	ANNUAL STATEMENT	
	OF THE	
	AMERICA FIRST INSURANCE COMPANY	
	L/FENF	
	KEENE	
in the state of	NEW HAMPSHIRE	
	TO THE	
	Insurance Department	
	OF THE	
	STATE OF NEW HAMPSHIRE	
	FOR THE YEAR ENDED	



#### **ANNUAL STATEMENT**

12696200720100100

For the Year Ended December 31, 2007

OF THE CONDITION AND AFFAIRS OF THE America First Insurance Company

NAIC Group Code 0111		ompany Code126	696 Employe	r's ID Number 58-0953149
Current Perion	, ,	, State of	f Domicile or Port of E	Entry New Hampshire
•	nited States of America			· · · · · · · · · · · · · · · · · · ·
ncorporated/Organized:	June 20, 1984	Commenc	ed Business: June	20, 1984
		03431		
	(Street and Number)	(City, State and Zip Cod	•	
	(Street and Number)			elephone Number)
Primary Location of Books a	and Records: 175 Berkeley Stre	eet Boston, MA		
(Street and Number) (City, State and Zip Code)  Main Administrative Office: 62 Maple Avenue Keene, NH 03431 603-352-3221  (Street and Number) (City, State and Zip Code) (Area Code)(Telephone Number)  Mail Address: 175 Berkeley Street Boston, MA 02116  (Street and Number) (City, State and Zip Code)				
Statutory Statement Contact				
	,	om	(Are	
1. Gan	Chair Gary Name	rman of the Board Richard Gregg		· , ,
	· · · · · · · · · · · · · · · · · · ·		•	<u> </u>
Nama		ice-Presidents	Nama	Title
		cer Joseph Anth		
•			iony onico	Exceptive vice i resident
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				0 " 5"   0 "
		Joseph Anth	iony Gilles	Scott Rhodes Goodby
Outy Monard Orogg	Officiophici Officio Mationicia			
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State of Massachusetts County of Suffolk ss				
•	ng duly sworn, each depose and say tha	at these one that the collection to the	figure of oald	and that on the remarking a sixt of the fi
above, all of the herein described asset hat this statement, together with relationabilities and of the condition and affait and have been completed in accordan aw may differ; or, (2) that state rules of information, knowledge and belief, res with the NAIC, when required, that is a	the day sworn, each repose and say the ets were the absolute property of the sai ed exhibits, schedules and explanations rs of the said reporting entity as of the race with the NAIC Annual Statement Instor regulations require differences in repopectively. Furthermore, the scope of this an exact copy (except for formatting differences in addition to the enclosed statement of the same actions.	d reporting entity, free and therein contained, annexer eporting period stated above tructions and Accounting Proting not related to account attestation by the describe erences due to electronic file.	clear from any liens or claim d or referred to, is a full and re, and of its income and dec ractices and Procedures mai ting practices and procedures and officers also includes the	s thereon, except as herein stated, and true statement of all the assets and luctions therefrom for the period ended, hual except to the extent that: (1) state is, according to the best of their related corresponding electronic filing
(Signature)		(Signature)		(Signature)
Gary Richard Gregg		Edmund Campion Kenealy		James Francis Dore
(Printed Name) 1.		(Printed Name) 2.		(Printed Name) 3.
President and Chief Executive	Officer	Secretary		Treasurer and Chief Financial Officer
(Title)		(Title)		(Title)
Subscribed and sworn to before me th	is		a. Is this an original	filing? YES [ X ] NO [
31st day of January			ū	e the amendment number
	,		2. Date	
				nber of pages attached
			J. 14dii	L-2

#### **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)	8,451,829		8,451,829	8,740,370
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
1	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 \$				
	4.2 Properties held for the production of income (less \$ 0 encumbrances)				
	4.3 Properties held for sale (less \$ 0 encumbrances)				
5.	Cash (\$ 0, Schedule E-Part 1), cash equivalents (\$ 0				
	Schedule E-Part 2) and short-term investments (\$ 2,799,842, Schedule DA)	2,799,842		2,799,842	763,893
6.	Contract loans (including \$ 0 premium notes)				
7.	Other invested assets (Schedule BA)				
8.	Receivables for securities	5,104		5,104	1,326
9.	Aggregate write-ins for invested assets				
10.	Subtotals, cash and invested assets (Lines 1 to 9)	11,256,775		11,256,775	9,505,589
11.	Title plants less \$ 0 charged off (for Title insurers only)				
12.	Investment income due and accrued	104,357		104,357	111,016
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)				
1,,	13.3 Accrued retrospective premiums				
14.	Reinsurance: 14.1 Amounts recoverable from reinsurers				
1					
1	14.2 Funds held by or deposited with reinsured companies				
15.	14.3 Other amounts receivable under reinsurance contracts  Amounts receivable relating to uninsured plans				
16.1	Amounts receivable relating to uninsured plans  Current federal and foreign income tax recoverable and interest thereon	17,025		17,025	38,453
16.2	No. 16				700
17.					
18.	Guaranty funds receivable or on deposit  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	131,048		131,048	237,668
22.	Health care (\$ 0 ) and other amounts receivable				
23.	Aggregate write-ins for other than invested assets				880,043
24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts (Lines 10 to 23)	11,509,205		11,509,205	10,773,469
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
26.	Total (Lines 24 and 25)	11,509,205		11,509,205	10,773,469
	DETAILS OF WRITE-INS				
0901.					
ا ناقل ا					

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		 	7,618
2302. Receivable for Louisiana citizens assessment			872,425
2303.	l	 	
2398. Summary of remaining write-ins for Line 23 from overflow page			
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)			880,043

	LIABILITIES, SURPLUS AND OTHER FUNDS	1 Current Year	2 Prior Year
1.	Losses (Part 2A, Line 34, Column 8)		
2.	1 (D. 10.4 L'		
3. 4.	Loss adjustment expenses (Part 2A, Line 34, Column 9)		
4. 5.			
6.	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))		
7.2	Net deferred tax liability	2,000	* * * * * * * * * * * * * * * * * * * *
8.	Borrowed money \$ 0 and interest thereon \$ 0		
	Unearned premiums (Part 1A, Line 37, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 54,003,231 and including warranty reserves of \$ 0 )		
	Advance premium		
	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders  Ceded reinsurance premiums payable (net of ceding commissions)		
13.			
	Amounts withheld or retained by company for account of others		8,983
15.			***************************************
16.			
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.			
19.	Payable to parent, subsidiaries and affiliates	138,508	160,280
20.	Payable for securities		
21.	Liability for amounts held under uninsured plans		
22.	A A A A A A A A A A A A A A A A A A A	007.400	27,403
24	Aggregate write-ins for liabilities  Total liabilities excluding protected cell liabilities (Lines 1 through 23)	427,934	196,666
	Protected cell liabilities		
26.	Total liabilities (Lines 24 and 25)	427,934	196,666
27.			
28.	Common capital stock	1,800,000	1,800,000
29.			
30.	Aggregate write-ins for other than special surplus funds		
	Surplus notes		
	Gross paid in and contributed surplus	1,950,000	1,950,000
	Unassigned funds (surplus)	7,331,271	6,826,803
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 )		* * * * * * * * * * * * * * * * * * * *
	Surplus as regards policyholders (Lines 27 to 33, less 34) (Page 4, Line 39)	11,081,271	10,576,803
36.	TOTALS (Page 2, Line 26, Col. 3)	11,509,205	10,773,469
	DETAILS OF WRITE-INS		
2301	Other liabilities	287,426	27,403
2302			
2303			
	Summary of remaining write-ins for Line 23 from overflow page	007.400	07.400
2399	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	287,426	27,403
2701			
2702			
2703	Summary of remaining write-ins for Line 27 from overflow page		
	Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)		
3001 3002			
3002	***************************************		
	Summary of remaining write-ins for Line 30 from overflow page		
	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)		

	STATEMENT OF INCOME	1	2
		Current Year	Prior Year
	UNDERWRITING INCOME		
1.		*****	
2	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  Total underwriting deductions (Lines 2 through 5)		
6. 7.	Total underwriting deductions (Lines 2 through 5)  Net income of protected cells		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)		
	INVESTMENT INCOME		
q	Net investment income earned (Exhibit of Net Investment Income, Line 17)	460,168	446,211
10.	Net realized capital gains (losses) less capital gains tax of \$  0 (Exhibit of Capital Gains (Losses))		(3,527)
11.	Net investment gain (loss) (Lines 9 + 10)	460,168	442,684
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off		
	(amount recovered \$ 0 amount charged off \$ 0 )	****	
13.	Finance and service charges not included in premiums		
14. 15.	Aggregate write-ins for miscellaneous income  Total other income (Lines 12 through 14)		
	Net income before dividends to policyholders, after capital gains tax		
	and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	460,168	442,684
	Dividends to policyholders		
18.	Net income, after dividends to policyholders, after capital gains tax	400,400	440.004
19.	and before all other federal and foreign income taxes (Line 16 minus Line 17)  Federal and foreign income taxes incurred	460,168 (47,000)	442,684 (22,703
	Federal and foreign income taxes incurred  Net income (Line 18 minus Line 19) (to Line 22)	507,168	465,387
	CAPITAL AND SURPLUS ACCOUNT	,	·
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	10,576,803	10,355,791
22.	Net income (from Line 20)	507.400	
	Net transfers (to) from Protected Cell accounts	****	
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$  Change in net unrealized foreign exchange capital gain (loss)	*****	
26.	Change in net deferred income tax	(263.000)	(182.000
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3)	260,300	972,625
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	****	
	Change in surplus notes	*****	
30. 31.	Surplus (contributed to) withdrawn from protected cells Cumulative effect of changes in accounting principles	******	
	Capital changes:	*********	
	32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend)		
33	32.3 Transferred to surplus Surplus adjustments:	******	
	33.1 Paid in		
	33.2 Transferred to capital (Stock Dividend)		
24	33.3 Transferred from capital		
35.	Net remittances from or (to) Home Office Dividends to stockholders	******	(1,035,000
	Change in treasury stock (Page 3, Lines 34.1 and 34.2, Column 2 minus Column 1)		
37.	Aggregate write-ins for gains and losses in surplus		
	Change in surplus as regards policyholders for the year (Lines 22 through 37) Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 35)	504,468 11,081,271	
39.	Surplus as regards policyrioliders, December 31 current year (Line 21 plus Line 30) (Fage 3, Line 33)	11,001,271	10,370,003
	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)		
1401.		*****	
1402.			
1403.	Commence of commence with the first line Addison constitution and		
	Totals (Lines 1401 through 1403 plus Line 1498) (Line 14 above)		
3701. 3702.			
3702.			
	Summary of remaining write-ins for Line 37 from overflow page		
3799.	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		(4,238,029)
Net investment income	528,731	517,887
3. Miscellaneous income	863,442	591,877
4. Total (Lines 1 through 3)	1,392,173	(3,128,265)
5. Benefit and loss related payments		(7,694,260)
Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions		
Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)	(68,428)	(7,838)
10. Total (Lines 5 through 9)	(68,428)	(7,702,098)
11. Net cash from operations (Line 4 minus Line 10)	1,460,601	4,573,833
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	2,354,507	2,602,005
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,354,507	2,602,005
13. Cost of investments acquired (long-term only):		
13.1 Bonds	2,127,870	996,610
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets	3,777	1,297
13.6 Miscellaneous applications	2,131,647	997,907
<ul><li>13.7 Total investments acquired (Lines 13.1 to 13.6)</li><li>14. Net increase (decrease) in contract loans and premium notes</li></ul>	i ' i	331,301
45 N. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	000 000	1,604,098
	222,000	1,004,090
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		4 025 000
16.5 Dividends to stockholders	252.400	1,035,000
<ul><li>16.6 Other cash provided (applied)</li><li>17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)</li></ul>	352,488 352,488	(4,512,405) (5,547,405)
	352,400	(3,347,403)
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)	2,035,949	630,526
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	763,893	133,367
19.2 End of year (Line 18 plus Line 19.1)	2,799,842	763,893
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**

