ANNUAL STATEMENT OF THE **LM Personal Insurance Company** of_____Wilmington in the state of _____ Delaware TO THE **Insurance Department** OF THE **STATE OF** FOR THE YEAR ENDED **December 31, 2006**



ANNUAL STATEMENT

36439200620100100

For the Year Ended December 31, 2006 OF THE CONDITION AND AFFAIRS OF THE

LM Personal Insurance Company

NAIC Group Code 0111	0111 NAIC Company C	Code 36439 Emp	loyer's ID Number 22-2227331
(Current Period)	(Prior Period)	State of Dominile or Dor	t of Entire Dila
Organized under the Laws of		_ , State of Domicile or Port	t of Entry Delaware
Country of Domicile United S			
•	vember 17, 1978		December 29, 1978
	Centerville Road, Suite 400 Wilmin	igton, DE 19808	
Main Administrative Office:1	75 Berkeley Street Boston, MA	02116 617-357-9500	
Mail Address: 175 Berkeley Street	Boston, MA 02116		
•	Records: 175 Berkeley Street		7-357-9500
Internet Website Address:www	w.LibertyMutual.com		
Statutory Statement Contact:D	ouglas Link		617-357-9500 45668
	ouglas.Link@LibertyMutual.com		617-574-5955
Policyowner Relations Contact:_	E-Mail Address) 175 Berkeley Street Boston, M	IA 02116 617-357-9500	(Fax Number) 41015
Tolloyounici reduciono contucti_	OFFICE		71010
	OFFICE	:K3	
	Name	Title	
1. James Pa	ul Condrin, III	Chairman of the Board Preside	ent & CEO
2. Dexter Ro	bert Legg	Vice President & Secretary	
3. Laurance	Henry Soyer Yahia	Vice President & Treasurer	
	Vice-Presi	dents	
Name	Title	Name	Title
Margaret Dillon	Vice President & Chief Financial Officer	John Derek Doyle	Vice President & Comptroller
Anthony Alexander Fontanes	Vice President & Assistant Treasurer	Gary Jay Ostrow	Vice President
Himanshu Indravadan Patel Edward Joseph Gramer, III	Vice President Vice President	Timothy Michael Sweeney Elizabeth Julia Morahan	
	DIRECTORS OR	TRUSTEES	
James Paul Condrin, III Edward Joseph Gramer, III	Margaret Dillon Elizabeth Julia Morahan	Himanshu Indravadan Patel	Timothy Michael Sweeney
Luwaru Joseph Gramer, III	Liizabetti Julia Morariari		
Chata of Massachusette			
State of Massachusetts County of Suffolk ss			
	y sworn, each depose and say that they are the	he described officers of said reporting	entity, and that on the reporting period stated
	re the absolute property of the said reporting hibits, schedules and explanations therein con		
liabilities and of the condition and affairs of t	he said reporting entity as of the reporting per	riod stated above, and of its income an	nd deductions therefrom for the period ended,
	th the NAIC Annual Statement Instructions and ulations require differences in reporting not rel		
information, knowledge and belief, respective	ely. Furthermore, the scope of this attestation	by the described officers also include	s the related corresponding electronic filing
with the NAIC, when required, that is an exa requested by various regulators in lieu of or	act copy (except for formatting differences due	to electronic filing) of the enclosed sta	atement. The electronic filing may be
requested by various regulators in field of or	in addition to the enclosed statement.		
(Signature)		ature)	(Signature)
James Paul Condrin, III (Printed Name)		bbert Legg I Name)	Laurance Henry Soyer Yahia (Printed Name)
` 1. ´	. 2		3.
Chairman of the Board President & C	CEO Vice Presiden (Titl	•	Vice President & Treasurer (Title)
,	(110	,	,
Subscribed and sworn to before me this	0007	a. Is this an ori	
day of	, 2007		. State the amendment number
			2. Date filed

ASSETS

		Current Year			Prior Year
		1	2	3	4
				Net Admitted	
			Nonadmitted	Assets	Net Admitted
		Assets	Assets	(Cols. 1 - 2)	Assets
1.	Bonds (Schedule D)	7,855,743		7,855,743	14,588,218
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$ 0 encumbrances)				
	4.2 Properties held for the production of income (less \$ 0 encumbrances)				
	4.3 Properties held for sale (less \$ 0 encumbrances)				
5.	Cash (\$ 742,617, Schedule E-Part 1), cash equivalents (\$ 702,300				
	Schedule E-Part 2) and short-term investments (\$ 952,670 , Schedule DA)	2,397,587		2,397,587	3,284,575
6.	Contract loans (including \$ 0 premium notes)				
7.	Other invested assets (Schedule BA)				
8.	Receivables for securities				50,000
9.	Aggregate write-ins for invested assets				
10.	Subtotals, cash and invested assets (Lines 1 to 9)	40.050.000		10,253,330	17,922,793
11.	Title plants less \$ 0 charged off (for Title insurers only)				
12.	Investment income due and accrued	78,621		78,621	185,338
13.	Premiums and considerations:				
	13.1 Uncollected premiums and agents' balances in the course of collection				
	13.2 Deferred premiums, agents' balances and installments booked but deferred and				
	not yet due (including \$ 0 earned but unbilled premiums)				
	13.3 Accrued retrospective premiums				
14.	Reinsurance:				
	14.1 Amounts recoverable from reinsurers	333,657		333,657	26,383
	14.2 Funds held by or deposited with reinsured companies				
	14.3 Other amounts receivable under reinsurance contracts				
15.	Amounts receivable relating to uninsured plans				
16.1	Current federal and foreign income tax recoverable and interest thereon				
16.2	Net deferred tax asset				
17.	Guaranty funds receivable or on deposit				
18.	Electronic data processing equipment and software				
19.	Furniture and equipment, including health care delivery assets (\$ 0)				
20.	Net adjustment in assets and liabilities due to foreign exchange rates				
21.	Receivables from parent, subsidiaries and affiliates				4,719,276
22.	Health care (\$ 0) and other amounts receivable				
23.	Aggregate write-ins for other than invested assets	26,600		26,600	156,702
24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts (Lines 10 to 23)	10,692,208		10,692,208	23,010,492
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
26.	Total (Lines 24 and 25)	10,692,208		10,692,208	23,010,492
					<u> </u>
	DETAILS OF WRITE-INS				
0901.					
0902.					

DETAILS OF WRITE-INS			
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)			
2301. Other assets	26,600	26,600	156,702
2302.			
2303.			
2398. Summary of remaining write-ins for Line 23 from overflow page			
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	26,600	26,600	156,702

LIABILITIES, SURPLUS AND OTHER FUNDS	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 34, Column 8)		
Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
Loss adjustment expenses (Part 2A, Line 34, Column 9)		
Commissions payable, contingent commissions and other similar charges	******	
Other expenses (excluding taxes, licenses and fees)		
Taxes, licenses and fees (excluding federal and foreign income taxes)	******	
7.1 Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))	164,740	35,772
7.2 Net deferred tax liability	40,000	5,000
8. Borrowed money \$ 0 and interest thereon \$ 0		
9. Unearned premiums (Part 1A, Line 37, Column 5) (after deducting unearned premiums for ceded reinsurance of		
\$ 0 and including warranty reserves of \$ 0)		
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	(5,930)	15
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)	291,312	4,613,356
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (Schedule F, Part 7)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	2,721,845	
20. Payable for securities		
21. Liability for amounts held under uninsured plans		
22. Capital notes \$ 0 and interest thereon \$ 0		
23. Aggregate write-ins for liabilities	1,713,809	2,623,374
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23)	4,897,776	7,277,517
25. Protected cell liabilities		
26. Total liabilities (Lines 24 and 25)		7,277,517
27. Aggregate write-ins for special surplus funds		
28. Common capital stock	2 500 000	3,500,000
29. Preferred capital stock		
30. Aggregate write-ins for other than special surplus funds		
31. Surplus notes		
32. Gross paid in and contributed surplus	2,056,938	3,500,000
33. Unassigned funds (surplus)	237,494	8,732,975
34. Less treasury stock, at cost:		
34.1 0 shares common (value included in Line 28 \$ 0)		*****
34.2 0 shares preferred (value included in Line 29 \$ 0)		
35. Surplus as regards policyholders (Lines 27 to 33, less 34) (Page 4, Line 39)		15,732,975
36. TOTALS (Page 2, Line 26, Col. 3)	10,692,208	23,010,492
DETAILS OF WRITE-INS		
2301. Other liabilities	22,038	34,633
2302. Collateral held for securities loaned	1,691,771	2,588,741
2303.		
2398. Summary of remaining write-ins for Line 23 from overflow page		
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	1,713,809	2,623,374
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page		
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)		
3001.		
3002.		
3003.		
3098. Summary of remaining write-ins for Line 30 from overflow page		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	*****	

