal (Line 35)					
ł	Statement of Income (Page 4)	(4.120)	(1.006)	(10.051)	(770)	(716)
	let underwriting gain (loss) (Line 8) let investment gain (loss) (Line 11)	(4,129) 2,290,206	(1,006) 2,253,185	(10,051) 3,273,903	5,418,344	(716) 3,850,029
l	"-1-1 -11 // i 45\	(6,188)	8,628	135,471	(13,074)	(32,714)
1	otal other income (Line 15)  Dividends to policyholders (Line 17)	(0,100)	0,020	100,471	(13,074)	(32,714)
	Federal and foreign income taxes incurred (Line 19)	728,395	876,478	1,357,178	1,710,437	1,162,751
	let income (Line 20)	1,551,494	1,384,329	2,042,145	3,694,055	2,653,848
I	Balance Sheet Lines (Pages 2 and 3)					
19. T	otal admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	68,252,970	66,722,997	75,115,021	70,252,851	150,586,912
	Premiums and considerations (Page 2, Col. 3)					
2	10.1 In course of collection (Line 15.1)					
2	10.2 Deferred and not yet due (Line 15.2)					
2	0.3 Accrued retrospective premiums (Line 15.3)					
	otal liabilities excluding protected cell business (Page 3, Line 26)	9,988,597	6,176,332	15,900,485	7,016,750	90,800,866
1	osses (Page 3, Line 1)					
	oss adjustment expenses (Page 3, Line 3)					
ı	Jnearned premiums (Page 3, Line 9)					
ı	Capital paid up (Page 3, Lines 30 & 31)	2,600,000	2,600,000	2,600,000	2,600,000	2,600,000
i	Surplus as regards policyholders (Page 3, Line 37)	58,264,373	60,546,665	59,214,536	63,236,101	59,786,046
l	Cash Flow (Page 5)	0.070.007	4 405 044	0.040.054	0.000.557	0.077.404
I	let cash from operations (Line 11)	2,070,907	1,425,044	2,049,654	3,688,557	2,377,481
ı	kisk-Based Capital Analysis otal adjusted capital	58,264,373	60,546,665	59,214,536	63,236,101	59,786,046
İ		182,002	146,676	272,850	175,519	485,499
ı	Nutriorized control level risk-based capital Percentage Distribution of Cash, Cash Equivalents and Invested Assets	102,002		2,2,000		
l	(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
1	Sonds (Line 1)	87.7	92.0	48.9	81.5	29.2
1	Stocks (Lines 2.1 & 2.2)					
32. N	Nortgage loans on real estate (Lines 3.1 and 3.2)					
33. R	Real estate (Lines 4.1, 4.2 & 4.3)					
34. C	Cash, cash equivalents and short-term investments (Line 5)	8.6	8.0	51.1	18.5	69.2
35. C	Contract loans (Line 6)					
ł	Derivatives (Line 7)		XXX	XXX	XXX	XXX
37. C	Other invested assets (Line 8)					
	Receivables for securities (Line 9)				0.0	1.6
	Securities lending reinvested collateral assets (Line 10)	3.6	XXX	XXX	XXX	XXX
I	Aggregate write-ins for invested assets (Line 11)	400.0	400.0	400.0	400.0	100.0
İ	Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
l	Investments in Parent, Subsidiaries and Affiliates  Iffiliated bonds, (Sch. D, Summary, Line 12, Col. 1)					
1	Affiliated preferred stocks (Sch. D, Summary, Line 12, Col. 1)					
	mii . I					
l	httiliated common stocks (Sch. D., Summary, Line 24, Col. 1)  filliated short-term investments (subtotals included in Schedule DA Verification,					
İ	Col. 5, Line 10)					
1	stfliated mortgage loans on real estate					
1	NI other affiliated					
ı	otal of above Lines 42 to 47					
	Percentage of investments in parent, subsidiaries and affiliates to surplus as					
re	egards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

# FIVE - YEAR HISTORICAL DATA

(Continued)

,		1	2	3	4	5
		2010	2009	2008	2007	2006
•						
	Capital and Surplus Accounts (Page 4)					
50.	Net unrealized capital gains (losses) (Line 24)					
51.		(3,814,536)		(6,323,610)		
52.	Change in surplus as regards policyholders for the year (Line 38)	(2,282,292)	1,332,129	(4,021,565)	3,450,055	2,649,848
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
53.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
54.						
55.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
56.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
57.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
58.	Total (Line 35)					
	Net Losses Paid (Page 9, Part 2, Col. 4)					
59.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
60.	D					
61.						
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
63.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
	Total (Line 35)					
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
65.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
66.	Losses incurred (Line 2)					
67.						
68.	Other underwriting expenses incurred (Line 4)					
69.						
	Other Percentages					
70.	0 1 1 0 7					
71	divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0  Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3					
11.						
72	divided by Page 4, Line 1 x 100.0)  Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35					
	divided by Page 3, Line 37, Col. 1 x 100.0)					
	One Year Loss Development (000 omitted)					
73.	Development in estimated losses and loss expenses incurred prior to current					
	year (Schedule P, Part 2-Summary, Line 12, Col. 11)					
74.	Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 73 above divided by Page 4, Line 21,					
	Col. 1 x 100.0)					
	Two Year Loss Development (000 omitted)					
75.	Development in estimated losses and loss expenses incurred 2 years before					
	the current year and prior year (Schedule P, Part 2-Summary, Line 12,					
	Col. 12)					
76.	Percent of development of losses and loss expenses incurred to reported					
	policyholders' surplus of second prior year end (Line 75 above divided					
	by Page 4, Line 21, Col. 2 x 100.0)					
NC	TE: If a party to a merger, have the two most recent years of this exhibit been restated due to a	merger in compliance	e with the disclosure		Yes [ ] I	No [X] oV