## **UNDERWRITING AND INVESTMENT EXHIBIT**

### PART 1B - PREMIUMS WRITTEN

	1	Reinsuranc	e Assumed	Reinsuran	ce Ceded	6
Line of Business	Direct Business (a)	То	Net Premiums Written Cols. 1 + 2 + 3 - 4 - 5			
1. Fire				334,418		****
2. Allied lines	429,834			429,834		
Farmowners multiple peril						
4. Homeowners multiple peril	22,252,905			22,252,905		
5. Commercial multiple peril	7,167,996			7,167,996		
6. Mortgage guaranty	.					
8. Ocean marine						
9. Inland marine	26,420,814			26,420,814		
10. Financial guaranty						
11.1 Medical malpractice - occurrence						
11.2 Medical malpractice - claims-made						
12. Earthquake	16,156			16,156		
13. Group accident and health						
14. Credit accident and health (group and individual)						
15. Other accident and health			* * * * * * * * * * * * * * * * * * * *			
16. Workers' compensation	1.423.097		* * * * * * * * * * * * * * * * * * * *	1.423.097		
17.1 Other liability - occurrence			* * * * * * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * * * * * * *
17.2 Other liability - claims-made			* * * * * * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * * * * * * *
18.1 Products liability - occurrence	5.994		* * * * * * * * * * * * * * * * * * * *	5.994		* * * * * * * * * * * * * * * * * * * *
18.2 Products liability - claims-made			* * * * * * * * * * * * * * * * * * * *			
19.1, 19.2 Private passenger auto liability	23 318 210			23 318 210		
19.3, 19.4 Commercial auto liability						
21. Auto physical damage						
22. Aircraft (all perils)				10,201,404		
00 5:4-19						
23. Fidelity 24. Surety						
26. Burglary and theft	1,726			1,726		
27. Boiler and machinery				1,720		
28. Credit						
29. International						
30. Reinsurance-Nonproportional Assumed Property	·   · · · · · · · · ·   ·					
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
31. Reinsurance-Nonproportional Assumed Liability	X X X					
32. Reinsurance-Nonproportional Assumed Financial Lines	X X X					
33. Aggregate write-ins for other lines of business	114 000 440			114 000 140		
34. TOTALS	114,286,140			114,286,140		

DETAILS OF WRITE-INS			
3301.			
3302.			
3303.			
3398. Summary of remaining write-ins for Line 33 from overflow page			
3300 Totals (Lines 3301 through 3303 plus 3308) (Line 33 above)			

(a)	Does the	e coi	mpany's direct premiums written include premiums recorded on an installment basis?  Yes [ ] No [ X ]	
	If yes:	1.	The amount of such installment premiums \$ 0	
		2	Amount at which such installment pramiums would have been reported had they been recorded on an annualized hasis \$	Λ

# UNDERWRITING AND INVESTMENT EXHIBIT PART 2 - LOSSES PAID AND INCURRED

		Losses Paid	Less Salvage		5	6	7	8	
Line of Business	1 Direct Business			3 4  Reinsurance Net Payments Recovered (Cols. 1 + 2 - 3)		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	201,904		201,904						
2. Allied lines	299,050		299,050						
Farmowners multiple peril									
Homeowners multiple peril	4,952,588		4,952,588						
Commercial multiple peril	3,301,194		3,301,194	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *			
Mortgage guaranty									
Ocean marine									
9. Inland marine	6.540.370		6,540,370						
10. Financial guaranty	0,540,570		0,540,570			* * * * * * * * * * * * * * * * * * * *			
11.1 Medical malpractice - occurrence			[						
11.2 Medical malpractice - occurrence			[						
40 Faith all									
Eartnquake     Group accident and health									
Credit accident and health (group and individual)									
15. Other accident and health			040.740						
16. Workers' compensation	216,749		216,749						
17.1 Other liability - occurrence	7,058,441		7,058,441						
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	7,170,170		7,170,170						
19.3, 19.4 Commercial auto liability	3,165,645		3,165,645						
21. Auto physical damage	7,428,397		7,428,397						
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International			[						
30. Reinsurance-Nonproportional Assumed Property			[	* * * * * * * * * * * * * * * * * * * *					
31. Reinsurance-Nonproportional Assumed Liability	XXX		[	* * * * * * * * * * * * * * * * * * * *					
32. Reinsurance-Nonproportional Assumed Financial Lines	XXX		[		. [			l	
33. Aggregate write-ins for other lines of business									
34. TOTALS	40,334,508		40,334,508	<u> </u>					
DETAILS OF WRITE-INS									
301.									
302.				* * * * * * * * * * * * * * * * * * * *					
3303.				* * * * * * * * * * * * * * * * * * * *					
398. Summary of remaining write-ins for Line 33 from overflow page									
			<del>                                     </del>		+				
3399. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)			<u> </u>		1			<u> </u>	

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

			Penor	ted Losses		,	ncurred But Not Reported	1	8	9
	•	1	2 <u>Repor</u>	2	Λ	5	6	7		
	Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable from Authorized and Unauthorized Companies	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Unpaid Loss Adjustment Expenses
1. 2.	Fire	8,477 373,417		8,477 373,417		6,229 7,939		6,229 7,939		
3. 4.	Farmowners multiple peril Homeowners multiple peril	2,086,313		2,086,313		723,043		723,043		
5. 6.	Commercial multiple peril Mortgage guaranty	4,030,814		4,030,814		3,516,962		3,516,962		
8. 9.	Ocean marine Inland marine	2,037,206		2,037,206		499,021		499,021		
10. 11.1 11.2	Financial guaranty Medical malpractice - occurrence Medical malpractice - claims - made									
12. 13.	Earthquake Group accident and health								(a)	
14. 15.	Credit accident and health (group and individual) Other accident and health								(a)	
16. 17.1	Workers' compensation Other liability - occurrence Other liability - claims - made	339,561 9,170,583		339,561 9,170,583		247,604 9,473,338		247,604 9,473,338		
18.1 18.2	Products liability - occurrence Products liability - claims - made					3,149		3,149		
19.3	19.2 Private passenger auto liability 19.4 Commercial auto liability	6,479,692 2,398,932		6,479,692 2,398,932		2,689,513 3,099,884		2,689,513 3,099,884		
21. 22. 23.	Auto physical damage Aircraft (all perils) Fidelity	916,887		916,887						
24. 26.	Surety Burglary and theft									
27. 28. 29.	Boiler and machinery Credit International									
30. 31.	Reinsurance-Nonproportional Assumed Property Reinsurance-Nonproportional Assumed Liability	XXX				XXX				
32. 33. 34.	Reinsurance-Nonproportional Assumed Financial Lines Aggregate write-ins for other lines of business TOTALS	27.841,882		27.841.882		20.266.682		20,266,682		
34.	IOIALO	21,041,002		21,041,002		20,200,002		20,200,002		
	DETAILS OF WRITE-INS									
330 <sup>2</sup>										
3303		*****								
	. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)									

<sup>(</sup>a) Including \$ ...... 0 for present value of life indemnity claims.

### **UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES**

		1	2	3	4
		·	- Other	ľ	
		Loss Adjustment	Underwriting	Investment	
		Expenses	Expenses	Expenses	Total
1.	Claim adjustment services:				
	1.1 Direct	4,613,582			4,613,582
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded				4,613,582
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent		16,968,735		16,968,735
	2.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent				
	2.4 Contingent-direct				
	2.5 Contingent-reinsurance assumed				
	2.6 Contingent-reinsurance ceded				
	2.7 Policy and membership fees				
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)				
3.	Allowances to manager and agents				
ı	Advertising				
l	•				
5.	Boards, bureaus and associations				
6.	Surveys and underwriting reports			3	3
7.	Audit of assureds' records				
8.	Salary and related items:				
	8.1 Salaries			2,467	2,467
	8.2 Payroll taxes			115	
l	Employee relations and welfare				
10.	Insurance			23	
11.	Directors' fees				
12.	Travel and travel items			41	41
13.	Rent and rent items				
· ·	Equipment				44
l					
l .	Cost or depreciation of EDP equipment and software				
ı	Printing and stationery				6.
17.	Postage, telephone and telegraph, exchange and express			12	
18.	Legal and auditing			329	329
19.	Totals (Lines 3 to 18)			3,254	3,254
l	Taxes, licenses and fees:				
20.					
	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)				
l	Real estate expenses				
22.	Real estate taxes				
23.	Reimbursements by uninsured plans				
24.	Aggregate write-ins for miscellaneous expenses			230	
25.	Total expenses incurred			3 484	(a) 3 484
26.					
l	Less unpaid expenses-current year				
l	Add unpaid expenses-prior year				
28.	Amounts receivable relating to uninsured plans, prior year				
29.	Amounts receivable relating to uninsured plans, current year				
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			3,484	3,484
	DETAILS OF WRITE-INS				
2401	Other Expenses			230	230
1				۲۵۷ میری	230
2402.					
2403.					
2498.	Summary of remaining write-ins for Line 24 from overflow page				
2400	Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)			230	230

(a) Includes management fees of \$ 3,484 to affiliates and \$ 0 to non-affiliates.