	STATEMENT OF INCOME	1	2
	UNDERWRITING INCOME	Current Year	Prior Year
1.	Premiums earned (Part 1, Line 34, Column 4) DEDUCTIONS		
	Losses incurred (Part 2, Line 34, Column 7)		
3.	Loss expenses incurred (Part 3, Line 25, Column 1)		
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2) Aggregate write-ins for underwriting deductions		
6.	Total underwriting deductions (Lines 2 through 5)		
7.	Net income of protected cells		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) INVESTMENT INCOME		
	N	846,627	730,193
10.	Net investment income earned (Exhibit of Net Investment Income, Line 17) Net realized capital gains (losses) less capital gains tax of \$ 84,998 (Exhibit of Capital Gains (Losses)) Net investment gain (loss) (Lines 9 + 10)	157,853	
	OTHER INCOME		
12	Net gain (loss) from agents' or premium balances charged off		
12.	(amount recovered \$ 0 amount charged off \$ 0)		
13.	Finance and service charges not included in premiums		
14.	Aggregate write-ins for miscellaneous income		(30)
15. 16.	Total other income (Lines 12 through 14) Net income before dividends to policyholders, after capital gains tax		(30)
	and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	1,004,480	730,163
	Dividends to policyholders		
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	1 004 400	730,163
19.	Federal and foreign income taxes incurred		
	Net income (Line 18 minus Line 19) (to Line 22)		570,780
	CAPITAL AND SURPLUS ACCOUNT		
	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)		
	Net income (from Line 20) Net transfers (to) from Protected Cell accounts		570,780
1	Change in net unrealized capital gains or (losses) less capital gains tax of \$		
25.	Change in net unrealized foreign exchange capital gain (loss)		
26.	Change in net deferred income tax	(7,000)	(4,000)
27.	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)		
1	Change in surplus notes		
30.	Surplus (contributed to) withdrawn from protected cells		
	Cumulative effect of changes in accounting principles		
32.	Capital changes: 32.1 Paid in		
	32.1 Paid in 32.2 Transferred from surplus (Stock Dividend)		
	32.3 Transferred to surplus		
33.	Surplus adjustments:	(4,440,000)	
	33.1 Paid in 33.2 Transferred to capital (Stock Dividend)	(1,443,062)	
	33.3 Transferred from capital		
	Net remittances from or (to) Home Office		
	Dividends to stockholders Change in treasury stock (Page 3, Lines 34.1 and 34.2, Column 2 minus Column 1)	(9,289,938)	
	Aggregate write-ins for gains and losses in surplus		
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	(9,938,543)	566,780
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 35)	5,794,432	15,732,975
	DETAILS OF WRITE-INS		
0501.			
0502.			
0503.	Summary of remaining write-ins for Line 5 from overflow page		
	Totals (Lines 0501 through 0503 plus Line 0598) (Line 5 above)		
	01		(30)
1401.	Other income/(expenses)		[(30)
1403.			
	Summary of remaining write-ins for Line 14 from overflow page		,
	Totals (Lines 1401 through 1403 plus Line 1498) (Line 14 above)		(30)
3701.			
3702. 3703.			
	Summary of remaining write-ins for Line 37 from overflow page		
	Totals (Lines 3701 through 3703 plus Line 3798) (Line 37 above)		

CASH FLOW

	1	2
Cash from Operations	Current Year	Prior Year
Premiums collected net of reinsurance	(5,945)	(544,543)
Net investment income	954,649	926,829
3. Miscellaneous income	(4,185,848)	3,059,273
4. Total (Lines 1 through 3)	(3,237,144)	3,441,559
Benefit and loss related payments	307,274	(1,691,566)
Net transfers to Separate, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions		
8. Dividends paid to policyholders		
Federal and foreign income taxes paid (recovered) \$ 0 net of tax on capital gains (losses)	159,053	112,553
10. Total (Lines 5 through 9)	466,327	(1,579,013)
11. Net cash from operations (Line 4 minus Line 10)	(3,703,471)	5,020,572
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
	9,000,393	2,962,161
12.2 Stocks		
12.4 Real estate		
12.5 Other invested assets		
10.7 Miccelleneaus presende	(896)	
	,	2,962,161
12.8 Total investment proceeds (Lines 12.1 to 12.7) 13. Cost of investments acquired (long-term only):	3,043,437	2,302,101
40.4 Posts	2,025,477	247,246
12.2. Charles		
42.2 Madanas Irana		
13.4 Real estate	***************************************	* * * * * * * * * * * * * * * * * * * *
13.5 Other invested assets	***************************************	* * * * * * * * * * * * * * * * * * * *
13.6 Miscellaneous applications		50,000
13.7 Total investments acquired (Lines 13.1 to 13.6)	2,025,477	297,246
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	7,024,020	2,664,915
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	(1,443,062)	
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders	9,289,938	
16.6 Other cash provided (applied)	6,525,463	(4,468,422)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(4,207,537)	(4,468,422)
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)	(886,988)	3,217,065
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	3,284,575	67,510
19.2 End of year (Line 18 plus Line 19.1)	2,397,587	3,284,575
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**

UNDERWRITING AND INVESTMENT EXHIBIT PART 2 - LOSSES PAID AND INCURRED

	Losses Paid Less Salvage			5	6	7	8	
Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire								
2. Allied lines	I				l		l	.
Farmowners multiple peril								
Homeowners multiple peril								
Commercial multiple peril								
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine								
10. Financial guaranty								
11.1 Medical malpractice - occurrence								
11.2 Medical malpractice - claims - made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation								
17.1 Other liability - occurrence								
17.2 Other liability - claims - made								
18.1 Products liability - occurrence		********						
18.2 Products liability - claims - made								
19.1, 19.2 Private passenger auto liability	7,855,372		7,855,372					
19.3, 19.4 Commercial auto liability			7,050,572					
21. Auto physical damage	(79,170)	* * * * * * * * * * * * * * * * * * * *	(79,170)	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *			
22. Aircraft (all perils)	(19,110).	* * * * * * * * * * * * * * * * * * * *	(19,119).	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *			
00 =11 111	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *			
04 0								
00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
26. Burgiary and thett 27. Boiler and machinery								
28. Credit								
29. International		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *				
30. Reinsurance-Nonproportional Assumed Property	V V V	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *				
30. Reinsurance-Nonproportional Assumed Property 31. Reinsurance-Nonproportional Assumed Liability	XXX	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		
31. Reinsurance-Nonproportional Assumed Liability 32. Reinsurance-Nonproportional Assumed Financial Lines	XXX	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		
32. Aggregate write inc for other lines of hydrogen	[·····	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		
33. Aggregate write-ins for other lines of business	7,776,202		7,776,202					
34. IUIALS	1,116,202		1,116,202					
DETAILS OF WRITE-INS								
3301.								
		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		
3302.		* * * * * * * * * * * * * * * * * * * *						
3303.								
3398. Summary of remaining write-ins for Line 33 from overflow page								
3399. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)	1							

UNDERWRITING AND INVESTMENT EXHIBIT PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

			Repor	ted Losses			Incurred But Not Reported	d	8	9
		1	2 Daineuranea	3 Deduct Reinsurance Recoverable from Authorized and	4 Net Losses Excl. Incurred But	5	6	7	Net Losses	Unpaid Loss
	Line of Business	Direct	Reinsurance Assumed	Unauthorized Companies	Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Unpaid (Cols. 4 + 5 + 6 - 7)	Adjustment Expenses
1 2						(30)		(30)		
3	Farmowners multiple peril			* * * * * * * * * * * * * * * * * * * *		(59)		(39)		
1 4	Homeowners multiple peril			* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *		
5	Commercial multiple peril	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		
6	Madagas suggested			* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		
8	0			* * * * * * * * * * * * * * * * * * * *		(96)		(86)		
9				* * * * * * * * * * * * * * * * * * * *						
1				* * * * * * * * * * * * * * * * * * * *						
	1.1 Medical malpractice - occurrence			* * * * * * * * * * * * * * * * * * * *						
	I.2 Medical malpractice - occurrence			* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *		
1	Faith 1.			* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *		
1				* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *	(0)	
1				* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *	(a)	
						* * * * * * * * * * * * * * * * * * * *			(0)	
1 1				* * * * * * * * * * * * * * * * * * * *					(a)	
	6. Workers' compensation			* * * * * * * * * * * * * * * * * * * *						
	7.1 Other liability - occurrence							* * * * * * * * * * * * * * * * * * * *		
	7.2 Other liability - claims - made									
	3.1 Products liability - occurrence									
	3.2 Products liability - claims - made	0.005.004		0.005.004				0		
1	9.1, 19.2 Private passenger auto liability	8,695,091		8,695,091		355,789		355,789		
	9.3, 19.4 Commercial auto liability			* * * * * * * * * * * * * * * * * * * *						
2				* * * * * * * * * * * * * * * * * * * *						
2	2. Aircraft (all perils)			* * * * * * * * * * * * * * * * * * * *						
2				* * * * * * * * * * * * * * * * * * * *						
2										
2	Burglary and theft			* * * * * * * * * * * * * * * * * * * *						
2										
2										
2		XXX		* * * * * * * * * * * * * * * * * * * *						
3		XXX				XXX				
3	. Reinsurance-Nonproportional Assumed Liability	XXX				XXX				
3		XXX		* * * * * * * * * * * * * * * * * * * *		XXX				
3										
3	I. TOTALS	8,695,091		8,695,091		355,664		355,664		
	DETAILS OF WRITE-INS									
3	301.									
	000	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *						
	302. 303.	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		
ا ء	1998. Summary of remaining write-ins for Line 33 from overflow page									
<u>3</u>	399. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)									

UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1	Claim adjustment services:	Ехрепаса	Ехропосо	Ехрепосо	Total
•	1.1 Direct	2,121,477			2,121,477
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded				2,121,47
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				2,121,47
2	Commission and brokerage:		* * * * * * * * * * * * * * * * * * * *		
۷.	-				
	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		27.		
	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) \dots				
3.	Allowances to manager and agents				
4.	Advertising				
5.	Boards, bureaus and associations				
6.	Surveys and underwriting reports				
7.	Audit of assureds' records		* * * * * * * * * * * * * * * * * * * *		
8.	Salary and related items:				
	8.1 Salaries			4,572	4,572
	8.2 Payroll taxes			198	19
9.	Employee relations and welfare				19
	Insurance				1,5
	Directors' fees				
	Travel and travel items				15
	Rent and rent items				6
	Equipment			71	7
	Cost or depreciation of EDP equipment and software				37
				37	10
	Postage, telephone and telegraph, exchange and express				
	Legal and auditing			434	43/
	Totals (Lines 3 to 18)			5,795	5,79
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				
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)				
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
21.	Real estate expenses				
22.	Real estate taxes				
23.	Reimbursements by uninsured plans				
24.	Aggregate write-ins for miscellaneous expenses			677	67
25.	Total expenses incurred			6,472	(a) 6,472
26.	Less unpaid expenses-current year				
	Add unpaid expenses-prior year.				
28.	Amounts receivable relating to uninsured plans, prior year				
29.	Amounts receivable relating to uninsured plans, prior year Amounts receivable relating to uninsured plans, current year				
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			6,472	6,47
	DETAILS OF WRITE-INS				
	Other expenses			677	677
402.					
	Summary of remaining write-ins for Line 24 from overflow page				
	Totals /Lines 2401 through 2402 plus 2409\ /Line 24 shous\	***		677	67

