	ANNUAL STATEMENT	
	OF THE	
	CLODE AMEDICAN CASHALTY COMPANY	
	GLOBE AMERICAN CASUALTY COMPANY	
of	LOVELAND	
in the state of	OHIO	
	TO THE	
	leasurance Devanturent	
	Insurance Department	
	OF THE	
	STATE OF	
	FOR THE VEAR ENDER	
	FOR THE YEAR ENDED December 31, 2004	



# **ANNUAL STATEMENT**

11312200

# For the Year Ended December 31, 2004

OF THE CONDITION AND AFFAIRS OF THE

	Globe American C	asualty Company		
NAIC Group Code 0111 (Current Period)	0111 NAIC Company (Prior Period)	Code 11312	_ Employer's ID	Number 31-4386540
(	Ohio	, State of Domicile	or Port of Entry	Ohio
Country of DomicileUnited	States of America			
Incorporated:July 5, 1951	Comr	menced Business:	September 1, 195	1
Statutory Home Office: 6281	Tri-Ridge Blvd. Loveland, OH	45140		
Main Administrative Office:3	350 East 96th Street Indianapolis,	IN 46240 31	17-816-3400	
Mail Address: 175 Berkeley Stree	t Boston, MA 02117			
Primary Location of Books and	Records: 175 Berkeley Street	Boston, MA 02117	617-357-950	0
Internet Website Address:ww	w.goamericaauto-ins.com			
Statutory Statement Contact:s				617-357-9500 43660
	Steven.Latham@LibertyMutual.com			617-574-5955
Policyowner Relations Contact:	E-Mail Address)	apolis, IN 46240	317-816-3400	(Fax Number)
Tonoyowner relations contact.			317-010-3400	
	OFFIC Chairman of			
	Roger Luc	cien Jean	:410	
1. Kevin Joh	Name In Kirschner		itle Executive Officer	
	Tucker Jenkins	Secretary		
3. Stephen [	Douglas Powell	Treasurer		
	Vice-Pre	sidents		
Name	Title	Name	)	Title
Mark Edward Fiebrink	Executive Vice President	Anthony Alexander Fon		Executive Vice President
Michael Ray Christiansen	Executive Vice President	Bob David Effinger, Jr.		Executive Vice President
Mark Edward Eighnigh	DIRECTORS O	R TRUSTEES  Kevin John Kirschner		American Lodder
Mark Edward Fiebrink Willam George Mersch	Roger Lucien Jean James Francis Dore	Michael Ray Christians		Amy Johnston Leddy Bob David Effinger, Jr.
John Derek Doyle	Kenneth Paul Blackwood			
State of Massachusetts	-			
County of Suffolk ss				
	ly sworn, each depose and say that they are ere the absolute property of the said reportin			
that this statement, together with related ex	hibits, schedules and explanations therein c the said reporting entity as of the reporting p	contained, annexed or referre	d to, is a full and true	statement of all the assets and
and have been completed in accordance wi	th the NAIC Annual Statement Instructions a	and Accounting Practices and	d Procedures manual	except to the extent that: (1) state
information, knowledge and belief, respective	vely. Furthermore, the scope of this attestation act copy (except for formatting differences d	on by the described officers a	also includes the relat	ed corresponding electronic filing
requested by various regulators in lieu of or		ac to 0.000.00		
(Signature)	` `	gnature)		(Signature)
Kevin John Kirschner (Printed Name)		Tucker Jenkins ted Name)		Stephen Douglas Powell (Printed Name)
1. President & Chief Executive Office	r Se	2. ecretary		3. Treasurer
(Title)		Title)		(Title)
Subscribed and sworn to before me this			s this an original filing	
day of <u>February</u>	, 2005	b. I	If no: 1. State the 2. Date file	e amendment numberd
				of pages attached