### **EXHIBIT OF NET INVESTMENT INCOME**

		1 Collected During Year	2 Earned During Year
1.	U.S. Government bonds	(a) 159,753	149,782
	U.S. Government bonds Bonds exempt from U.S. tax	(a) 214,216	
1.1	Other bonds (unaffiliated)	(a) 214,210	211,423
	Daniel of officers	(a)	
2.1	Preferred stocks (unaffiliated) Preferred stocks of affiliates	(b) (b)	
	Common stocks (unaffiliated)	(0)	
	Common stocks of affiliates	(0)	
3.	Mortgage loans Page states	(c)	
4.	Real estate	(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 96,249	102,382
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income	63	
10.	Total gross investment income	470,281	463,652
11.	Investment expenses		(g) 3,484
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		
15.	Aggregate write-ins for deductions from investment income		V/
16.	Total deductions (Lines 11 through 15)		3,484
17.	Net investment income (Line 10 minus Line 16)		460,168
	DETAILS OF WRITE-INS		100,100
0901.	Miscellaneous Income/(Expense)	63	63
0902.			
0903.			
	Summary of remaining write-ins for Line 9 from overflow page		
	Totals (Lines 0901 through 0903) plus 0998 (Line 9, above)	63	63
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 (h) In	cludes \$ 592 accrual of discount less \$ 62,496 amortization of premium and less cludes \$ 0 accrual of discount less \$ 0 amortization of premium and less cludes \$ 0 accrual of discount less \$ 0 amortization of premium and less cludes \$ 0 for company's occupancy of its own buildings; and excludes \$ cludes \$ 13,255 accrual of discount less \$ 0 amortization of premium and less cludes \$ 0 accrual of discount less \$ 0 amortization of premium and less cludes \$ 0 investment expenses and \$ 0 investment taxes, licenses and fe segregated and Separate Accounts.  Cludes \$ 0 interest on surplus notes and \$ 0 interest on capital notes. cludes \$ 0 depreciation on real estate and \$ 0 depreciation on other investment invest	s \$ 0 paid for accrued s \$ 0 paid for accrued 0 interest on encumbrances. s \$ 5,884 paid for accrued es, excluding federal income taxes, at	dividends on purchases. interest on purchases. interest on purchases.

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

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

### **EXHIBIT OF NONADMITTED ASSETS**

		1	2	3
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)			
2.	Stocks (Schedule D): 2.1 Preferred stocks			
				* * * * * * * * * * * * * * * * * * * *
3.	2.2 Common stocks  Mortgage loans on real estate (Schedule B):			* * * * * * * * * * * * * * * * * * * *
٥.	3.1 First liens			
	3.2 Other than first liens			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
_	4.3 Properties held for sale			
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term			
6	investments (Schedule DA) Contract loans			
6. 7.	Other invested assets (Schedule BA)			
7. 8.				* * * * * * * * * * * * * * * * * * * *
9.	Aggregate write-ins for invested assets			
10.	Subtotals, cash and invested assets (Lines 1 to 9)			
11.	Title plants ( for Title insurers only )			* * * * * * * * * * * * * * * * * * * *
12.	Investment income due and accrued			* * * * * * * * * * * * * * * * * * * *
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			
	13.3 Accrued retrospective premiums			
14.	Reinsurance:			
	14.1 Amounts recoverable from reinsurers			* * * * * * * * * * * * * * * * * * * *
	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	<b>I</b>		
16.2	Net deferred tax asset		260,300	260,300
17.	Guaranty funds receivable or on deposit			* * * * * * * * * * * * * * * * * * * *
18. 10	Electronic data processing equipment and software			* * * * * * * * * * * * * * * * * * * *
19. 20.	Furniture and equipment, including health care delivery assets  Net adjustment in assets and liabilities due to foreign exchange rates			* * * * * * * * * * * * * * * * * * * *
20. 21.	Described from sout subsidiaries and efficien			
22.	Health ages and althou amounts required to			* * * * * * * * * * * * * * * * * * * *
23.	Aggregate write-ins for other than invested assets			
24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell			
	Accounts (Lines 10 to 23)		260,300	260,300
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
26.	Total (Lines 24 and 25)		260,300	260,300
		<u> </u>	-	
	DETAILS OF WRITE-INS			
0004				
0901.				
0902.				
0903.				
	Summary of remaining write-ins for Line 09 from overflow page			
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)			
2301.				
2302.				
2303.				
	Summary of remaining write-ins for Line 23 from overflow page			
2398	Summary of remaining write-ins for line 25 from overnow bade			

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

#### A. Accounting Practices

Effective January 1, 2001, and subject to any deviations prescribed or permitted by the State of New Hampshire, the accompanying financial statements of America First 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 SVO Manual.
- 3. The Company does not own common stocks.
- 4. The Company does not own 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 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 29.
- 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 2007.
- 13. The Company has no pharmaceutical rebate receivables.

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

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

#### Note 3- Business Combinations and Goodwill

A. Statutory Purchase Method

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

B. Statutory Mergers

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

C. Impairment Loss

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, 2007.

#### **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, 2007	December 31, 2006	Change
Total of gross deferred tax assets	14,000	280,000	(266,000)
Total of deferred tax liabilities	(16,000)	(19,000)	3,000
Net deferred tax asset (liability)	(2,000)	261,000	(263,000)
Net deferred tax asset non-admitted	0	(260,300)	260,300
Net admitted deferred tax asset (liability)	(2,000)	700	(2,700)

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:

	2007	2006
Federal tax on operations	(47,000)	(22,703)
Net operating loss benefit	0	0
Foreign tax on operations	0	0
Income tax incurred on operations	(47,000)	(22,703)
Tax on capital gains		3,380
Total income tax incurred	(47,000)	(19,323)

The Company's deferred tax assets and liabilities result primarily from deferred inter-company transactions and the reversal of discount accretion on bonds.

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

	2007
Change in net deferred income tax (without unrealized gain or loss)	(263,000)
Tax effect of unrealized (gains) losses	0
Total change in net deferred income tax	(263,000)

- D. Effective tax rates differ from the current statutory rate of 35% principally due to the effects of goodwill and tax-exempt interest.
- E. The amount of Federal income taxes paid and available for recoupment in the event of future losses is none from the current year and none 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
American Fire & Casualty Insurance Company \*

Avomark Insurance 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
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. Heritage-Summit Healthcare of Florida, Inc.

Indiana Insurance Company

LEXCO Limited

Liberty Assignment Corporation Liberty Energy Canada, Inc. \* Liberty Financial Services, Inc. Liberty Hospitality Group, Inc. Liberty Insurance Company of America Liberty Insurance Corporation 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 General Insurance Company LM Insurance Corporation LM Personal Insurance Company

LM Property & Casualty Insurance Company

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

OCASCO Budget, Inc \*
OCI Printing, Inc.\*

Ohio Casualty Corporation \*
Ohio Casualty Insurance Company \*
Ohio Casualty of New Jersey, Inc \*
Ohio Life Brokerage Services, Inc.\*
Ohio Security Insurance Company \*
Peerless Indemnity Insurance Company

Peerless 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

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

Liberty Life Assurance Company of Boston

Liberty Life Holdings, Inc.

Liberty Lloyds of Texas Insurance Company

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

Liberty Mutual Fire Insurance Company

The Netherlands Insurance Company Wausau Service Corporation Wausau Signature Agency, Inc. Wausau Business Insurance Company Wausau General Insurance Company Wausau Underwriters Insurance Company West American Insurance Company \*

\* This company joined the consolidated group in 2007 and its activity from the date it joined the group is included in the consolidated return.

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 outstanding shares in the Company are owned by Peerless Insurance Company ("PIC"), an insurance company incorporated in the State of New Hampshire. PIC is a wholly owned subsidiary of LIH US P&C Corporation, an insurance holding company incorporated in Delaware. LIH US P&C Corporation is wholly owned by Liberty Insurance Holdings, Inc., an insurance holding company incorporated in Delaware. Liberty Insurance Holdings, Inc. is wholly owned 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.
- C. Refer to Notes 10F and 25.
- D. At December 31, 2007, the Company reported \$7,460 due to affiliates. In general, the terms of the inter-company arrangements require settlement at least quarterly.
- E. The Company has made no guarantee or initiated undertaking for the benefit of affiliates which result in a material contingent exposure of the Company's or affiliates' assets or liabilities.
- F. Refer to Note 25 for information regarding the Amended and Restated Reinsurance Pooling Agreement.

The Company entered into a services agreement (the "Agreement"), effective January 1, 1999, with the PIC and other affiliates. The Agreement allows parties to the Agreement to provide services related to common management functions including, but not limited to, coordinating marketing and advertising, information systems support, payroll and human resources services, actuarial support, accounting and other financial services, as well as consulting and other services as the parties may request.

The Company entered into investment management agreements, effective January 1, 2007 with LMIC, and effective May 1, 2000 with Liberty Mutual Investment Advisors LLC (LMIA). Under these agreements, LMIC and LMIA provide investment management services to the Company.

The Company entered into a cash management agreement with LMIA effective January 28, 2000.

The Company entered into a management services agreement, effective December 15, 2001, with LMIC. Under the agreement, LMIC may provide services related to common management functions including, but not limited to, accounting, financial, tax and auditing, information technology and support, purchasing, payroll and employee benefits, policy administration, real estate management, legal, general administration, as well as consulting and other services as the parties may request.

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

- 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 an upstream company, either directly or indirectly.
- I. The Company has no investments in subsidiary, controlled or affiliated companies.
- J. Impairment of subsidiaries

Refer to 10 I

K. Investment in foreign insurance subsidiaries.

Refer to 10 I

L. Investment in downstream noninsurance holding companies.

Refer to 10 I

#### Note 11- Debt

A. Capital Notes

Not Applicable

B. All Other Debt

Not Applicable

### 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 Service Agreements as described in note 10 F.

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

1. Common Stock

The Company has 400,000 shares authorized, and 360,000 shares issued and outstanding as of December 31, 2007. All shares have a stated par value of \$5.