DETAILS OF WRITE-INS			
2401. Other expenses	 	677	677
2402.	 		* * * * * * * * * * * * * * * * * * * *
2403.	 *		
2498. Summary of remaining write-ins for Line 24 from overflow page			
2499 Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)		677	677

⁽a) Includes management fees of \$ 6,472 to affiliates and \$ 0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1. 1.1	U.S. Government bonds Bonds exempt from U.S. tax Other bonds (unaffiliated)	(a) 359,560 (a) 394,861	287,533
1.3	Other bonds (unaffiliated) Bonds of affiliates Preferred stocks (unaffiliated) Preferred stocks of affiliates	(a) (a) (b) (b)	
2.2 2.21	Common stocks (unaffiliated) Common stocks of affiliates		
3. 4. 5.	Mortgage loans Real estate Contract loans	(c) (d)	
6. 7. 8.	Cash, cash equivalents and short-term investments Derivative instruments Other invested assets	(e) 175,098 (f)	174,694
9.	Aggregate write-ins for investment income	30,297	30,297
10.	Total gross investment income	959,816	500,000
11. 12. 13. 14. 15.	Investment expenses Investment taxes, licenses and fees, excluding federal income taxes Interest expense Depreciation on real estate and other invested assets Aggregate write-ins for deductions from investment income		(g) 6,472 (g) (h) (i)
16.	Total deductions (Lines 11 through 15)		6,472
17.	Net investment income (Line 10 minus Line 16)		846,627
	DETAILS OF WRITE-INS		
0902. 0903. 0998.	Miscellaneous Income (Expense) Summary of remaining write-ins for Line 9 from overflow page Totals (Lines 0901 through 0903) plus 0998 (Line 9, above)	30,297	30,297
1501. 1502. 1503. 1598.	Summary of remaining write-ins for Line 15 from overflow page Totals (Lines 1501 through 1503) plus 1598 (Line 15, above)		
(b) In (c) In (d) In (e) In (f) In (g) In (to (In))	cludes \$ 34,685 accrual of discount less \$ 0 amortization of premium and less cludes \$ 0 accrual of discount less \$ 0 amortization of premium.	9 \$ 0 paid for accrued constructed on the paid for accrued on the paid for accrued on the paid for accrued p	dividends on purchases. interest on purchases. interest on purchases.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Unrealized Increases (Decreases) by Adjustment	Total
1.	U.S. Government bonds	(19,112)			(19,112
1.1	Bonds exempt from U.S. tax				262,859
1.2	Other bonds (unaffiliated)				
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				
3.	Mortgage loans				
4.	Real estate				
5.	Contract loans Cash, cash equivalents and short-term investments				
6. 7.	B : " :				
7. 8.	Derivative instruments				
o. 9.	Other invested assets Aggregate write-ins for capital gains (losses)				
9. 10.	Total capital gains (losses)	242,851			242,85
10.	i otal oapital gallis (105565)	1 242,001			1 242,03

DETAILS OF WRITE-INS		
0901.	 	
0902.	 	
0903. 0998. Summary of remaining write-ins for Line 9 from overflow page	 	
0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9, 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 Delaware Department of Insurance, the accompanying financial statements of LM Personal 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 uses the following accounting policies:

- Short term investments are carried at cost, adjusted where appropriate for amortization of premium or discount, or market 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 market as specified by the Purposes and Procedures Manual of the NAIC Securities Valuation Office (SVO Manual).
- 3. The Company does not own unaffiliated common stocks.
- 4. The Company does not own unaffiliated preferred stocks
- 5. The Company does not own mortgage loans.
- 6. Mortgage backed/asset backed securities are stated at amortized cost or market based on guidance in the Purposes and Procedures Manual of the NAIC Securities Valuation Office (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. The Company does not own any subsidiaries, controlled, or affiliated entities.
- 8. The Company does not own any joint ventures, partnerships, or limited liability companies.
- 9. Derivative securities, refer to Note 8.
- 10. 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 2006.
- 13. The Company has no pharmaceutical rebate receivables.

Note 2- Accounting Changes and Correction of Errors

A. There were no material changes in accounting principle or correction or 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

Not applicable

Note 4- Discontinued Operations

The Company has no discontinued operations to report.

Note 5- Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company has no mortgage loans.

B. Troubled Debt Restructuring for Creditors

Not applicable

C. Reverse Mortgages

The Company has no reverse mortgages.

- D. Loan-Backed Securities
 - 1. The Company elected to use the book value as of January 1, 1994 as the cost for applying the retrospective adjustment method to securities purchased prior to that date, where historical cash flows are not readily available.
 - 2. Prepayment speed assumptions are updated monthly with data sourced from the Bloomberg data service.
 - 3. The Company had no negative yield situations requiring a change from the retrospective to prospective method.
- E. Repurchase Agreements

The Company did not enter into any repurchase agreements during the year.

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. The Company has no investments in joint ventures, partnerships, or limited liability companies.
- B. Impairments on joint ventures, partnerships and limited liability companies

Not applicable

Note 7- Investment Income

A. Accrued Investment Income

All investment income due and accrued over 90 days past due is excluded from Surplus.

B. Amounts Nonadmitted

No amounts were excluded as of December 31, 2006.

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

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

	December 31, 2006	December 31, 2005	Change
Total of gross deferred tax assets	2,000	1,000	1,000
Total of deferred tax liabilities	(14,000)	(6,000)	(8,000)
Net deferred tax liability	(12,000)	(5,000)	(7,000)
Net deferred tax asset non-admitted	0	0	0
Net deferred tax asset liability	(12,000)	(5,000)	(7,000)

B. The Company does not have any deferred tax liabilities described in SSAP No. 10, Income Taxes, paragraph 6d.

C. The provisions for incurred taxes on earnings for the years ended December 31 are:

	2006	2005
Federal tax on operations	203,023	159,383
Net operating loss benefit	0	0
Foreign tax on operations	0	0
Income tax incurred on operations	203,023	159,383
Tax on capital gains	84,998	0
Total income tax incurred	288,021	159,383

The Company's deferred tax liabilities result from the reversal of discount accretion on bonds.

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

	2006
Change in net deferred income tax (without unrealized gain or loss)	(7,000)
Tax effect of unrealized (gains) losses	0
Total change in net deferred income tax	(7,000)

- D. Effective tax rates differ from the current statutory rate of 35% due to the effects of tax-exempt interest and revision to prior year estimates.
- E. The amount of Federal income taxes paid and available for recoupment in the event of future losses is \$272,000 from the current year and \$148,000 from the preceding year.

The Company had no net loss carryforward available to offset future net income subject to Federal income taxes.

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

Access Insurance Services, Co.

Ambco Capital Corporation

America First Insurance Company

America First Lloyds Insurance Company

American Ambassador Casualty Company

Berkeley Holding Company Associates, Inc.

Berkeley Management Corporation

Bridgefield Casualty Insurance Company

Bridgefield Employers Insurance Company

Capitol Agency, Inc. (Arizona corporation)

Capitol Agency, Inc. (Ohio corporation)
Capitol Agency, Inc. (Tennessee corporation)
Cascade Disability Management, Inc.
Colorado Casualty Insurance Company

Companies Agency Insurance Services of California

Companies Agency of Alabama, Inc.
Companies Agency of Georgia, Inc.
Companies Agency of Kentucky, Inc.
Companies Agency of Massachusetts, Inc.
Companies Agency of Michigan, Inc.
Companies Agency of New York, Inc.
Companies Agency of Pennsylvania, Inc.
Companies Agency of Phoenix, Inc.
Consolidated Insurance Company
Copley Venture Capital, Inc.
Countrywide Services Corporation
Diversified Settlements, Inc.

Employers Insurance Company of Wausau

Excelsior Insurance Company First State Agency, Inc. Florida State Agency, Inc.

Globe American Casualty Company Golden Eagle Insurance Corporation

Gulf States AIF, Inc.

Hawkeye-Security Insurance Company Helmsman Insurance Agency of Illinois, Inc. Helmsman Insurance Agency of Texas, Inc.

Helmsman Insurance Agency of Texas, Inc. Heritage-Summit Healthcare of Florida, Inc.

Indiana Insurance Company

LEXCO Limited

Liberty Assignment Corporation
Liberty Energy Corporation
Liberty Financial Services, Inc.
Liberty Hospitality Group, Inc.
Liberty Insurance Company of America
Liberty Insurance Corporation

Liberty Insurance Holdings, Inc.
Liberty Insurance Underwriters, Inc.

Liberty Life Holdings, Inc.

Liberty Lloyds of Texas Insurance Company

Liberty Management Services, Inc. Liberty Mexico Holdings, Inc.

Liberty Mutual Fire Insurance Company

Liberty Mutual Group Inc.

Liberty Mutual Holding Company, Inc. Liberty Mutual Insurance Company Liberty Mutual Managed Care, Inc.

Liberty Mutual Personal Insurance Company Liberty Northwest Insurance Corporation Liberty Personal Insurance Company Liberty RE (Bermuda) Limited Liberty Real Estate Corporation

Liberty Sponsored Insurance (Vermont) Inc. Liberty Surplus Insurance Corporation

Liberty-USA Corporation
LIH-Re of America Corporation
LIH U.S. P&C Corporation
LIIA Insurance Agency, Inc.

LIU Specialty Insurance Agency, Inc. LLS Insurance Agency of Nevada, Inc. LM Insurance Corporation

LMHC Massachusetts Holding, Inc.