:	If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure	Yes[]No[X]
	requirements of SSAP No. 3, Accounting Changes and Correction of Errors?	
	If no, please explain: Not applicable	

# NONE Schedule P - Part 1 - Summary

# NONE Schedule P - Part 2, 3, 4 - Summary

### **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

**Allocated By States and Territories** 

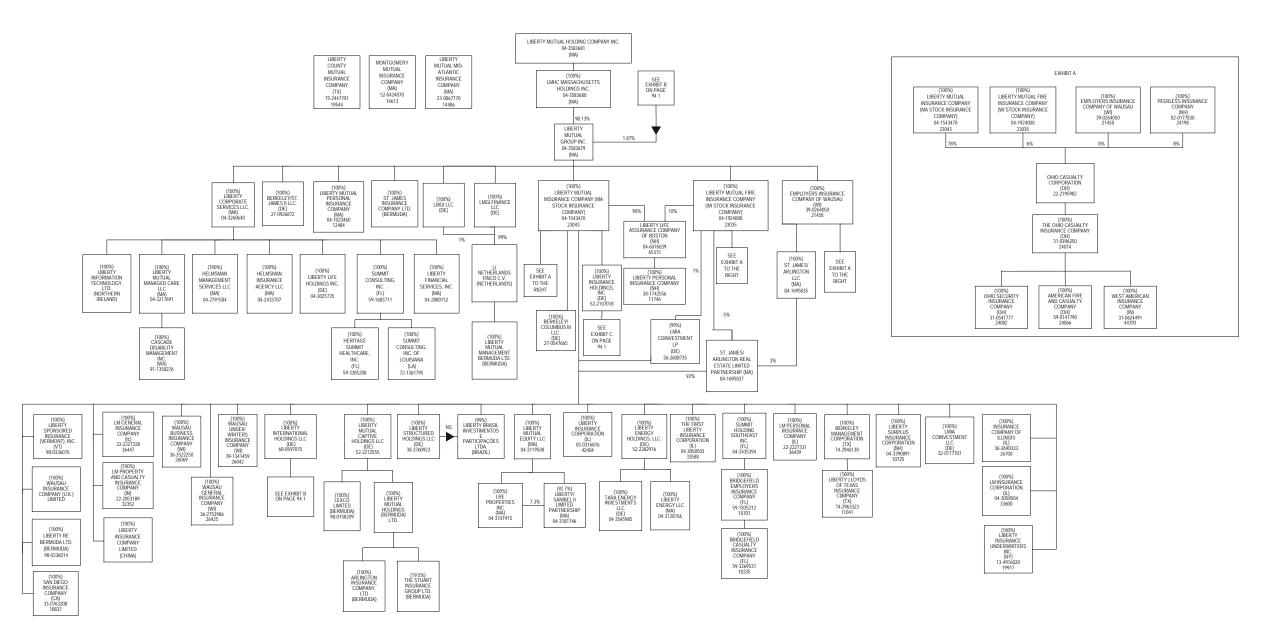
		1	and Members Return Premium	s, Including Policy ship Fees Less as and Premiums Not Taken	Dividends Paid or Credited to	5 Direct Losses	6	7	8 Finance and Service	9 Direct Premium Written for Federal
	States, Etc.	Active Status	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Charges Not Included in Premiums	Purchasing Groups (Included in Col. 2)
	Alabama AL Alaska AK	. N N								
	Arizona AZ	N N								
	Arkansas AR	N.								
	California CA Colorado CO	L. N								
7.	Connecticut CT	N								
8. 9.	Delaware DE District of Columbia DC	N								
10.	Florida FL	<sup>!\</sup>   N								
	Georgia GA	N								
	Hawaii HI Idaho ID	N N								
14.	Illinois IL	N								
15.	Indiana IN	N								
	lowa IA Kansas KS	N N								
18.	Kentucky KY	N								
	Louisiana LA	N.								
	Maine ME Maryland MD	N N								
22.	Massachusetts MA	N								
	Michigan MI	N.								
	Minnesota MN Mississippi MS	. <u>N</u> .								
	Missouri MO	N								
	Montana MT	N								
28.	Nebraska NE Nevada NV	N N								
	New Hampshire NH	N'\								
	New Jersey NJ	N								
	New Mexico NM New York NY	N N								
	North Carolina NC	<sup>!\</sup>   N								
35.	North Dakota ND	N								
	Ohio OH Oklahoma OK	N N								
38.	Oregon OR	N'\								
	Pennsylvania PA	N N								
	Rhode Island RI South Carolina SC	N N								
	South Dakota SD	N'\								
43.	Tennessee TN	N								
44. 45.	Texas TX Utah UT	N N								
46.	Vermont VT	N'\								
1	Virginia VA	N								
48. 49	Washington WA West Virginia WV	N N								
	Wisconsin WI	N N								
	Wyoming WY	N								
	American Samoa AS Guam GU	N N								
	Puerto Rico PR	N								
	U.S. Virgin Islands VI	N								
1	Northern Mariana Islands MP Canada CN	N N								
	Aggregate Other Alien OT	XXX								
	Totals	(a) 1								
	DETAILS OF WRITE-INS									
5801.		XXX								
5802. 5803.		XXX								
	Summary of remaining write-ins									
5899	for Line 58 from overflow page Totals (Lines 5801 through	XXX								
	5803 plus 5898) (Line 58 above)	XXX								