2. Preferred Stock

Not applicable

3. Dividend Restrictions

There are no dividend restrictions.

- 4. The maximum amount of dividends which can be paid by New Hampshire-domiciled insurance companies to shareholders without prior approval of the Insurance Commissioner is 10% of surplus less any dividends paid in the preceding twelve months. The maximum dividend payout that may be made without prior approval in 2008 is \$1,108,127.
- The Company does not have restricted unassigned surplus.
- The Company had no advances to surplus.
- 7. The Company did 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

13. The company did not pay a dividend to its parent during 2007.

#### **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 funds 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 an inter-company reinsurance arrangement (see Note 25), all guaranty fund and other assessments liabilities are ceded to Peerless Insurance Company.

C. Gain Contingencies

Not applicable

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

The company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits.

	Direct
Claims related ECO and bad faith losses paid during the reporting period	\$ 1,475,000

Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period.

( a )	( b )	( c )	( d )	(e)
0-25 Claims	26-50 Claims	51-100 Claims	101-500 Claims	More than 500 Claims
X				

Indicate whether claim count information is disclosed per claim or per claimant.

(f) Per Claim [x]

(g) Per Claimant []

#### E. All other Contingencies

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

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

#### Note 15- Leases

- A. 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 concentration of credit risk.

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

A. Transfers of Receivables reported as sales:

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

B. Transfers and servicing of financial assets:

The Company did not have any transfers and servicing of financial assets during the year.

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- Other Items

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

Not applicable

- C. Other Disclosures
  - 1) Assets in the amount of \$1,991,403 and \$1,142,822 as of December 31, 2007 and 2006, respectively, were on deposit with government authorities or trustees as required by law.
- D. As a result of the PIC Amended and Restated Reinsurance Pooling Agreement (see Note 25), the Company has no exposure to uncollectible premium receivable balances.
- E. Business Interruption Insurance Recoveries

The Company does not purchase business interruption coverage.

F. State Transferable Tax Credits

The Company does not hold state transferable tax credits.

- G. The Company does not have deposits admitted under section 6603 of the Internal Revenue Services Code.
- H. Hybrid Securities

The Company does not hold hybrid securities.

The Company does not have exposure to sub-prime mortgage related risk.

#### Note 21- Events Subsequent

There were no events subsequent to December 31, 2007 that would require disclosure.

#### Note 22- Reinsurance

- A. Excluding amounts arising pursuant to the PIC Amended and Restated Reinsurance Pooling Agreement, as described in Note 25, there are no unsecured reinsurance recoverables with an individual reinsurer that exceed 3% of policyholders surplus.
- B. There are no reinsurance recoverables in dispute from an individual reinsurer that exceed 5% of the Company's surplus. In addition, the aggregate reinsurance recoverables in dispute do not exceed 10% of the Company's surplus.
- C. Reinsurance Assumed & Ceded
  - 1. The following table sets forth the maximum return premium and commission equity due the reinsurer or the Company if all of the Company's assumed and ceded reinsurance were canceled as of December 31, 2007.

	Assumed Reinsurance		Ceded Reii	Ceded Reinsurance		Net Reinsurance		
	Commission			Commission		Commission		
	UEP Equity		UEP	Equity	UEP	Equity		
	'							
Affiliates	\$0	\$0	\$54,003,231	\$6,016,347	\$(54,003,231)	\$(6,016,347)		
All Other	0	0	0	0	0	0		
Total	\$	\$	\$54,003,231	\$6,016,347	\$(54,003,231)	\$(6,016,347)		

Direct unearned premium reserve of \$54,003,231

- There are no sliding scale adjustments, contingent commissions, or other profit sharing commissions for direct, assumed or ceded business.
- D. The Company did not write off any uncollectible balances in 2007.
- E. The Company does not have ceded commutations.
- F. The Company does not have any retroactive reinsurance agreements.
- G. The Company has not entered into any deposit type reinsurance agreements as of December 31, 2007.

#### Note 23 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

The Company does not have net accrued retrospective premiums (See Note 25).

#### Note 24 - Changes in Incurred Losses and Loss Adjustment Expenses

The Company has no net exposure to changes in incurred losses and loss adjustment expenses (See Note 25).

#### **Note 25- Inter-Company Pooling Arrangements**

The Company is a member of the PIC Amended and Restated Reinsurance Pooling Agreement consisting of the following affiliated companies:

		NAIC Co. #	Pooling <u>%</u>	<u>Lines of</u> <u>Business</u>
Lead Company	Peerless Insurance Company (PIC)	24198	70.93%	All Lines
Affiliated Pool				
Companies:	Peerless Indemnity Insurance Company (PIIC)	18333	0.30%	All Lines
•	Golden Eagle Insurance Corporation (GEIC)	10836	13.25%	All Lines
	•			(Except WC)
	Indiana Insurance Company (IIC)	22659	12.25%	All Lines
	The Netherlands Insurance Company (NIC)	24171	3.27%	All Lines
	American Ambassador Casualty Company (AACC)	10073	0.00%	All Lines
	America First Insurance Company (AFIC)	12696	0.00%	All Lines
	America First Lloyd's Insurance Company (AFLIC)	11526	0.00%	All Lines
	Colorado Casualty Insurance Company (CCIC)	41785	0.00%	All Lines
	Consolidated Insurance Company (CIC)	22640	0.00%	All Lines
	Excelsior Insurance Company (EIC)	11045	0.00%	All Lines
	Globe American Casualty Company (GACC)	11312	0.00%	All Lines
	Hawkeye-Security Insurance Company (HSIC)	36919	0.00%	All Lines
	Liberty Mutual Mid-Atlantic Insurance Company (LMMAIC)	14486	0.00%	All Lines
	Mid-American Fire & Casualty Company (MAFCC)	23507	0.00%	All Lines
	Montgomery Mutual Insurance Company (MMC)	14613	0.00%	All Lines
	The Midwestern Indemnity Insurance Company (MWIC)	23515	0.00%	All Lines
			100.00%	
100% Quota Share				
Affiliated Companies:	Liberty Northwest Insurance Corporation (LNW)	41939	0.00%	All Lines
r	National Insurance Association (NIA)	27944	0.00%	All Lines
	North Pacific Insurance Company (NPIC)	23892	0.00%	All Lines
	Oregon Automobile Insurance Company (OAIC)	23922	0.00%	All Lines

Under the terms of the Reinsurance Agreements, the sequence of transactions is as follows:

- (a) Each Affiliated Pool Company cedes its net underwriting activity to the Lead Company.
- (b) Each 100% Quota Share Affiliated Company cedes its net underwriting activity to the Lead Company.
- (c) After recording the assumed affiliate transactions noted above, the Lead Company records 100% of its external assumed and ceded reinsurance activity.
- (d) The Lead Company's remaining underwriting activity, after processing all internal and external reinsurance is retroceded to the pool members in accordance with each company's pool participation percentage, as noted above.
- (e) There were no members that are parties to reinsurance agreements with non-affiliated reinsurers covering business subject to the pooling agreement that have a contractual right of direct recovery from the non-affiliated reinsurer per the terms of such reinsurance agreements.
- (f) There were no discrepancies between entries regarding pooled business on the assumed and ceded reinsurance schedules of the Lead Company and corresponding entries on the assumed and ceded reinsurance schedules of other pooled participants.
- (g) The write-off of uncollectible reinsurance is pooled and the Provision for Reinsurance is recognized by the entity placing the outbound external reinsurance.

Subject to the approval of the appropriate state insurance departments, effective January 1, 2008, the PIC Amended and Restated Reinsurance Pooling Agreement was amended to adjust pooling percentages and add the affiliates noted below. Concurrently, each company noted below terminated their existing inter-company reinsurance agreements.

American Fire and Casualty Company Avomark Insurance Company National Insurance Association Ohio Casualty of New Jersey, Inc. Ohio Security Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

Effective January 1, 2008 Bridgefield Employers Insurance Company and Bridgefield Casualty Insurance Company novated their 100% quota share agreements with Liberty Mutual Insurance Company to substitute PIC as the reinsurer.

Therefore, effective January 1, 2008, the PIC Amended and Restated Reinsurance Pooling Agreement consisted of the following affiliated companies:

		<u>NAIC</u> <u>Co. #</u>	Pooling <u>%</u>	Lines of Business
Lead Company	Peerless Insurance Company (PIC)	24198	42.00%	All Lines
Affiliated Pool				
Companies:	Peerless Indemnity Insurance Company (PIIC)	18333	5.00%	All Lines
	Golden Eagle Insurance Corporation (GEIC)	10836	7.00%	All Lines
				(Except WC)
	Indiana Insurance Company (IIC)	22659	8.00%	All Lines
	The Netherlands Insurance Company (NIC)	24171	3.00%	All Lines
	American Fire and Casualty Company (AFCC)	24066	1.00%	All Lines
	The Ohio Casualty Insurance Company (OCIC)	24074	34.00%	All Lines
	Avomark Insurance Company (AIC)	10798	0.00%	All Lines
	American Ambassador Casualty Company (AACC)	10073	0.00%	All Lines
	America First Insurance Company (AFIC)	12696	0.00%	All Lines
	America First Lloyd's Insurance Company (AFLIC)	11526	0.00%	All Lines
	Colorado Casualty Insurance Company (CCIC)	41785	0.00%	All Lines
	Consolidated Insurance Company (CIC)	22640	0.00%	All Lines
	Excelsior Insurance Company (EIC)	11045	0.00%	All Lines
	Globe American Casualty Company (GACC)	11312	0.00%	All Lines
	Hawkeye-Security Insurance Company (HSIC)	36919	0.00%	All Lines
	Liberty Mutual Mid-Atlantic Insurance Company (LMMAIC)	14486	0.00%	All Lines
	Mid-American Fire & Casualty Company (MAFCC)	23507	0.00%	All Lines
	Montgomery Mutual Insurance Company (MMC)	14613	0.00%	All Lines
	The Midwestern Indemnity Insurance Company (MWIC)	23515	0.00%	All Lines
	National Insurance Association (NIA)	27944	0.00%	All Lines
	Ohio Casualty of New Jersey, Inc. (OCNJ)	10937	0.00%	All Lines
	Ohio Security Insurance Company (OSIC)	24082	0.00%	All Lines
	West American Insurance Company (WAIC)	44393	0.00%	All Lines
			100.00%	
100% Quota Share				
Affiliated Companies:	Liberty Northwest Insurance Corporation (LNW)	41939	0.00%	All Lines
	Bridgefield Casualty Insurance Company (BEIC)	10335	0.00%	All Lines
	Bridgefield Employers Insurance Company (BEIC)	10701	0.00%	All Lines
	North Pacific Insurance Company (NPIC)	23892	0.00%	All Lines
	Oregon Automobile Insurance Company (OAIC)	23922	0.00%	All Lines

#### Note 26- Structured Settlements

- A. The Company has no net exposure to contingent liabilities from the purchase of annuities (see Note 25).
- B. Not applicable

#### Note 27 - Health Care Receivables

Not applicable

#### Note 28 - Participating Policies

Not applicable

#### Note 29 – Premium Deficiency Reserves

The Company has no net exposure to liabilities related to premium deficiency reserves (see Note 25).