LRE Properties, Inc.

Mid-American Agency, Inc.

Mid-American Fire and Casualty Company

Missouri Agency, Inc.

North Pacific Insurance Company Oregon Automobile Insurance Company Peerless Indemnity Insurance Company

Peerless Insurance Company LM Personal Insurance Company LM General Insurance Company

LM Property and Casualty Insurance Company

San Diego Insurance Company

State Agency, Inc. (Indiana corporation)
State Agency, Inc. (Wisconsin corporation)

St. James Insurance Company Summit Consulting, Inc.

Summit Consulting, Inc. of Louisiana Summit Holding Southeast, Inc. The First Liberty Insurance Corporation The Midwestern Indemnity Company

The National Corporation

The Netherlands Insurance Company Wausau Business Insurance Company Wausau General Insurance Company

Liberty International Asia Pacific Holdings, Inc.

Wausau Service Corporation
Wausau Signature Agency, Inc.

Liberty Life Assurance Company of Boston Wausau Underwriters Insurance Company

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

- A. All of the outstanding shares of capital stock of the Company are held by Liberty Mutual Insurance Company ("LMIC") an insurance company incorporated in Massachusetts. The ultimate parent of LMIC is Liberty Mutual Holding Company, Inc., a Massachusetts company.
- B. Transactions entered into by the Company with its affiliates are described on Schedule Y Part 2.

During 2006 the Company paid an ordinary dividend of \$ 1,573,298 to its parent, LMIC. The Company also paid its parent, pursuant to the approval of its domiciliary state, an extraordinary dividend of \$ 7,716,640 and a return of capital distribution of \$ 1,443,062.

- C. There have been no material transactions with the Company's affiliates during 2006.
- D. At December 31, 2006 the company reported \$2,721,845 due to affiliates. In general the terms of the intercompany arrangements require settlement at least quarterly.
- E. The Company did not have any material contingent exposures of assets to liabilities as a result of guarantees or undertakings for the benefits of an affiliate.
- F. See Note 26 for information regarding intercompany pooling arrangement.

There is a "Service Agreement" between the Company and LMIC, under which LMIC provides the Company with services of personnel employed by LMIC, office space, supplies, equipment, telephone and wire services, the use of computers and similar machines to the extent necessary or appropriate. The Company has an investment services agreement LMIC.

There is a "Distribution Agreement" between the Company and Helmsman Insurance Agency, Inc., ("Helmsman") whereby Helmsman provides agent commission payments, accounting, office services and other services under the terms of the "Distribution Agreement".

- G. The Company is part 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.
- I. The Company has no investments in subsidiary, controlled or affiliated companies.
- J. Impairment of subsidiaries

Not Applicable

K. The Company does not hold investments in foreign subsidiaries.

Note 11- Debt

- A. The Company has no capital notes.
- B. The Company has no outstanding borrowed money.

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 Agreement as described in Note 10 F.

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

- 1. The Company has 5,000 shares authorized, and 2,000 shares issued and outstanding as of December 31, 2006. All shares have a stated par value of \$1,750.
- 2. Preferred Stock

Not applicable

3. Dividend Restrictions

There are no dividend restrictions.

4. The maximum amount of dividends that can be paid by Delaware domiciled insurance companies to shareholders without

prior approval of the Insurance Commissioner, is the greater of (a) 10% of policyholder's surplus, or (b) net income, not including realized capital gains. The maximum dividend payout that may be made without prior approval during 2007 is \$643,604.

- The Company does not have restricted unassigned surplus.
- 6. The Company had no advances to surplus.
- 7. The Company does not hold stock for special purposes.
- 8. The Company does not hold special surplus funds.
- 9. The portion of unassigned funds (surplus) represented by cumulative unrealized gains and (losses) is \$0.
- 10. Surplus Notes

Not applicable

11. Quasi re-organization (dollar impact)

Not applicable

12. Quasi re-organization (effective date)

Not applicable

Note 14- Contingencies

A. Contingent Commitments

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

B. Assessments

The Company is subject to guaranty fund and other assessments by the states in which it writes business. Guaranty fund assessments are accrued at the time of insolvencies. Other assessments are accrued either at the time of assessments or in the case of premium based assessments, at the time the premiums are written, or, in the case of loss based assessments, at the time the losses are incurred.

As a result of the inter-company 100% Quota Share Reinsurance Agreement (see Note 26), all guaranty fund and other assessments liabilities are ceded to LM Property and Casualty Insurance Company ("LMPAC").

C. Gain Contingencies

Not applicable

D. 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. The Company is not involved in material lease obligations.
- B. Leasing as a significant part of lessor's business activities

Not applicable

Note 16- Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

The Company is not exposed to financial instruments with off-balance sheet risk or with concentrations 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 transfer 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 securities are loaned for a short period of time from the Company's portfolio to qualifying third parties, via a lending agent. Under the terms of the lending agreement, the company does not participant in term loans. Therefore, the company does not have 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. The market value of the loaned securities is monitored and additional collateral is obtained if the market value of the collateral falls below 100% of the market value of the loaned securities. Additionally, the lending agent indemnifies the Company against borrower defaults. Under the terms of the securities lending program, all collateral is restricted. Cash collateral is carried as a liability on the balance sheet, as, while the collateral is restricted, 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, 2006 the total market value of fixed maturities on loan was \$2,914,340.90 with corresponding collateral value of \$2,972,346.26 of which \$1,691,770.60 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 through managing general agents or third party administrators.

Note 20 – September 11 Events

As a result of the inter-company 100% Quota Share Reinsurance Agreement with LMPAC (see Note 26), the Company has no net exposure to losses arising from the September 11, 2001 World Trade Center disaster.

Note 21- Other Items

- A. The Company has no extraordinary items to report.
- B. Troubled Debt Restructuring for Debtors

Not applicable

C. Other Disclosures

Assets in the amount of \$3,615,751 and \$3,599,431 as of December 31, 2006 and 2005, respectively, were on deposit with government authorities or trustees as required by law.

- D. As a result of the inter-company 100% Quota Share Reinsurance Agreement with LMPAC (see Note 26), the Company has no exposure to uncollectible premium receivable balances.
- E. Business Interruption Insurance Recoveries

The Company does not purchase Business Interruption coverage.

F. Hybrid Securities

The Company does not hold hybrid securities.

G. State Transferable Tax Credits

The Company does not hold state transferable tax credits.

H. Impact of Medicare Modification Act on Post Retirement Benefits

Not applicable. (Refer to Note 12)

Note 22- Events Subsequent

There were no events subsequent to December 31, 2006 that would require disclosure.

Note 23- Reinsurance

A. Excluding amounts arising pursuant to the inter-company Reinsurance Agreement, as described in Note 26, there are no

unsecured reinsurance recoverables with an individual reinsurer which exceed 3% of policyholders surplus.

- B. There are no reinsurance recoverables in dispute from an individual reinsurer which exceeds 5% of the Company's surplus. In addition, the aggregate reinsurance recoverables in dispute do not exceed 10% of the Company's surplus.
- C. The Company has no unearned premium reserves for direct, assumed or ceded business.

There are no sliding scale adjustments, or other profit sharing commissions for direct, assumed or ceded business.

The Company does not use protected cells as an alternative to traditional reinsurance.

- D. The Company has not written off any uncollectible balances in the current year.
- E. The Company has not recorded any commutations in the current year.
- F. The Company has no retroactive reinsurance.
- G. There are no contracts recorded as deposit accounting.

Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

The Company does not have net accrued retrospective premiums.

Note 25 - Changes in Incurred Losses and Loss Adjustment Expenses

As a result of the inter-company 100% Quota Share Reinsurance Agreement with LMPAC (see Note 26), the Company has no net exposure to changes in incurred losses and loss adjustment expenses.

Note 26- Intercompany Pooling Arrangements

The Company participates in a 100% Quota Share Reinsurance Agreement with an affiliate, LMPAC Pursuant to the Agreement, after external reinsurance, the Company cedes its net underwriting activity to LMPAC.

Note 27- Structured Settlements

- A. As a result of the inter-company 100% Quota Share Reinsurance Agreement with LMPAC (see Note 26), the Company has no net exposure to contingent liabilities from the purchase of annuities.
- B. Not applicable

Note 28 - Health Care Receivables

Not applicable

Note 29 - Participating Policies

Not applicable

Note 30 - Premium Deficiency Reserves

As of December 31, 2006, the Company had no liabilities related to premium deficiency reserves. The Company considers anticipated investment income when calculating its premium deficiency reserves.

Note 31- High Dollar Deductible Policies

As a result of the inter-company 100% Quota Share Reinsurance Agreement with LMPAC (see Note 26), the Company does not have any net high dollar deductible policy liabilities.

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

Not applicable

Note 33 - Asbestos/Environmental Reserves

As a result of the inter-company 100% Quota Share Reinsurance Agreement with LMPAC (see Note 26), the Company has no net exposure to asbestos and environmental claims.

Note 34- Subscriber Savings Accounts

The Company is not a reciprocal insurance company.