# **ASSETS**

			Current Year		Prior Year
		1			4
		Assets	Nonadmitted Assets	Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)	17,861,517		17,861,517	17,225,957
	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$ 0 encumbrances)				
	4.2 Properties held for the production of income (less \$ 0 encumbrances)				
	4.3 Properties held for sale (less \$ 0 encumbrances)				
5.	Cash (\$ (495,121), Schedule E-Part 1), cash equivalents (\$ 0,				
	Schedule E-Part 2) and short-term investments (\$ 866,881 , Schedule DA)	371,760		371,760	(412,794)
6.	Contract loans (including \$ 0 premium notes)				
7.					
8.	Receivable for securities			1,054	
9.					
10.	Subtotals, cash and invested assets (Lines 1 to 9)	18,234,331		18,234,331	16,813,163
11.	Investment income due and accrued	241,635		241,635	230,077
12.	Premiums and considerations:				
	12.1 Uncollected premiums and agents' balances in the course of collection				
	12.2 Deferred premiums, agents' balances and installments booked but deferred and				
	not yet due (including \$ 0 earned but unbilled premiums)				
	12.3 Accrued retrospective premiums				
13.	Reinsurance:				
	13.1 Amounts recoverable from reinsurers	(91,804)		(91,804)	2,277,237
	13.2 Funds held by or deposited with reinsured companies				
	13.3 Other amounts receivable under reinsurance contracts				
14.	Amounts receivable relating to uninsured plans				
15.1	Current federal and foreign income tax recoverable and interest thereon	128,675		128,675	4,123
15.2	Net deferred tax asset	149,000	149,000		
	Guaranty funds receivable or on deposit				2,070
17.	Electronic data processing equipment and software				
18.	Furniture and equipment, including health care delivery assets (\$ 0 )				
19.	Net adjustment in assets and liabilities due to foreign exchange rates				
20.	Receivables from parent, subsidiaries and affiliates	756,384		756,384	
21.	Health care (\$ 0 ) and other amounts receivable				
22.	Other assets nonadmitted				
23.	Aggregate write-ins for other than invested assets	132,973	1,440	131,533	100,814
24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts (Lines 10 to 23)	19,551,194	150,440	19,400,754	19,427,484
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
	Total (Lines 24 and 25)	19,551,194	150,440	19,400,754	19,427,484

DETAILS OF WRITE-INS				
0901.				
0902.	********			
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page				
0999. Totals (Lines 0901 through 0903 + 0998) (Line 9 above)				
2301. Other assets	132,973	1,440	131,533	100,814
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page				
2399. Totals (Lines 2301 through 2303 + 2398) (Line 23 above)	132,973	1,440	131,533	100,814

LIABILITIES, SURPLUS AND OTHER FUNDS	1 Current Year	2 Prior Year
Losses (Part 2A, Line 34, Column 8)     Reinsurance payable on paid loss and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3 Loss adjustment expanses (Part 2A Line 24 Column 0)		
Commissions payable, contingent commissions and other similar charges		
Other expenses (excluding taxes, licenses and fees)		
Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))	I I	
7.2 Net deferred tax liability		5,933
8. Borrowed money \$ (3,240) and interest thereon \$ 0	(3,240)	
9. Unearned premiums (Part 1A, Line 37, Column 5) (after deducting unearned premiums for ceded reinsurance of		
\$ 9,343,268 and including warranty reserves of \$ 0 )		
10. Advance premium		
11. Dividends declared and unpaid: 11.1 Stockholders		
11.2 Policyholders		
10 Coded reinguisme neuralism neuralism commissions)	2,517,667	2,396,250
Ceded reinsulance premiums payable (net or ceding commissions)     Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)		
14. Amounts withheld or retained by company for account of others		235
15. Remittances and items not allocated		
16. Provision for reinsurance (Schedule F, Part 7)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		663,227
20. Payable for securities		
21. Liability for amounts held under uninsured accident and health plans		
22. Capital notes \$ 0 and interest thereon \$ 0 23. Aggregate write-ins for liabilities	000 707	392,301
04 Table 128 and 12 and	0.747.404	3,457,946
25 Protected cell liabilities		0,407,040
26. Total liabilities (Lines 24 and 25)	2,747,164	3,457,946
27. Aggregate write-ins for special surplus funds		· · ·
28. Common capital stock	2,000,000	2,000,000
29. Preferred capital stock		
30. Aggregate write-ins for other than special surplus funds		
31. Surplus notes		
32. Gross paid in and contributed surplus	10,857,109	10,857,109
33. Unassigned funds (surplus)	3,796,481	3,112,429
34. Less treasury stock, at cost:		
34.1 0 shares common (value included in Line 28 \$ 0 ) 34.2 0 shares preferred (value included in Line 29 \$ 0 )		
35. Surplus as regards policyholders (Lines 27 to 33, less 34) (Page 4, Line 38)	16,653,590	15,969,538
36. TOTALS (Page 2, Line 26, Col. 3)	19,400,754	19,427,484
DETAILS OF WRITE-INS		
2301. Other Liabilities	232,737	392,301
2302.		
2303.		
2398. Summary of remaining write-ins for Line 23 from overflow page		
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	232,737	392,301
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page		
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)		
3001.		
3002.		
3003.		
3098. Summary of remaining write-ins for Line 30 from overflow page 3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)		
Looper Lines 2001 miles 2007 bines 2020 frame 20 and the second frame 20 and the second frame 200 and the second frame 20		