#### Note 30- High Dollar Deductible Policies

As a result of the Company's participation in the PIC Amended and Restated Pooling Agreement (see Note 25), the Company does not have any net high dollar deductible policy liabilities.

#### Note 31- Discounting of Liabilities for Unpaid Losses and Unpaid Loss Adjustment Expenses

Not applicable

#### Note 32 - Asbestos/Environmental Reserves

The Company has no net exposure to asbestos and environmental claims (see Note 25).

#### Note 33- Subscriber Savings Accounts

The Company is not a reciprocal insurance company.

#### Note 34 - Multiple Peril Crop Insurance

Not applicable

### SUMMARY INVESTMENT SCHEDULE

	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement	
lavoraturant Cata assissa	1	2	3	4
Investment Categories	Amount	Percentage	Amount	Percentage
1. Bonds:				
1.1 U.S. treasury securities	1,520,903	13.511	1,520,903	13.511
1.2 U.S. government agency obligations (excluding mortgage-backed securities):				
1.21 Issued by U.S. government agencies	881,481	7.831	881,481	7.831
1.22 Issued by U.S. government sponsored agencies				
1.3 Foreign government (including Canada, excluding mortgage-backed securities)				
Securities issued by states, territories, and possessions     and political subdivisions in the U.S.:				
1.41 States, territories and possessions general obligations	6,049,445	53.740	6,049,445	53.740
1.42 Political subdivisions of states, territories and possessions and political	0,010,110		0,010,110	
subdivisions general obligations				
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				
1.513 All otner 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):				
2.1 Unaffiliated domestic securities (includes credit tenant loans rated by the SVO)				
2.2 Unaffiliated foreign securities				
2.3 Affiliated securities 3. Equity interests:				
3.1 Investments in mutual funds	1,802,369	16.011	1,802,369	16.011
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:				
3.51 Affiliated				
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 catiofaction of debt)				
(including \$ 0 of property acquired in satisfaction of debt)  5.3 Property held for sale (including \$ 0 property				
acquired in satisfaction of debt)  6. Contract loans				
7. Receivables for securities	5,104	0.045	5,104	0.045
Cash, cash equivalents and short-term investments	997,473	8.861	997,473	8.861
9. Other invested assets				
10. Total invested assets	11,256,775	100.000	11,256,775	100.000

#### PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

]

Name of Entity  NAIC Company Code  State of Domicile  the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) ended or revoked by any governmental entity during the reporting period?  s, give full information  s any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?  5,  7.21 State the percentage of foreign control	Yes [ Yes [	] No[X] ] No[X]
Name of Entity  NAIC Company Code  State of Domicile  the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) ended or revoked by any governmental entity during the reporting period?  s, give full information  s any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?		
Name of Entity  NAIC Company Code  State of Domicile  the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) ended or revoked by any governmental entity during the reporting period?  s, give full information		
Name of Entity  NAIC Company Code  State of Domicile  the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) ended or revoked by any governmental entity during the reporting period?	Yes [	] No[X]
Name of Entity  NAIC Company Code  State of Domicile  the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) ended or revoked by any governmental entity during the reporting period?	Yes [	] No[X]
Name of Entity  NAIC Company Code  State of Domicile  the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable)	Yes [	] No[X]
1 2 3		
ed to exist as a result of the merger or consolidation.		
	res [	] No [X]
		] No[X]
4.21 sales of new business?	Yes [	] No [X]
ate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on		
	1 53 [	] [40[7]
4.11 sales of new business?	Yes [	] No [X]
oination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control ostantial part (more than 20 percent of any major line of business measured on direct premiums) of:		
ng the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any		
hat department or departments? State of New Hampshire Insurance Department		
cile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination nce sheet date).		06/23/200
e as of what date the latest financial examination report became available to other states or the public from either the state of		12/31/200
the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity.		40/04/000
e as of what date the latest financial examination of the reporting entity was made or is being made.		12/31/200
e reporting entity?	Yes [	] No[X]
		New Hall
	Yes [ X	[ ] No [ New Ham
el Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to	V [ V	(1 No. 1
regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement		
	Yes [ X	
S Ced + Se s C + C II h	ding disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its all Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to tards and disclosure requirements substantially similar to those required by such Act and regulations?  Regulating?  any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement or reporting entity?  In date of change:  In as of what date the latest financial examination of the reporting entity was made or is being made.  In the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. In the should be the date of the examined balance sheet and not the date the report was completed or released.  In as of what date the latest financial examination report became available to other states or the public from either the state of cile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination not sheet date).  In as of what date the latest financial examination report became available to other states or the public from either the state of cile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination note sheet date).  In a department or departments? State of New Hampshire Insurance Department  In the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any sination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control stantial part (more than 20 percent of any major line of business measured on the reporting entity or an te, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of b	regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement ding disolosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its all Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to lards and disclosure requirements substantially similar to those required by such Act and regulations?  Yes [X Regulating?  any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement reporting entity?  Yes [Insurance Holding Company System Regulations Properties of incorporation, or deed of settlement reporting entity?  Yes [Insurance Holding Company System Regulations Properties of Insurance Openation Properties of Insurance Insura

#### **PART 1 - COMMON INTERROGATORIES**

8.3 8.4	<ul> <li>1.3 Is the company affiliated with one or more banks, thrifts or securities firms?</li> <li>1.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of the Comptroller of the Currency (OCC).</li> </ul>					al	s[ ] No[X]	
	Thrift Supervision (OTS), the Federal E affiliate's primary federal regulator.	Deposit Insurance Corporation (FDIC) and the	Securities Exchan	nge Commission (	(SEC)] and ident	ify the		
	1	2	3	4	5	6	7	
	Affiliate Name	Location (City, State)	FRB	occ	OTS	FDIC	SEC	
9.		ndependent certified public accountant or ac						
10.	consulting firm) of the individual provided Maple Avenue. Keene.NH 03431	on (officer/employee of the reporting entity or ing the statement of actuarial opinion/certifica	tion? William M. Fi	inn, FCAS,MAAA	******			
14.4	•	rty Mutual Agency Markets					. 1 . N	
11.1	Does the reporting entity own any secu	urities of a real estate holding company or oth 11.11 Name of real 11.12 Number of pa	estate holding cor arcels involved	mpany		Yes	s[ ] No[X]	0
11.2	If yes, provide explanation	11.13 Total book/a	djusted carrying va	alue		\$ <u> </u>		0
						* * * *		
		OF ALIEN REPORTING ENTITIES ONLY:						
12.1	Ü	the year in the United States manager or the		•	• ,			
10.0							. 1 . N	
		ss transacted for the reporting entity through in any of the trust indentures during the year?	ts United States Bi	ranch on risks wh	erever located?		s[ ] No[X] s[ ] No[X]	
	, ,	iciliary or entry state approved the changes?					s[ ] No[ ]	N/A [ X ]
	Are the senior officers (principal executive performing similar functions) of the rep	tive officer, principal financial officer, principal orting entity subject to a code of ethics, which g the ethical handling of actual or apparent co	includes the follow	wing standards?		Yes I	s[X] No[ ]	
3.11	b. Full, fair, accurate, timely and under c. Compliance with applicable governmd. The prompt internal reporting of violate. Accountability for adherence to the countability for	ations to an appropriate person or persons ide code. xplain:	entified in the code;	; and				
13.2 3.21		gers been amended? information related to amendment(s).					s[ ] No[X]	
	Have any provisions of the code of eth If the response to 13.3 is Yes, provide	ics been waived for any of the specified office the nature of any waiver(s).	rs?				s[ ] No[X]	
			DIRECTORS					
14.	Is the purchase or sale of all investmer committee thereof?	nts of the reporting entity passed upon either t	by the board of dire	ectors or a subord	dinate	Yes	s[X] No[]	
15.	Does the reporting entity keep a compl committees thereof?	lete permanent record of the proceedings of it	s board of directors	s and all subordir	nate		s[X] No[]	
16.		procedure for disclosure to its board of direct ers, directors, trustees or responsible employe				Yes	s[X] No[ ]	
		FINA	NCIAL					
			Accounting Principl	les (e.g., General	ly Accepted	.,		
17.		g a basis of accounting other than Statutory A	Accounting Fillicipi			Yes	s[ ] No[X]	
	Accounting Principles)?	g a basis of accounting other than Statutory Anclusive of Separate Accounts, exclusive of pr						
	Accounting Principles)?	nclusive of Separate Accounts, exclusive of po 18.11 To directors 18.12 To stockhold	olicy loans): or other officers ers not officers	raternal onlv)		\$ \$		0
18.1	Accounting Principles)? Total amount loaned during the year (in	nclusive of Separate Accounts, exclusive of po 18.11 To directors	olicy loans): or other officers ers not officers oreme or grand (Fr			\$\$\$\$		0
18.1	Accounting Principles)? Total amount loaned during the year (in	nclusive of Separate Accounts, exclusive of po 18.11 To directors 18.12 To stockhold 18.13 Trustees, su	olicy loans): or other officers ers not officers oreme or grand (Fr s, exclusive of polic or other officers			999		0 0 0