Note 35 - Multiple Peril Crop Insurance

Not applicable

SUMMARY INVESTMENT SCHEDULE

Gross Investment Holdings		Admitted <i>A</i> Reported Annual St	d in the	
Investment Categories	1 Amount	2 Percentage	3 Amount	4 Percentage
1. Bonds:				
1.1 U.S. treasury securities	7,855,743	76.617	7,855,743	76.617
1.2 U.S. government agency obligations (excluding mortgage-backed securities):				
1.21 Issued by U.S. government agencies				
1.22 Issued by U.S. government sponsored agencies				
1.3 Foreign government (including Canada, excluding mortgage-backed securities)				
1.4 Securities issued by states, territories, and possessions				
and political subdivisions in the U.S.:				
1.41 States, territories and possessions general obligations 1.42 Political subdivisions of states, territories and possessions and political				
and district and and additional				
4.40 D		* * * * * * * * * * * * * * * * * * * *		
1.43 Revenue and assessment obligations 1.44 Industrial development and similar obligations				
1.5 Mortgage-backed securities (includes residential and commercial MBS):				
1.51 Pass-through securities:				
1.511 Issued or guaranteed by GNMA				
1.512 Issued or guaranteed by FNMA and FHLMC				
1.513 All other				
1.52 CMOs and REMICs:				
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA				
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-				
backed securities issued or guaranteed by agencies shown in Line 1.521				
1.523 All other				
Other debt and other fixed income securities (excluding short term): Output Out				
2.1 Unaffiliated domestic securities (includes credit tenant loans rated by the SVO)				
2.2 Unaffiliated foreign securities 3.3 Affiliated securities				
Z.3 Amiliated securities Equity interests:				
2.1 Investments in mutual funds				
3.2 Preferred stocks:		*****		
3.21 Affiliated				
3.22 Unaffiliated				
3.3 Publicly traded equity securities (excluding preferred stocks):				
3.31 Affiliated				
3.32 Unaffiliated				
3.4 Other equity securities:				
3.41 Affiliated				
3.42 Unaffiliated 3.5 Other equity interests including tangible personal property under lease:		* * * * * * * * * * * * * * * * * * * *		
2.54.455-4-4				
3.51 Amiliated 3.52 Unaffiliated				
4. Mortgage loans:				
4.1 Construction and land development				
4.2 Agricultural				
4.3 Single family residential properties				
4.4 Multifamily residential properties				
4.5 Commercial loans				
4.6 Mezzanine real estate loans				
5. Real estate investments:				
5.1 Property occupied by company				
5.2 Property held for production of income				
(including \$ 0 of property acquired in satisfaction of debt) 5.3 Property held for sale (including \$ 0 property				
G. Contract loans				
Contract loans Receivables for securities				
Cash, cash equivalents and short-term investments	2,397,586	23.383	2,397,586	23.383
Other invested assets	1			
10. Total invested assets	10,253,329	100.000	10,253,329	100.000
		•		

PART 1 - COMMON INTERROGATORIES

GENERAL

]

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?	Yes[>	(] No	[]
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?	Yes [X	(] No	[] N/A[
1.3	State Regulating?		Del	laware
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes [] No	[X]
2.2	If yes, date of change:			
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made.		12/31	1/2002
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.		12/31	1/2002
3.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).		09/09	9/2003
3.4	By what department or departments? State of Delaware Insurance Department			
4.1	combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:			
	4.11 sales of new business? 4.12 renewals?	Yes [Yes [•	[X] [X]
4.2	During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:		,	[]
	4.21 sales of new business?	Yes [] No	[X]
	4.22 renewals?	Yes [] No	[X]
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	Yes [] No	[X]
5.2	If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.			
	1 2 3			
	Name of Entity NAIC Company Code State of Domicile			
	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) [Yes, Exiqued or revoked by any governmental entity during the reporting period?			
6.2	If yes, give full information			
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?	Yes [] No	[X]
7.2	If yes,			00/
	 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact. 			0%
	1 2			
	Nationality Type of Entity			
8.1 8.2	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? If response to 8.1 is yes, please identify the name of the bank holding company.	Yes [] No	[X]
U.Z	in response to 6.1 is yes, prease reciting the maine of the bank floruling company.			

PART 1 - COMMON INTERROGATORIES

	Is the company affiliated with one or m If response to 8.3 is yes, please provid financial regulatory services agency [i. Thrift Supervision (OTS), the Federal E affiliate's primary federal regulator.	le the names and locations (city and st e. the Federal Reserve Board (FRB), tl	he Office of the Comptrolle	er of the Currency	v (OCC), the Off	al ice of	s[] No[X]	
	1	2	3	4	5	6	7	
	A 6011					====		
	Affiliate Name	Location (City, State)	FRB	000	OTS	FDIC	SEC	
							\vdash	
9.	What is the name and address of the in Ernst & Young, LLP 200 Clarendon Street, Boston MA 021:							
10.	What is the name, address and affiliati consulting firm) of the individual provid 175 Berkeley Street, Boston, MA 0211 Officer of Liberty Mutual Insurance Con	on (officer/employee of the reporting e ing the statement of actuarial opinion/o 7	ntity or actuary/consultant certification? Roy K. Morel	associated with a	an actuarial			
11.1	Does the reporting entity own any secu	urities of a real estate holding company	or otherwise hold real es	tate indirectly?		Yes	s[]No[X]	
			e of real estate holding cor	mpany				0
		11.13 Total	per of parcels involved book/adjusted carrying va	lue		\$		0
11.2	If yes, provide explanation					* * * *		
40				* * * * * * * * * * * * * * * * * * * *		* * * *		
	FOR UNITED STATES BRANCHES C What changes have been made during			toos of the report	ing ontity?			
12.1	what changes have been made during					* * * *		
10.0	Describis eleterated and in all business						-	
	Does this statement contain all business Have there been any changes made to		•	anch on risks wh	erever located?		s[] No[X]	
	If answer to (12.3) is yes, has the dom	,	•				s[] No[X] s[] No[]	Ν/ΔΓΥ1
12.4	ii allower to (12.5) is yes, has the doll	iciliary or entry state approved the cha	inges:			16.	3[] NO[]	IVA[A]
		BOARI	D OF DIRECTORS					
13.	Is the purchase or sale of all investmer committee thereof?	nts of the reporting entity passed upon	either by the board of dire	ectors or a subord	linate	Ye	s[]No[X]	
14.	Does the reporting entity keep a compl	ete permanent record of the proceeding	ngs of its board of directors	s and all subordin	ate			
	committees thereof?					Yes	s[X] No[]	
15.	Has the reporting entity an established affiliation on the part of any of its office official duties of such person?					Ye	s[X] No[]	
			FINANCIAL					
16.1	Total amount loaned during the year (ii							
		·	rectors or other officers			\$		0
			ockholders not officers ees, supreme or grand (Fr	aternal only)		\$		0
16.2	Total amount of loans outstanding at the			• •		<u> </u>		
10.2	Total amount of loans outstanding at the	, ,	rectors or other officers	oy lourio).		\$		0
			ockholders not officers ees, supreme or grand (Fr	atornal only)		\$		0
17.1	Were any assets reported in this stater obligation being reported in the statement	ment subject to a contractual obligation	, ,	• ,	oility for such	Ye:	s[] No[X]	U
17.2	If yes, state the amount thereof at Dec	ember 31 of the current year:						
			ed from others			\$		0
			wed from others ed from others			\$ \$		0
		17.24 Other	•			\$		0
18.1	Does this statement include payments association assessments?	for assessments as described in the A	Annual Statement Instruction	ons other than gu	aranty fund or g		s[] No[X]	
18.2	If answer is yes:	19.21 Amou	ınt paid as losses or risk a	diustment		¢		0
		18.22 Amou	int paid as expenses	ajastiil o iit		\$ \$		0
		18.23 Other	amounts paid			\$		0
19.1	Does the reporting entity report any an	nounts due from parent, subsidiaries or	r affiliates on Page 2 of thi	is statement?		Yes	s[] No[X]	

PART 1 - COMMON INTERROGATORIES

19.2	If yes, indicate any amounts receivable from pare	ent included in the Page 2 amount:			\$0
		INVEST	MENT		
20.1	Were all the stocks, bonds and other securities o in the actual possession of the reporting entity or				Yes [X] No []
20.2	If no, give full and complete information, relating	thereto			
21.1	Were any of the stocks, bonds or other assets of control of the reporting entity, except as shown or any assets subject to a put option contract that is	n Schedule E - Part 3 - Special Depos	its, or has the re	porting entity sold or transferred	Yes [X] No []
21.2	If yes, state the amount thereof at December 31		·	- , ,	
		21.21 21.22 21.23 21.24	Subject to rever Subject to dollar	chase agreements se repurchase agreements r repurchase agreements	\$ 2,914,341 \$ 0 \$ 0 \$ 0
			Pledged as colla	se dollar repurchase agreements	\$ <u> </u>
			•	otion agreements	\$ 0
				securities restricted as to sale	\$ 0
04.0	- (04.00)	21.29	Other		\$0
21.3	For category (21.28) provide the following:		<u> </u>	3	
	Nature of Restriction	Descr	=	Amount	
22.1	Does the reporting entity have any hedging trans-	actions reported on Schedule DB?			Yes[] No[X]
22.2	If yes, has a comprehensive description of the he	edging program been made available t	o the domiciliary	state?	Yes [] No [] N/A [X]
	If no, attach a description with this statement.				
23.1	Were any preferred stocks or bonds owned as of issuer, convertible into equity?	December 31 of the current year mar	datorily converti	ble into equity, or, at the option of the	Yes [] No [X]
23.2	If yes, state the amount thereof at December 31	of the current year.			\$0
	Excluding items in Schedule E, real estate, mortg safety deposit boxes, were all stocks, bonds and with a qualified bank or trust company in accorda Financial Condition Examiners Handbook?	other securities owned throughout the ince with Part 1-General, Section IV.H	current year he -Custodial or Sa	ld pursuant to a custodial agreement fekeeping agreements of the NAIC	Yes [X] No []
24.01	For agreements that comply with the requirement	ts of the NAIC Financial Condition Exa	aminers Handboo	ok, complete the following:	
	1	F ()		2	
	Name of Custo JP MORGAN CHASE		3 Chase Metro	Custodian's Address Tech Center, Brooklyn, NY 11245	
24.02	For all agreements that do not comply with the rename, location and a complete explanation:	equirements of the NAIC Financial Cor	ndition Examiner	s Handbook, provide the	
	1 Name(s)	2 Location(s)		3 Complete Explanation(s)	
	rvanio(3)	Location(3)		Complete Explanation(3)	
	Have there been any changes, including name changes, give full and complete information relating		n 24.01 during th	e current year?	Yes [] No [X]
	1	2	3	4	
	Old Custodian	New Custodian	Date of Change	Reason	
24.05	Identify all investment advisors, brokers/dealers of investment accounts, handle securities and have				
	1 Central Registration	2		3	
	Depository Number(s)	Name		Address	
					