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines In the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation	on of premiums by states, etc.
*Location of coverage - Fire, Allied Lines, Homeowners Multi Peril, Commercial Multi Peril, Earthquake, Boil	
*States employee's main work place - Worker's Compensation	*Location of Court - Surety
*Location of Principal place of garaging of each individual car - Auto Liability, Auto Physical Damage	*Address of Assured - Other Accident and Health
*Principal Location of business or location of coverage - Liability other than Auto, Fidelity, Warranty	*Location of Properties covered - Burglary and Theft
*Point of origin of shipment or principal location of assured - Inland Marine	*Principal Location of Assured - Ocean Marine, Credit
*State in which employees regularly work - Group Accident and Health	*Primary residence of Assured - Aircraft (all perils)

### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

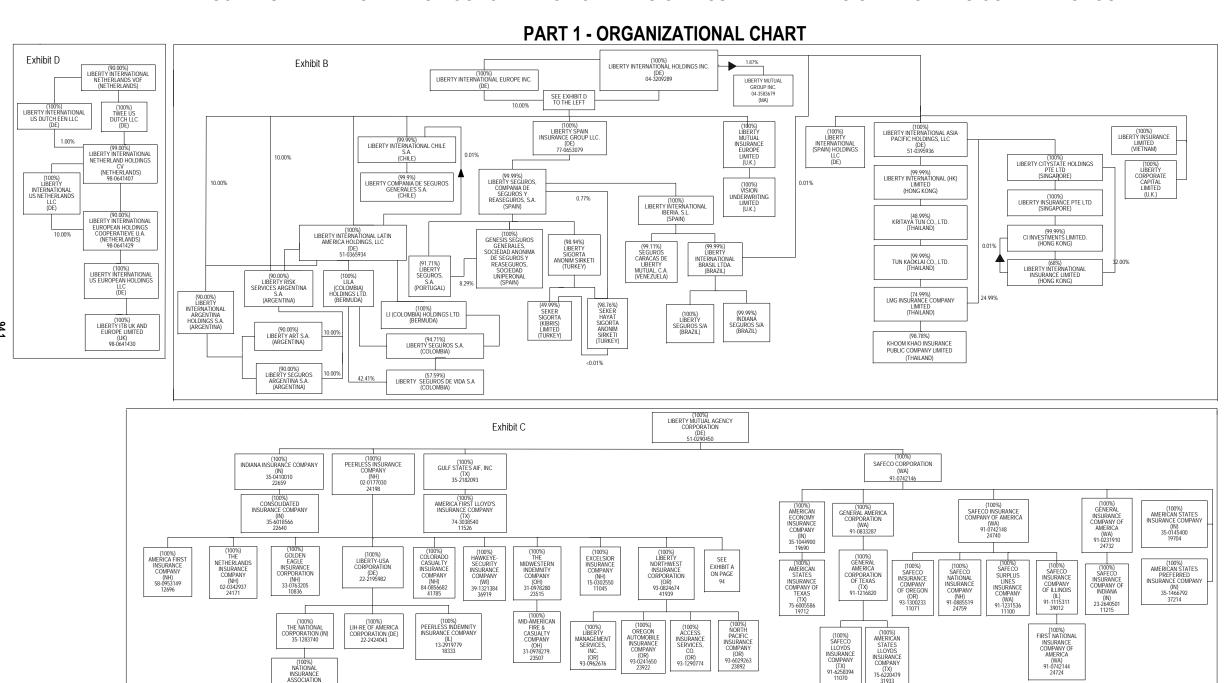
#### PART 1 - ORGANIZATIONAL CHART



(100%) NATIONAL

INSURANCE ASSOCIATION (IN) 35-1287317

### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP



COMPANY (TX) 75-6220479 31933

# **OVERFLOW PAGE FOR WRITE-INS**

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