#### PART 1 - COMMON INTERROGATORIES

19.1	Were any assets reported in this statement subject to obligation being reported in the statement?	to a contractual obligation to transfe	er to another party without th	ne liability for such	Yes [ ] No [X]
19.2	If yes, state the amount thereof at December 31 of t	the current year:			
		19.21 Rented from oth			\$ 0
		19.22 Borrowed from of 19.23 Leased from other			\$ <u>0</u>
		19.24 Other	1013		\$ 0
20.1	Does this statement include payments for assessment association assessments?	ents as described in the Annual Sta	tement Instructions other that	an guaranty fund or guaranty	Yes [ ] No [X]
20.2	If answer is yes:	20.21 Amount paid as	losses or risk adjustment		\$ 0
		20.22 Amount paid as	expenses		\$ 0
21.1	Doos the reporting entity report any amounts due fr	20.23 Other amounts		2	\$0 Yes[X] No[]
	Does the reporting entity report any amounts due from freely see, indicate any amounts receivable from parent		on Fage 2 or this statement	ŗ	\$ 0
21.2	ii yes, ilidicate aliy alliounts receivable iloin parent	included in the rage 2 amount.			<u>v</u>
		INVEST	IENT		
22.1	Were all the stocks, bonds and other securities own in the actual possession of the reporting entity on sa	•			Yes[X] No[]
22.2	If no, give full and complete information, relating the	ereto			
23.1	Were any of the stocks, bonds or other assets of the control of the reporting entity, or has the reporting entity is currently in force? (Exclude securities subject to li	ntity sold or transferred any assets	•	·	Yes[X] No[]
23.2	If yes, state the amount thereof at December 31 of t				
20.2	ii yes, state the amount thereof at December 31 of t	•	Loaned to others		\$ 0
			Subject to repurchase agree	ements	\$ 0
		23.23	Subject to reverse repurcha	se agreements	\$ 0
			Subject to dollar repurchase		\$0
			Subject to reverse dollar rep	ourchase agreements	\$0
			Plead under artist acres	aanta	\$ 0
			Placed under option agreen Letter stock or securities res		\$ <u>0</u> \$
			On deposit with state or oth		\$ 1,991,403
		23.291			\$ 0
23.3	For category (23.28) provide the following:				
	1			3	$\neg$
	Nature of Restriction	Descr	iption	Amount	
24.1	Does the reporting entity have any hedging transacti	ions reported on Schedule DB?			Yes [ ] No [X]
24.2	If yes, has a comprehensive description of the hedgi	ing program been made available to	the domiciliary state?		Yes [ ] No [ ] N/A [X]
27.2	•	ing program been made available to	the domininary state:		ואוויין ווארן און
	If no, attach a description with this statement.				
25.1	Were any preferred stocks or bonds owned as of De issuer, convertible into equity?	ecember 31 of the current year man	datorily convertible into equ	ity, or, at the option of the	Yes [ ] No [X]
25.2	If yes, state the amount thereof at December 31 of t	the current year.			\$0
26.	Excluding items in Schedule E, real estate, mortgag safety deposit boxes, were all stocks, bonds and oth with a qualified bank or trust company in accordance agreements of the NAIC Financial Condition Examin	ner securities owned throughout the e with Section 3, III Conducting Exa	current year held pursuant	to a custodial agreement	Yes[X] No[]
26.01	For agreements that comply with the requirements of	of the NAIC Financial Condition Exa	miners Handbook, complete	e the following:	
	1			2	
	Name of Custodia			an's Address	
	JP MORGAN CHASE		3 Chase Metro Tech Center	r, Brooklyn, NY 11245	-
					コーニー
26.02	For all agreements that do not comply with the requiname, location and a complete explanation:	irements of the NAIC Financial Cor	dition Examiners Handbook	, provide the	
	1	2		3	
	Name(s)	Location(s)	Com	plete Explanation(s)	$\overline{}$
	ī		ı		ı

Yes [ ] No [X]

26.03 Have there been any changes, including name changes, in the custodian(s) identified in 26.01 during the current year?

#### **PART 1 - COMMON INTERROGATORIES**

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

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

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

1	2	3
Central Registration		
Central Registration Depository Number(s)	Name	Address

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

Yes [ ] No [X]

27.2 If yes, complete the following schedule:

1	2	3
		Book/Adjusted
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value
27.2999 Total		

27.3 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

28. 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 (+)
28.1 Bonds	11,251,671	11,430,459	178,788
28.2 Preferred stocks			
28.3 Totals	11,251,671	11,430,459	178,788

28.4	Describe the sources or methods utilized in determining the fair values: IDC, NAIC-SVO, BLOOMBERG, BROKER QUOTES, ANALYTICALLY D	ETERMINED	
29.1	Have all the filing requirements of the Purposes and Procedures manual of the NAIC Securities Valuation Office been followed?	Yes [X] No [ ]	
29.2	If no, list exceptions:		
	OTHER		
30.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?	\$	C

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

1	2
Name	Amount Paid
	\$
	\$
	\$

31.1 Amount of payments for legal expenses, if any?

0

#### **PART 1 - COMMON INTERROGATORIES**

31.2 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
	\$
	\$
	\$

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

\$	0
D	U

32.2 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
	\$
	\$
	\$
	\$

1.1	1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force?						
1.2	If yes, indicate premium earned on U. S. business only.	\$		0			
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement	\$		0			
	1.31 Reason for excluding						
1 /	Indicate amount of earned premium attributable to Canadian and/or O	ther Alien not included in Item (1	2) ahove		¢		٥
		The Allem not included in item (1.	z) above.		φ		0
1.5					<u> </u>		
1.6		nt three years:					
		otal premium earned			<b>¢</b>		0
		otal premium earned			ψ		0
		umber of covered lives			ψ		0
					Ψ		
	• •	ior to most current three years:			¢		0
		otal premium earned			ф		0
		otal incurred claims			<u>*</u>		0
4 7		umber of covered lives			<b></b>		0
1.7	Group policies:	4 46					
		nt three years:			Φ.		0
		otal premium earned			<u>\$</u>		0
		otal incurred claims			\$		0
		umber of covered lives			\$		0
	•	ior to most current three years:			•		•
		otal premium earned			\$		0
		otal incurred claims			\$		0
	1.76 N	umber of covered lives			\$		0
2.	Health Test:		,				
			1	2			
			Current Year	Prior Year			
		um Numerator	\$ 0	\$			
		um Denominator	\$ 0	\$			
		um Ratio (2.1/2.2)	0.00	0.00			
		ve Numerator	\$	\$			
		ve Denominator	\$ 0	\$			
	2.6 Reser	ve Ratio (2.4/2.5)	0.00	0.00			
3.1	Does the reporting entity issue both participating and non-participating	policies?			YES [	] NO [ X ]	
3.2	If yes, state the amount of calendar year premiums written on:						
	3.21 Pa	articipating policies			\$		0
	3.22 N	on-participating policies			\$		0
4.	For Mutual Reporting Entities and Reciprocal Exchange only:						
4.1	Does the reporting entity issue assessable policies?				YES [	] NO [ X ]	
4.2	Does the reporting entity issue non-assessable policies?				YES [	] NO [ X ]	
4.3	If assessable policies are issued, what is the extent of the contingent	iability of the policyholders?					0 %
4.4	Total amount of assessments paid or ordered to be paid during the ye	ar on deposit notes or contingent	premiums.		\$		0
5.	For Reciprocal Exchanges Only:						
5.1	Does the exchange appoint local agents?				YES [	] NO [ X ]	
5.2	If yes, is the commission paid:						
		ut of Attorney's-in-fact compensa	ition		YES [	] NO [ ]	N/A [ X ]
	5.22 A	s a direct expense of the exchang	ge		YES [	] NO [ ]	N/A [ X ]
5.3	What expenses of the Exchange are not paid out of the compensation	of the Attorney in fact?	<b>.</b>		-		
	· · · · · · · · · · · · · · · · · · ·						
F 4					VECT	INOTY	
	Has any Attorney-in-fact compensation, contingent on fulfillment of cel				-	] NO [ X ]	
5.5	If yes, give full information			* * * * * * * * * * * * * * * * * * * *			
				* * * * * * * * * * * * * * * * * * * *			

(Continued)

6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss: In 2007, the Company purchased Workers' Compensation Catastrophe reinsurance separately and/or with the Liberty Mutual Group with limits of \$1,175m xs \$25m. A minimum of 75% was placed for each layer.		
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:  The Company tracks aggregate property and WC exposure and reviews quarterly. It uses RiskLink from RMS and AIR from AIR for EQ and wind. It uses RiskLink for WC. Concentrations are in the Northeast for wind and New Madrid for EQ.		
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  In 2007, the Company purchased property catastrophe reinsurance, separately and/or with the Liberty Mutual Group with limits of \$1,900m xs \$50m.  The coverage is sufficient to protect against the Company's 250 year event.		
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated		
6.5	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[>	(]NO[ ]
	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.	YES[	] NO [X]
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	YES [	] NO [ X ]
	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 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;  (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;  (c) Aggregate stop loss reinsurance coverage;  (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;  (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or  (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.	YES [	] NO [X]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:  (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or  (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity		
9.3	or its affiliates in a separate reinsurance contract.  If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	YES[	] NO [X]
9.4	Except for transactions meeting the requirements of paragraph 30 of SSAP No. 62, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the		
	period covered by the financial statement, and either:  (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or		
	(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	YES [	] NO [ X ]

(Continued)