PART 1 - COMMON INTERROGATORIES

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

25.2 If yes, complete the following schedule:

1	2	3
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value
25.2999 Total		

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

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

26. 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
	Value	Fair Value	over Statement (+)
26.1 Bonds	8,808,411	8,651,351	(157,060)
26.2 Preferred stocks			
26.3 Totals	8,808,411	8,651,351	(157,060)

26.4	Describe the	sources or methods utilized in determining the fair values: SVC	D, FTID CORP, B	LOOMBERG, BROKE	R QUOTES, ANALYTICALLY	/ DETERMINE	ED	
27.1	Have all the f	ling requirements of the Purposes and Procedures manual of t	the NAIC Securiti	es Valuation Office be	en followed?	Yes [X]	No []
27.2	If no, list exce	eptions:						
			OTHER					
28.1	Amount of pa	yments to trade associations, service organizations and statisti	ical or rating bure	aus, if any?		\$		0
28.2		of the organization and the amount paid if any such payment r service organizations and statistical or rating bureaus during the	•		ayments to trade			
		1		2	1			
		Name		Amount Paid				
	ı		1 ¢		1			

1	2
Name	Amount Paid
	\$
	\$
	\$
•	

29.1 Amount of payments for legal expenses, if any?

0

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

1	2
Name	Amount Paid
	\$
	\$
	\$

30.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?

\$	0
----	---

30.2 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
	\$
	\$
	\$
	\$

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force?] NO [X]	
1.2	If yes, indicate premium earned on U. S. business only.				\$		
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement	ent Insurance Experience Exhibit?			\$		
	1.31 Reason for excluding						
1 1	Indicate amount of council arounium attributable to Council an and/or	Other Alien not included in Item (1	(2) above		Ф		
	Indicate amount of earned premium attributable to Canadian and/or	,	i.2) above.		\$\$		
	Indicate total incurred claims on all Medicare Supplement insurance	•			—		
1.6	Individual policies:	rent three wears					
		rent three years:			¢		
		Total premium earned			\$		
		Total incurred claims			\$		
		Number of covered lives			\$		
	•	prior to most current three years:			•		
		Total premium earned			\$		
		Total incurred claims			\$		
		Number of covered lives			\$		
1.7	Group policies:						
		rent three years:					
	1.71	Total premium earned			\$		
	1.72	Total incurred claims			\$		
		Number of covered lives			\$		
	All years	prior to most current three years:					
	1.74	Total premium earned			\$		
		Total incurred claims			\$		
	1.76	Number of covered lives			\$		
2	Health Test:						
۷.	Health 165t.		1	2			
			Current Year	Prior Year			
	2.1 Prer	mium Numerator	\$	\$			
	2.2 Prer	mium Denominator	\$	\$			
	2.3 Prer	mium Ratio (2.1/2.2)					
	2.4 Res	serve Numerator	\$	\$			
	2.5 Res	serve Denominator	\$	\$			
	2.6 Res	serve Ratio (2.4/2.5)	****				
3.1	Does the reporting entity issue both participating and non-participating	na policies?			YES] NO [X]	
	If yes, state the amount of calendar year premiums written on:						
		Participating policies			\$		
		Non-participating policies			\$		
4.	For Mutual Reporting Entities and Reciprocal Exchange only:	. pp. 5p			·		
4.1	Does the reporting entity issue assessable policies?				YESI] NO [X]	
4.2	Does the reporting entity issue non-assessable policies?]NO[X]	
4.3	If assessable policies are issued, what is the extent of the continger	nt liability of the policyholders?			120[140 [X]	
4.4	Total amount of assessments paid or ordered to be paid during the		nt nremiums		\$		
5.	For Reciprocal Exchanges Only:	your on appoint notes or continger	it promiumo.		Ψ		
5.1	Does the exchange appoint local agents?				VES I] NO [X]	
					ILU	INO[X]	
J.Z	If yes, is the commission paid: 5.21	Out of Attorney's-in-fact compensation	ation		VEC I] NO [] N/A [X]	
		•			-		
5 2		As a direct expense of the exchange of the Atterney in fact?] NO [] N/A [X]	
ა.პ	What expenses of the Exchange are not paid out of the compensation	on or the Attorney-In-ract?	**********				
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of o	certain conditions, been deferred?			YES [] NO [X]	
5.5	If yes, give full information		*****				

(Continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	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: The company employs industry recognized catastrophe modeling	••
	software to estimate the PML. For property exposures, we employ RiskLink v6.0 from RMS and AIR Clasic/2 v 8.0 from AIR. For WC, Liberty Mutual utilizes Risk Link v6.0 from RMS.	
	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? The Company has a 100% Quota share agreement with LM Property and Casualty Insurance Company	
6.5	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? 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	YES[X]NO[]
7.2	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)? If yes, indicate the number of reinsurance contracts containing such provisions. If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting	YES[]NO[X]
8.1	provision(s)? 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? If yes, give full information	YES[]NO[X]
	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 3% 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 3% 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) An unconditional or unilateral right by either party to commute the reinsurance contract 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[X]NO[]
	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), 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	
9.3	or its affiliates. If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatroy 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.	YES[X]NO[]
	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]
10. 11.1	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. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Has the reporting entity guaranteed policies issued by any other entity and now in force: If yes, give full information	YES[]NO[]N/A[X] YES[]NO[X]

(Continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

12.1	If the reporting entity recorded accrued ramount of corresponding liabilities record		on insurance contract	s on Line 13.3 of the as	sset schedule, Page 2, s	tate the	
		12.11	Unpaid losses				\$
		12.12	Unpaid underwriting	expenses (including lo	oss adjustment expense	3)	\$
12.2	Of the amount on Line 13.3, Page 2, sta	te the amount that is s	ecured by letters of cre	dit, collateral and other	funds?		\$
12.3	If the reporting entity underwrites comme	ercial insurance risks, s	such as workers' comp	ensation, are premium	notes or promissory not	es accepted	
	from its insureds covering unpaid premiu	ıms and/or unpaid loss	es?				YES[]NO[]N/A[X]
12.4	If yes, provide the range of interest rates	ŭ	• .	covered by this statem	ent:		
		12.41					
		12.42					
12.5	Are letters of credit or collateral and other		-				
	promissory notes taken by a reporting er		of the reporting entity's	reported direct unpaid	loss reserves, including	unpaid	V=0.1.10.1V.
	losses under loss deductible features of	·					YES[]NO[X]
12.6	If yes, state the amount thereof at Decer	· ·					•
		12.61					\$
40.4		12.62					\$
	Largest net aggregate amount insured in		-				\$
13.2	Does any reinsurance contract considered	ed in the calculation of	this amount include an	aggregate limit of reco	overy without also includ	ng a	VEGININGI
40.0	reinstatement provision?	(. /) at at	res lice s datas are.	and the Charles of the	Half a construction of the	- P -	YES[X]NO[]
13.3	State the number of reinsurance contract	· -		=	litative programs, autom	atic	4
	facilities or facultative obligatory contract	ts) considered in the ca	alculation of the amoun	τ.			1
14.1	Is the company a cedant in a multiple ce	dant reinsurance contr	act?				YES[X]NO[]
14.2	If yes, please describe the method of alle	ocating and recording r	einsurance among the	cedants: Premiu	ms and recoverables we	re allocated	
	pursuant to separate intercompany pooli	ng agreements					
14.3	If the answer to 14.1 is yes, are the meth	nods described in item	14.2 entirely contained	in the respective multi	ple cedant reinsurance		V507 1N07V1
	contracts?		0 0 1 (-1 11 -	:11.			YES[]NO[X]
	If the answer to 14.3 is no, are all the me						YES[X]NO[]
14.5	If the answer to 14.4 is no, please explain	in:					
15.1	Has the reporting entity guaranteed any	financed premium acco	ounts?				YES[]NO[X]
15.2	If yes, give full information						
16 1	Does the reporting entity write any warra						YES[]NO[X]
10.1	If yes, disclose the following information	-	ng types of warranty on	vorago:			TES[]NO[X]
	if yes, disclose the following information	TOI Each of the following	ig types of warranty co	verage.			
		1	2	3	4	5	
		Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premiur	n
		Incurred	Unpaid	Premium	Unearned	Earned	
	16 11 Home	c	·	¢	¢	¢	
	16.11 Home	Ф	Ф Ф	Ф	Ф	Ф	
	16.12 Products	Ф	\$	D	Ф 	Ф	
	16.13 Automobile	Ф 	Ф Ф	φ •	Φ	Φ	
	16.14 Other*	Φ	Φ	Φ	Φ	Φ	**
	* Disclose type of coverage:						

(Continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1	Does the reporting entity include amounts recoverable on unaut	nonzed reinsurance in Schedule F - Part 3 that it excludes nom	
	Schedule F - Part 5.		YES[]NO[X]
	Incurred but not reported losses on contracts not in force on Jul	y 1, 1984 or 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	\$
	17.12	Unfunded portion of Interrogatory 17.11	\$
	17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$
	17.14	Case reserves portion of Interrogatory 17.11	\$
	17.15	Incurred but not reported portion of Interrogatory 17.11	\$
	17.16	Unearned premium portion of Interrogatory 17.11	\$
	17.17	Contingent commission portion of Interrogatory 17.11	\$
	Provide the following information for all other amounts included	in Schedule F - Part 3 and excluded from Schedule F - Part 5, not included above.	
	17.18	Gross amount of unauthorized reinsurance in Schedule F - Part 3	
		excluded from Schedule F - Part 5	\$
	17.19	Unfunded portion of Interrogatory 17.18	\$
	17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$
	17.21	Case reserves portion of Interrogatory 17.18	\$
	17.22	Incurred but not reported portion of Interrogatory 17.18	\$
	17.23	Unearned premium portion of Interrogatory 17.18	\$