9.5	If yes to 9.4, explain in the Reinsural	•	al Filing for General In	terrogatory 9 (Section L	D) why the contract(s)			
9.6	is treated differently for GAAP and S The reporting entity is exempt from t		n Sunnlement under o	ne or more of the follow	ing criteria:			
9.0	(a) The entity does not utilize reins		1 Supplement under of	le of filore of the follow	ing chiena.		YES[]NO[X]	
	(b) The entity only engages in a 10		vith an affiliate and the	affiliated or lead compa	any has filed an		TEO[ ]NO[X]	
	attestation supplement; or,				,		YES[]NO[X]	
	(c) The entity has no external cess	ions and only participates	in an intercompany po	ol and the affiliated or le	ead company has			
	filed an attestation supplement.						YES[X]NO[ ]	
10.	If the reporting entity has assumed ri	sks from another entity, th	ere should be charged	I on account of such rei	insurances a reserve eq	ual to that		
	which the original entity would have						YES[]NO[]N	/A [ X ]
	Has the reporting entity guaranteed		-				YES[]NO[X]	
11.2	If yes, give full information							
12.1	If the reporting entity recorded accru		s on insurance contrac	ts on Line 13.3 of the as	sset schedule, Page 2,	state the		
	amount of corresponding liabilities re		11211				•	•
		12.11 12.12	Unpaid losses	a ovnoncos (includina la	oss adjustment expense	c)	\$	0
		12.12	Oripaid underwritin	g expenses (including it	oss adjustillerit experise	5)	ψ	
	Of the amount on Line 13.3, Page 2,		-				\$	0
12.3	If the reporting entity underwrites con			ensation, are premium	notes or promissory no	tes accepted	V501 1N01V1N	
	from its insureds covering unpaid pre	emiums and/or unpaid loss	ses?				YES[]NO[X]N/	A[ ]
12.4	If yes, provide the range of interest r	ates charged under such r	notes during the period	covered by this statem	nent:			
		12.41	l From					0.000 %
		12.42						0.000 %
12.5	Are letters of credit or collateral and		-					
	promissory notes taken by a reporting losses under loss deductible features		of the reporting entity's	reported direct unpaid	loss reserves, including	unpaid	YES[]NO[X]	
12 6	If yes, state the amount thereof at D		ır·				ILS[ ]NO[X]	
12.0	in yes, state the amount thereof at b	12.61					\$	0
		12.62		er funds			\$	0
13.1	Largest net aggregate amount insure	ed in any one risk (excludir	ng workers' compensat	ion):			\$	0
13.2	Does any reinsurance contract consi	dered in the calculation of	this amount include a	aggregate limit of reco	overy without also includ	ing a		
	reinstatement provision?						YES[]NO[X]	
13.3	State the number of reinsurance con	`			ultative programs, auton	natic		
	facilities or facultative obligatory con	tracts) considered in the c	alculation of the amoui	nt.				3
	Is the company a cedant in a multiple						YES[X]NO[ ]	
14.2	If yes, please describe the method o		reinsurance among the	cedants: Premiu	ims and recoverables we	ere		
	allocated pursuant to separate interc	ompany agreements.						
14.3	If the answer to 14.1 is yes, are the				iple cedant reinsurance			
	contracts?		•	·	•		YES[]NO[X]	
14.4	If the answer to 14.3 is no, are all the	e methods described in 14	.2 entirely contained in	written agreements?			YES[X]NO[ ]	
14.5	If the answer to 14.4 is no, please ex	plain:						
	Has the reporting entity guaranteed						YES[]NO[X]	
15.2	If yes, give full information							
16.1	Does the reporting entity write any w	arranty business?					YES[]NO[X]	
	If yes, disclose the following informa	tion for each of the following	ng types of warranty co	overage:				
		1	2	3	А	5		
		Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premiun	n	
		Incurred	Unpaid	Premium	Unearned	Earned		
	40.44   11		•				0	
	16.11 Home 16.12 Products	\$ 0 \$ 0	\$ 0	\$	\$		0	
	16.13 Automobile	\$ 0	\$	\$	\$ 0 \$ 0	\$ s	0	
	16.14 Other*	\$ 0	\$	\$ 0 \$ 0	\$	\$ \$	0	
		·	·	·	*	*		
	* Disclose type of coverage:							

GENERAL INTERROGATORIES (Continued)

17.1	Does the reporting entity include amounts recoverable on unau	thorized reinsurance in Schedule F - Part 3 that it excludes from		
	Schedule F - Part 5.	YES[]NO[	X ]	
	Incurred but not reported losses on contracts not in force prior t	o July 1, 1984 and not subsequently renewed are exempt from inclusion in Schedu	ıle F -	
	Part 5. Provide the following information for this exemption:			
	17.11	Gross amount of unauthorized reinsurance in Schedule F - Part 3		
		excluded from Schedule F - Part 5	\$	0
	17.12	Unfunded portion of Interrogatory 17.11	\$	0
	17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$	0
	17.14	Case reserves portion of Interrogatory 17.11	\$	0
	17.15	Incurred but not reported portion of Interrogatory 17.11	\$	0
	17.16	Unearned premium portion of Interrogatory 17.11	\$	0
	17.17	Contingent commission portion of Interrogatory 17.11	\$	0
	Provide the following information for all other amounts included			
	17.18	Gross amount of unauthorized reinsurance in Schedule F - Part 3		
		excluded from Schedule F - Part 5	\$	0
	17.19	Unfunded portion of Interrogatory 17.18	\$	0
	17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$	0
	17.21	Case reserves portion of Interrogatory 17.18	\$	0
	17.22	Incurred but not reported portion of Interrogatory 17.18	\$	0
	17.23	Unearned premium portion of Interrogatory 17.18	\$	0
	17.24	Contingent commission portion of Interrogatory 17.18	\$	0

#### **FIVE-YEAR HISTORICAL DATA**

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

		1 1	2	3	4	5
		2007	2006	2005	2004	2003
$\vdash$	0 P 1 W 14 (P 0 P - 1 4 P O - 1 4 0 0 0)					
L	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,		24.224.22			
	19.1, 19.2 & 19.3, 19.4)	39,430,887	24,971,805	22,087,816	23,879,906	23,297,945
	Property lines (Lines 1, 2, 9, 12, 21 & 26)	45,434,352	30,422,356	22,093,393	21,332,497	18,705,847
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	29,420,901	18,788,398	16,029,757	16,210,248	15,875,704
4.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)					
5.	Nonproportional reinsurance lines (Lines 30, 31 & 32)					
6.	Total (Line 34)	114,286,140	74,182,559	60,210,966	61,422,651	57,879,496
	Net Premiums Written (Page 8, Part 1B, Col. 6)					
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.	Nonproportional reinsurance lines (Lines 30, 31 & 32)					
12.	Total (Line 34)					
	Statement of Income (Page 4)					
13.	Net underwriting gain (loss) (Line 8)					
14.	Net investment gain (loss) (Line 11)	400,400	442,684	554,149	461,972	477,377
15.	Total other income (Line 15)			(145,012)		
	Dividends to policyholders (Line 17)					
	Federal and foreign income taxes incurred (Line 19)		(22,703)	(38,059)	(96,799)	(259,428)
	Net income (Line 20)	507,168	465.387	447.196	558.771	736.805
	Balance Sheet Lines (Pages 2 and 3)					
19	Total admitted assets excluding protected cell business					
'0'	(Page 2, Line 24, Col. 3)	11,509,205	10,773,469	12,164,665	13,218,324	14,550,133
20	Premiums and considerations (Page 2, Col. 3)					
20.	20.4 In source of collection (Line 12.4)					
	20.2 Deferred and not yet due /Line 12.2\					
	20.3 Accrued retrospective premiums (Line 13.3)					
121	Total liabilities excluding protected cell business (Page 3, Line 24)	427.934	196,666	1,808,874	3,309,729	5,093,513
	Lanca (Para 2 Line 4)		190,000	1,000,074	3,309,729	5,095,515
	* * * * * * * * * * * * * * * * * * * *					
23.	Loss adjustment expenses (Page 3, Line 3)					
24.	Unearned premiums (Page 3, Line 9)					
25.	Capital paid up (Page 3, Lines 28 & 29)		1,800,000	1,800,000	1,800,000	1,800,000
26.	Surplus as regards policyholders (Page 3, Line 35)	11,081,271	10,576,803	10,355,791	9,908,595	9,456,620
	Cash Flow (Page 5)					
27.	Net cash from operations (Line 11)	1,460,601	4,573,833	(2,426,810)	(2,187,489)	5,031,611
	Risk-Based Capital Analysis					
	Total adjusted capital	11,081,271	10,576,803	10,355,791	9,908,595	9,456,620
29.	Authorized control level risk-based capital	39,704	37,585	42,467	24,912	121,376
	Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
	(Page 2, Col. 3)					
	(Item divided by Page 2, Line 10, Col. 3) x 100.0					
30.	Bonds (Line 1)	75.1	92.0	98.7	99.8	94.5
31.	Stocks (Lines 2.1 & 2.2)					
32.	Mortgage loans on real estate (Lines 3.1 and 3.2)					
33.	Real estate (Lines 4.1, 4.2 & 4.3)					
34.	Cash, cash equivalents and short-term investments (Line 5)		8.0	1.3	5.9	5.5
35.	Contract loans (Line 6)	1 1				
36.	Other invested assets (Line 7)					
37.					(5.7)	
	Aggregate write-ins for invested assets (Line 9)					
	Cash, cash equivalents and invested assets (Line 10)		100.0	100.0	100.0	100.0
	Investments in Parent, Subsidiaries and Affiliates					
40.	Affiliate the sets (Oct. D. O	1				
1	Affiliated and conducted at the D. O. and D. D. O. and D. O. L. A.					
	Affiliated common stocks (Sch. D. Summon, Line 52, Col. 1)					
1	Affiliated short-term investments (subtotals included in Schedule DA,					
43.	P-10 O1 5 1: 7)	1				
144	Part 2, Col. 5, Line 7)					
Ι.	Affiliated mortgage loans on real estate					
45.	All other affiliated					
46.	Total of above Lines 40 to 45					
1/1/	Percentage of investments in parent, subsidiaries and affiliates					
7' .	As a complete as a second and backed the confirm AC of the confirm of the CC					
"	to surplus as regards policyholders (Line 46 above divided by Page 3, Col. 1, Line 35 x 100.0)					

### **FIVE-YEAR HISTORICAL DATA**

(Continued)

		1 2007	2 2006	3 2005	4 2004	5 2003
	Capital and Surplus Accounts (Page 4)					
48. 49.	Net unrealized capital gains (losses) (Line 24)  Dividends to stockholders (Line 35)		(1,035,000)			
1	Change in surplus as regards policyholders for the year (Line 38)	504,468			451,975	683,302
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
51.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,	17 C11 OOF	5 914 004	6 044 705	E 974 00E	054.070
E2	19.1, 19.2 & 19.3, 19.4)		5,814,004	6,241,725	5,874,005	951,970
	Property lines (Lines 1, 2, 9, 12, 21 & 26)	14,469,721	9,802,412	9,747,541	6,492,953	2,455,406
54.	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)		16,066,909	16,787,759	5,410,838	1,073,430
55.	Nonproportional reinsurance lines (Lines 30, 31 & 32)					
56.	Total (Line 34)	40,334,508	31,683,325	32,777,025	17,777,796	4,480,806
	Net Losses Paid (Page 9, Part 2, Col. 4)					
57.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
59.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
60.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)					
	Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34)					****
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
63.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
64.	Losses incurred (Line 2)					
	Loss expenses incurred (Line 3)					
66.	Other underwriting expenses incurred (Line 4)					
67.	Net underwriting gain (loss) (Line 8)					
	Other Percentages					
68.	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)					
69.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
70.	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)					
71.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2 - Summary, Line 12, Col. 11)					
72	Percent of development of losses and loss expenses incurred					
-	to policyholders' surplus of prior year end (Line 71 above divided by Page 4, Line 21, Col. 1 x 100.0)					
	Two Year Loss Development (000 omitted)					
73	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)					
74.	Percent of development of losses and loss expenses incurred to reported					
	policyholders' surplus of second prior year end (Line 73 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	1. United States 2. Canada			2,426,910	2,381,4
(Including all obligations guaranteed	3. Other Countries				
by governments)	4. Totals	2,402,384		2,426,910	
States, Territories and Possessions (Direct and guaranteed)	5. United States 6. Canada 7. Other Countries	6,049,445	6,121,806	6,129,337	5,800,0
(2.1.oot and guarantood)	8. Totals	6,049,445	6,121,806	6,129,337	5,800,0
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	13. United States	••••			
governments and their political subdivisions	16. Totals				
Public Utilities (unaffiliated)	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				
Credit Ferialit Loans (dilamilated)	24. Totals				
Parent, Subsidiaries and Affiliates	25. Totals				
	26. Total Bonds	8,451,829	8,630,617	8,556,247	8,181,4
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				