17.24 Contingent commission portion of Interrogatory 17.18

FIVE-YEAR HISTORICAL DATA

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

		1 2006	2 2005	3 2004	4 2003	5 2002
1.	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,					
	19.1, 19.2 & 19.3, 19.4)		(67,737)	29,879,364	44,556,651	41,365,576
2.	Property lines (Lines 1, 2, 9, 12, 21 & 26)		(19,825)	21,727,733	31,990,297	30,583,335
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)					
5.	Nonproportional reinsurance lines (Lines 30, 31 & 32)		(07.500)	F4 C07 007	70 540 040	74.040.044
6.	Total (Line 34) Net Premiums Written (Page 8, Part 1B, Col. 6)		(87,562)	51,607,097	76,546,948	71,948,911
7.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
8.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)					
11.	7,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
12.	Total (Line 34)					
	Statement of Income (Page 4)					
13.	/		720 402		700 020	
14. 15.	7.1		730,193	647,453	768,830 (11,115)	827,073
16.	D' 1		(30)	(8)	(11,113)	(272)
17.			159,383	132,570	158,093	215,655
	Net income (Line 20)	801,457	570,780	514,875	599.622	611,146
	Balance Sheet Lines (Pages 2 and 3)					
19.	Total admitted assets excluding protected cell business					
	(Page 2, Line 24, Col. 3)	10,692,208	23,010,492	19,481,622	24,111,271	23,588,604
20.	Premiums and considerations (Page 2, Col. 3)					
	20.1 In course of collection (Line 13.1)				688,333	447,172
	20.2 Deferred and not yet due (Line 13.2)				6,314,022	5,281,454
l	20.3 Accrued retrospective premiums (Line 13.3)					
21.	7,	4,897,776	7,277,517	4,315,427	9,440,051	9,510,929
22.		.				
23.	Loss adjustment expenses (Page 3, Line 3) Unearned premiums (Page 3, Line 9)					
25.	Canital paid up (Daga 2 Lines 20 8 20)	3 500 000	3,500,000	3,500,000	3,500,000	3,500,000
1	Surplus as regards policyholders (Page 3, Line 35)	F 704 420	15.732.975	15,166,195	14,671,220	14,077,675
	Risk-Based Capital Analysis					
27.		5,794,432	15,732,975	15,166,195	14,671,220	14,077,675
28.	Authorized control level risk-based capital	37,386	208,297	64,560	46,283	79,478
	Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
	(Page 2, Col. 3)					
l	(Item divided by Page 2, Line 10, Col. 3) x 100.0	1			_	
29.	Bonds (Line 1)		81.4	99.6	87.7	
30.	Stocks (Lines 2.1 & 2.2)					
31.	Mortgage loans on real estate (Lines 3.1 and 3.2) Real estate (Lines 4.1, 4.2 & 4.3)	1 1				
33.	Cook and agriculants and short term investments (Line F)	22.4	18.3	0.4	12.3	14.0
34.	Contract loans (Line 6)				12.0	XXX
35.	Other invested assets (Line 7)					
36.	Receivables for securities (Line 8)		0.3			
37.	Aggregate write-ins for invested assets (Line 9)					
38.	· · · · · · · · · · · · · · · · · · ·	100.0	100.0	100.0	100.0	100.0
	Investments in Parent, Subsidiaries and Affiliates					ļ
39.	Affiliated bonds, (Sch. D, Summary, Line 25, Col. 1)					
40.	Affiliated preferred stocks (Sch. D, Summary, Line 39, Col. 1)					
41.	Affiliated common stocks (Sch. D, Summary, Line 53, Col. 2) Affiliated short-term investments (subtotals included in Schedule DA,					
+2.	Port 2 Col 5 Line 44)					
43.	Affiliated mortgage loans on real estate				* * * * * * * * * * * * * * * * * * * *	
44.	All other affiliated				* * * * * * * * * * * * * * * * * * * *	
45.	Total of above Lines 39 to 44					
46.	Percentage of investments in parent, subsidiaries and affiliates				* * * * * * * * * * * * * * * * * * * *	
	to surplus as regards policyholders (Line 45 above divided by					
l	Page 3, Col. 1, Line 35 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

		1 2006	2 2005	3 2004	4 2003	5 2002
	Capital and Surplus Accounts (Page 4)					
48.	Net unrealized capital gains (losses) (Line 24) Dividends to stockholders (Line 35) Change in surplus as regards policyholders for the year (Line 38)	(9,289,938)		494,975	593,545	(13,652)
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
50.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	7,855,372	13,367,072	23,690,711	27,547,679	26,663,688
52.	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 & 33)		810,629	11,181,891	15,565,232	15,710,286
	Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34)	7,776,202	14,177,701	34,872,602	43,112,911	42,373,974
	Net Losses Paid (Page 9, Part 2, Col. 4)					
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
58.	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 & 33)					
60. 61.	Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34)					
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
	Losses incurred (Line 2)					
64.	Loss expenses incurred (Line 3)					
66.	Other underwriting expenses incurred (Line 4) Net underwriting gain (loss) (Line 8)			* * * * * * * * * * * * * * * * * * * *		
	Other Percentages					
	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 34 x 100.0)					
68.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
69.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 34 divided by Page 3, Line 35, Col. 1 x 100.0)					
	One Year Loss Development (000 omitted)					
70.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2 - Summary, Line 12, Col. 11)					
71.	Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 70 above divided by Page 4, Line 21, Col. 1 x 100.0)					
	Two Year Loss Development (000 omitted)					
	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)					
73.	Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 72 above divided by Page 4, Line 21, Col. 2 x 100.0)					

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

		1	2	3	4
Description		Book/Adjusted Carrying Value	Fair Value	Actual Cost	Par Value of Bonds
BONDS Governments	United States Canada	7,855,743	7,698,683	7,850,737	7,855,00
(Including all obligations guaranteed	3. Other Countries				
by governments)	4. Totals	7,855,743			7,855,0
States, Territories and Possessions (Direct and guaranteed)	5. United States 6. Canada 7. Other Countries				
	8. Totals				
Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	9. United States 10. Canada 11. Other Countries				
	12. Totals				
Special revenue and special assessment obligations and all non-guaranteed obligations of agencies and authorities of governments and their political subdivisions Public Utilities (unaffiliated)	13. United States 14. Canada 15. Other Countries				
	16. Totals				
	17. United States 18. Canada 19. Other Countries				
	20. Totals				
Industrial and Miscellaneous and Credit Tenant Loans (unaffiliated)	21. United States 22. Canada 23. Other Countries				
Grount Tomant Loans (unaminated)	24. Totals				
Parent, Subsidiaries and Affiliates	25. Totals				
	26. Total Bonds	7,855,743	7,698,683	7,850,737	7,855,0
PREFERRED STOCKS Public Utilities (unaffiliated)	27. United States 28. Canada 29. Other Countries				
	30. Totals				
Banks, Trust and Insurance Companies (unaffiliated)	31. United States 32. Canada 33. Other Countries				
	34. Totals				
Industrial and Miscellaneous (unaffiliated)	35. United States 36. Canada 37. Other Countries				
	38. Totals				
Parent, Subsidiaries and Affiliates	39. Totals				
	40. Total Preferred Stocks				
COMMON STOCKS Public Utilities (unaffiliated)	41. United States 42. Canada 43. Other Countries				
	44. Totals				
Banks, Trust and Insurance Companies (unaffiliated)	45. United States 46. Canada 47. Other Countries				
	48. Totals				
Industrial and Miscellaneous (unaffiliated)	49. United States 50. Canada 51. Other Countries				
	52. Totals				
Parent, Subsidiaries and Affiliates	53. Totals				
	54. Total Common Stocks				
·	55. Total Stocks]		
	56. Total Bonds and Stocks	7,855,743	7,698,683	7,850,737	

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

		Donao and	a ctoole	
1.	Book/adjusted carrying value of bonds and		7. Amortization of premium	26,991
	stocks, prior year	14,588,218	Foreign Exchange Adjustment:	
2.	Cost of bonds and stocks acquired, Column 7, Part 3	2,025,477	8.1 Column 15, Part 1	
3.	Accrual of discount	25,685	8.2 Column 19, Part 2 Section 1	
	Increase (decrease) by adjustment:		8.3 Column 16, Part 2, Section 2	
	4.1 Columns 12 - 14, Part 1		8.4 Column 15, Part 4	
	4.2 Column 15 - 17, Part 2, Section 1		Book/adjusted carrying value at end of current period	7,855,743
	4.3 Column 15, Part 2, Section 2		10. Total valuation allowance	
	4.4 Column 11 - 13, Part 4		11. Subtotal (Lines 9 plus 10)	7,855,743
5.	Total gain (loss), Column 19, Part 4	243,747	12. Total nonadmitted amounts	
6.	Deduct consideration for bonds and stocks		13. Statement value of bonds and stocks, current period	7,855,743
	disposed of Column 7, Part 4	9,000,393		

SCHEDULE P-ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P-PART 1-SUMMARY

(\$000 omitted)