#### **SCHEDULE D - VERIFICATION BETWEEN YEARS**

#### Bonds and Stocks

		Donao and	a 010	ONO.	
1.	Book/adjusted carrying value of bonds and		7.	Amortization of premium	62,496
	stocks, prior year	8,740,370	8.	Foreign Exchange Adjustment:	
2.	Cost of bonds and stocks acquired, Column 7, Part 3	2,127,870		8.1 Column 15, Part 1	
3.	Accrual of discount	592		8.2 Column 19, Part 2 Section 1	
4.	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		9.	Book/adjusted carrying value at end of current period	8,451,829
	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)	8,451,829
5.	Total gain (loss), Column 19, Part 4		12.	Total nonadmitted amounts	
6.	Deduct consideration for bonds and stocks		13.	Statement value of bonds and stocks, current period	8,451,829
	disposed of Column 7, Part 4	2,354,507			

#### NONE Schedule P - Part 1 - Summary

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

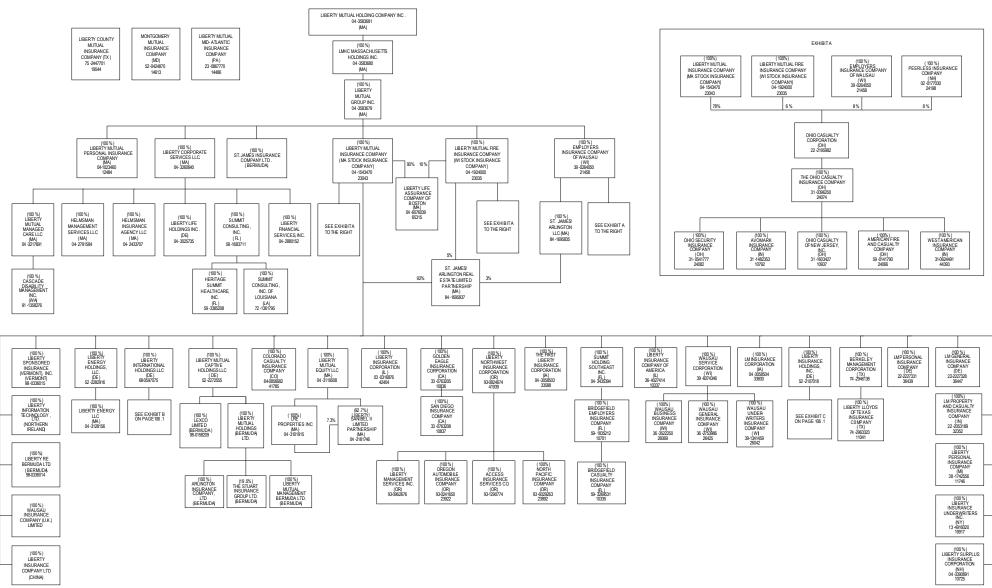
#### **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

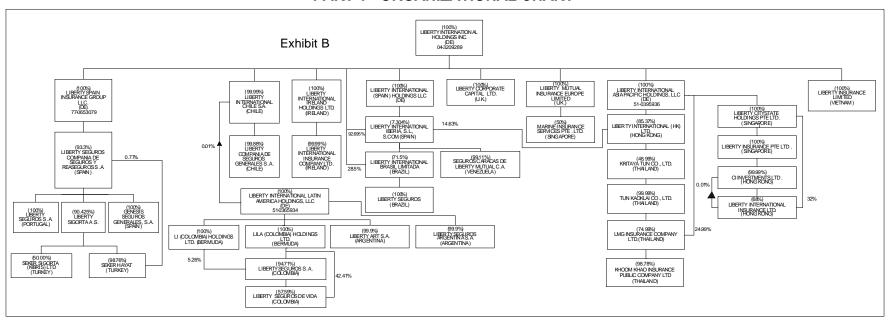
		1 Is Insurer Licen- sed?	Gross Premiums, and Membersl Return Premiums on Policies 2	nip Fees Less s and Premiums	4 Dividends Paid or Credited to Policyholders	5 Direct Losses Paid	6 Direct	7 Direct	8 Finance and Service Charges Not	9 Direct Premium Written for Federal Purchasing
States, Etc.		(Yes or No)	Direct Premiums Written	Direct Premiums Earned	on Direct Business	(Deducting Salvage)	Losses Incurred	Losses Unpaid	Included in Premiums	Groups (Included in Col. 2)
1. Alabama	AL	NO NO	AAIIIIGII	Lailieu	סמשווופסט	Jaivaye)	moulled	Onpaid	i iciliiuillo	iii OOI. Z)
2. Alaska	AK	NO								
3. Arizona	AZ AR	NO	1 012 210	1 069 501		1 670 500	1 601 202	0 520 002	0.000	
4. Arkansas	CA	YES NO	1,813,310	1,968,521		1,679,592	1,601,202	2,539,983	8,028	* * * * * * * * * * * * * * * * * * * *
6. Colorado	CO	NO	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *
7. Connecticut	CT	NO								
8. Delaware	DE	NO								
9. Dist. Columbia 10. Florida	DC FL	NO YES								
10. Florida 11. Georgia	GA	YES			* * * * * * * * * * * * * * * * * * * *					* * * * * * * * * * * * * * * * * * * *
12. Hawaii	HI	NO								
13. Idaho	ID 	NO								
14. Illinois 15. Indiana	IL IN	NO NO		1,003						
16. lowa	IA	NO				* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *
17. Kansas	KS	NO								
18. Kentucky	KY	NO								
19. Louisiana 20. Maine	LA ME	YES NO	39,004,576	32,491,032		13,294,846	12,704,864	19,566,794	172,689	
21. Maryland	MD	NO NO								
22. Massachusetts	MA	NO								
23. Michigan	MI	NO			*****	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	
24. Minnesota	MN MS	NO NO			* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * *				
25. Mississippi 26. Missouri	MO	NO								
27. Montana	MT	NO								
28. Nebraska	NE	NO								
29. Nevada	NV	NO								
30. New Hampshire 31. New Jersey	NH NJ	YES NO								
32. New Mexico	NM	NO				* * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *
33. New York	NY	NO								
34. No. Carolina	NC	NO								
35. No. Dakota 36. Ohio	ND	NO								
37. Oklahoma	OH OK	NO YES	7,463,430	7.547.649		2,721,297	3,435,787	2,572,502	33,044	* * * * * * * * * * * * * * * * * * * *
38. Oregon	OR	NO					9, 199, 191.			* * * * * * * * * * * * * * * * * * * *
39. Pennsylvania	PA	NO								
40. Rhode Island	RI	NO								
41. So. Carolina	SC SD	YES NO	* * * * * * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *
43. Tennessee	TN	YES	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *
44. Texas	TX	YES	66,004,824	53,239,079		22,638,772	32,698,882	23,429,287	292,230	
45. Utah	UT	NO								
46. Vermont 47. Virginia	VT VA	NO NO								
48. Washington	WA	NO								
49. West Virginia	WV	NO			*****					
50. Wisconsin	WI	NO			* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * *				
51. Wyoming 52. American Samoa	WY AS	NO NO			* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * *				
53. Guam	GU	NO			* * * * * * * * * * * * * * * * * * * *					
54. Puerto Rico	PR	NO			*****	* * * * * * * * * * * * * * * * * * * *				
55. U.S. Virgin Islands 56. Northern Mariana Islands	VI MP	NO NO								
57. Canada	CN	NO NO				* * * * * * * * * * * * * * * * * * *				
58. Aggregate other					* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *			
alien	OT	XXX								
59. Totals		(a) 9	114,286,140	95,247,284		40,334,507	50,440,735	48,108,566	505,991	
DETAILS OF WRITE-INS										
5801.		xxx								
5802.		XXX								
5803.		XXX								
5898. Summary of remaining										
write-ins for Line 58										
from overflow page		XXX				<u> </u>				<u></u>
5899. Totals (Lines 5801										
through 5803 + 5898)										
(Line 58 above)		XXX	I			ı				Ī

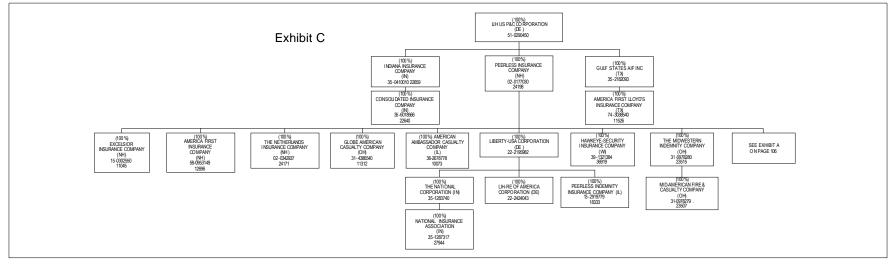
Explanation of basis of allocation of premiums by states, etc.  *Location of coverage - Fire, Allied Lines, Homeowners Multi Peril, Commercial Multi Peril, Earthquake, Boiler and Machinery								
*States of Jurisdiction under which payrolls and resulting premiums are developed - Worker's Compensation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



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





Annual Statement for the year 2007 of the	America First Insurance Company

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