., .	Pr	emiums Earned	d			Lo	ss and Loss Ex	pense Paymer	12			
Years in Which Premiums	1	2	3	Loss Pa	yments	Defense and Cost Containment Payments		Adjusting and Other Payments		10	11 Total	Number of Claims
Were				4	5	6	7	8	9	Salvage	Net Paid	Reported -
Earned and	Direct		Net	Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		(Cols.	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX	24	24	6	6	1	1			XXX
2. 1997	48,074	48,074		26,886	26,886	575	575	5,550	5,550			X X X
3. 1998	48,006	48,006		26,383	26,383	653	653	5,343	5,343			XXX
4. 1999	48,495	48,495		26,326	26,326	841	841	6,527	6,527			XXX
5. 2000	52,756	52,756		33,904	33,904	793	793	6,792	6,792			XXX
6. 2001	61,059	61,059		40,157	40,157	960	960	7,470	7,470			XXX
7. 2002	70,578	70,578		44,758	44,758	1,495	1,495	8,706	8,706			XXX
8. 2003	75,035	75,035		38,612	38,612	894	894	5,184	5,184			X X X
9. 2004	62,945	62,945		26,497	26,497	842	842	74	74			XXX
10. 2005	6,410	6,410		2,333	2,333	93	93	101	101			X X X
11. 2006								23	23			XXX
Totals	XXX	XXX	XXX	265,880	265,880	7,152	7,152	45,771	45,771	1		XXX

		Losses	Unpaid		Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22]		Number of
	13	14	15	16	17	18	19	20			Calvana	Tatal Nat	Claims
	Direct		Direct		Direct		Direct		Direct		Salvage and	Total Net Losses and	Outstanding Direct
	and		and		and		and		and		Subrogation	Expenses	and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1. Prior	9	9					3	3	102	102			X X X
2. 1997	l <u>. 1</u> .	1					5		1	1			XXX
3. 1998	10	10								5			XXX
4. 1999	41	41					18	18	6	6			XXX
5. 2000	98	98					38	38		7			XXX
6. 2001	465	465					78	78	19	19			XXX
7. 2002	1,459	1,459	8	8			185	185	36	36			XXX
8. 2003	2,441	2,441	329	329			405	405	100	100			XXX
9. 2004	3,956	3,956	39	39			468	468	194	194			XXX
10. 2005	215	215	(20)	(20)			56	56	443	443			XXX
11. 2006									1,048	1,048			XXX
12. Totals	8,695	8,695	356	356			1,267	1,267	1,961	1,961			XXX

		otal Losses and Expenses Incu	=		Loss Expense F ed / Premiums E		Nontabular	Discount	34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 1997	33,018	33,018		68.682	68.682						
3. 1998	32,405	32,405		67.502	67.502						
4. 1999	33,759	33,759		69.613	69.613						
5. 2000	41,632	41,632		78.914	78.914						
6. 2001	49,149	49,149		80.494	80.494						
7. 2002	56,647	56,647		80.262	80.262						
8. 2003	47,965	47,965		63.924	63.924						
9. 2004	32,070	32,070		50.949	50.949						
10. 2005	3,221	3,221		50.250	50.250						
11. 2006	1,071	1,071									
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

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

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN Allocated by States and Territories

States Etc. No. Operations Direct Promission on Direct Declaring Losses Losses Included in Groups in Care			1 Is Insurer Licen- sed?	Gross Premiums and Members Return Premium on Policies	hip Fees Less s and Premiums	4 Dividends Paid or Credited to Policyholders	5 Direct Losses Paid	6 Direct	7 Direct	8 Finance and Service Charges Not	9 Direct Premium Written for Federal Purchasing
Albebras	a		(Yes or	Direct Premiums	Direct Premiums	on Direct	(Deducting	Losses	Losses	Included in	Groups (Included
2 Alesia		ΔΙ	,	Written	Earned	Business	Salvage)		Unpaid	Premiums	in Col. 2)
4. Artamasa — AR	2. Alaska	AK	NO								
S. California C.A YES (3.858) (4.269) (7.000							(4,899)	(238,282)	123		
6 Colonado CO YES			YES	* * * * * * * * * * * * * * * * * * * *				(3,838)			
B Delevare DE YES			YES					(4,269)			
9. Dist. Columbia DC YES (28) (15.06) 2.002 (11. Forrida FL YES (15.06) 2.002 (11. Gorpia) GA YES (7.102) (2. Textual H NO S) (5.702) (2. Textual H NO S) (6. Sept.) (2. Textual H NO S) (2. Textual H											
10 Florids								(28)		* * * * * * * * * * * * * * * *	
12. Hawaii	10. Florida	FL	YES					(18,908)	2,202		
13. Idaho								(7,102)			
14 Illinois								(6,972)			
16 Iowa	14. Illinois	IL	YES					(30,421)	60,362		
17 Kansas								(9,831)			
18. Kentucky K								(4)			
20. Maine	18. Kentucky	KY	YES								
21 Maryandan											
22 Massachuseths MA							1.060 188	(3/7) (244 278)	817 069		
ZA Minnesota	22. Massachusetts	MA	NO								
25. Mississippi								(10,182)	1		
26. Missouri								(11,388) (39)			
27. Montana	26. Missouri	MO	YES					(1,967)			
29, Nevada			YES								
30. New Hampshire								(14 707)			
32 New Mexico	30. New Hampshire		YES				319,833	(311,291)	312,787		
33. New York											
14 No. Carolina NC YES (374) 35 No. Dakota ND YES (13,411) (374) (374) (374) (374) (374) (376) (374) (376) (6 401 082		7 857 492		
16. Ohio	34. No. Carolina		YES				0,401,002				
37. Oklahoma								(40.444)			
18.0 Gregon								(13,411)			
40, Rhode Island	38. Oregon		YES					(979)			
41 So. Carolina SC YES											
A2 So Dakota SD YES								(3,256)			
44. Texas	42. So. Dakota		YES								
45. Utah											
46. Vermont VT NO (7. Virginia VA YES (5.631) 62 (48. Washington WA YES (6.667) (145) (49. West Virginia WV YES (6.667) (6.667) (14.323) (14.323) (14.323) (14.323) (14.323) (15. Wyoming WY NO (52. American Samoa AS NO (53. Guam GU NO (54. Puerto Rico PR NO (55. U.S. Virgin Islands VI NO (55. U.S. Virgin Islands VI NO (55. Northern Mariana Islands MP NO (57. Canada CN NO (58. Aggregate other alien OT XXXX (59. Totals (a) 43 (7.776.204 2.740,407 9.050.755) (25. With Islands VI NO (56. Northern Mariana Islands MP NO (56. Northern Mariana Islands MP NO (57. Canada CN NO (58. Aggregate other alien OT XXXX (59. Totals (a) 43 (a) 43 (b) 7.776.204 2.740,407 9.050.755)							* * * * * * * * * * * * * * * *	(44,200)			
48. Washington WA YES (145) (49. West Virginia WV YES (6,667) (50. Wisconsin WI YES (4,323)	46. Vermont	VT	NO								
49. West Virginia WV YES (6,667) 50. Wisconsin WI YES (4,323) 51. Wyoming WY NO 52. American Samoa AS NO 53. Guam GU NO 54. Puerto Rico PR NO 55. U.S. Virgin Islands VI NO 56. Northern Mariana Islands MP NO 57. Canada CN NO 58. Aggregate other alien OT XXX 59. Totals (a) 43 7,776,204 2,740,407 9,050,755 DETAILS OF WRITE-INS 5801. XXX 5802. XXX 5803. XXX 5803. XXX 5898. Summary of remaining write-ins for Line 58 Willed Facility Averages and the properties of the pro									62		
Solution											
52. American Samoa	50. Wisconsin	WI	YES								
53. Guam GU NO NO S4. Puerto Rico PR NO NO S5. U.S. Virgin Islands VI NO S6. Northern Mariana Islands MP NO S7. Canada CN NO S8. Aggregate other alien OT X X X S802. X X X S803. Summary of remaining write-ins for Line 58 NO S7. Canada CN NO S8. Aggregate other											
54. Puerto Rico PR NO 55. U.S. Virgin Islands VI NO 56. Northern Mariana Islands MP NO 57. Canada CN NO 58. Aggregate other alien OT XXX 59. Totals (a) 43 7,776,204 2,740,407 9,050,755 5801. XXX 5802. XXX 5803. XXX 5898. Summary of remaining write-ins for Line 58											
56. Northern Mariana Islands MP NO 57. Canada CN NO 58. Aggregate other alien OT XXX 59. Totals (a) 43 7,776,204 2,740,407 9,050,755 DETAILS OF WRITE-INS 5801. XXX 5802. XXX 5803. XXX 5898. Summary of remaining write-ins for Line 58 XXX		PR	NO			*****	* * * * * * * * * * * * * * * * * * * *				*****
57. Canada CN NO 58. Aggregate other alien OT X X X 59. Totals (a) 43 7,776,204 2,740,407 9,050,755 DETAILS OF WRITE-INS 5801. X X X 5802. X X X 5803. X X X 5898. Summary of remaining write-ins for Line 58 Write-ins for Line 58	55. U.S. Virgin Islands										
58. Aggregate other alien OT X X X 59. Totals 7,776,204 2,740,407 9,050,755 DETAILS OF WRITE-INS 5801. X X X 5802. X X X 5803. X X X 5898. Summary of remaining write-ins for Line 58											
DETAILS OF WRITE-INS	58. Aggregate other										
DETAILS OF WRITE-INS XXX 5801. XXX 5802. XXX 5803. XXX 5898. Summary of remaining write-ins for Line 58 Write-ins for Line 58		ΟΓ					_				
5801.	59. Totals		(a) 43				7,776,204	2,740,407	9,050,755		
5802. X X X	DETAILS OF WRITE-INS	3									
5802. X X X	5004		V V V								
5803. X X X 5898. Summary of remaining write-ins for Line 58											
5898. Summary of remaining write-ins for Line 58											
write-ins for Line 58											
				1							
from overflow page X X X	from overflow page		XXX		<u> </u>						
5899. Totals (Lines 5801	5899. Totals (Lines 5801										
through 5803 + 5898)				1							
(Line 58 above) X X X	(Line 58 above)		XXX								

Explanation of basis of allocation of premiums by states, etc. *Location of coverage - Fire, Allied Lines, Homeowners Multi Peril, Commercial Multi Peril, Earthquake, Boiler and Machinery								
*States of Jurisdiction under which payrolls and resulting premiums are developed - 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	*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