	UNDERWRITING AND INVESTMENT EXHIBIT	1	2
	STATEMENT OF INCOME	Current Year	Prior Year
	UNDERWRITING INCOME	Odirent Teal	Thorrea
1.	Premiums earned (Part 1, Line 34, Column 4)		
	DEDUCTIONS		
	Losses incurred (Part 2, Line 34, Column 7) Loss expenses incurred (Part 3, Line 25, Column 1)		
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 1)		
	Aggregate write-ins for underwriting deductions		
6. 7	Total underwriting deductions (Lines 2 through 5)  Net income of protected cells		
	Net income of protected cells  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)	854,491	1,102,395
	Net investment income earned (Exhibit of Net Investment Income, Line 17)  Net realized capital gains (losses) (Exhibit of Capital Gains (Losses))		55,053
11.	Net investment gain (loss) (Lines 9 + 10)	854,491	1,157,448
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off		
	(amount recovered \$ 0 amount charged off \$ 0 )		
13. 1⊿	Finance and service charges not included in premiums  Aggregate write-ins for miscellaneous income	(FOC)	
15.	Total other income (Lines 12 through 14)	(586)	
	Net income before dividends to policyholders and before federal and foreign income taxes (Lines 8 + 11 + 15)	853,905	1,157,448
	Dividends to policyholders  Net income, after dividends to policyholders but before federal and foreign income taxes (Line 16 minus Line 17)	853.905	1,157,448
	Federal and foreign income taxes incurred	174,346	362,933
20.	Net income (Line 18 minus Line 19) (to Line 22)	679,559	794,515
	CAPITAL AND SURPLUS ACCOUNT		
21	Surplus as regards policyholders, December 31 prior year (Page 4, Line 38, Column 2)	15,969,538	15,180,955
	GAINS AND (LOSSES) IN SURPLUS	.0,000,000	.0,.00,000
	CAMO AND (ECCOLO) IN COM ECC		
	Net income (from Line 20)	679,559	794,515
23. 24.	Change in net unrealized capital gains or (losses)  Change in net unrealized foreign exchange capital gain (loss)		
25.	Change in net deferred income tax	4 5 4 0 2 2 1	(5,932)
26.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3)	(150,440)	
27.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
	Change in surplus notes Surplus (contributed to) withdrawn from protected cells	*****	
30.	Cumulative effect of changes in accounting principles	*********************	
31.	Capital changes: 31.1 Paid in		
	31.2 Transferred from surplus (Stock Dividend)		
	31.3 Transferred to surplus	*********************	
32.	Surplus adjustments:		
	32.1 Paid in 32.2 Transferred to capital (Stock Dividend)	*****	
	32.3 Fransferred from capital	*********************	
	Net remittances from or (to) Home Office Dividends to stockholders		
34. 35.	Change in treasury stock (Page 3, Lines 34.1 and 34.2, Column 2 minus Column 1)	*****	
36.	Aggregate write-ins for gains and losses in surplus	******	
37.	Change in surplus as regards policyholders for the year (Lines 22 through 36) Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 37) (Page 3, Line 35)	684,052 16,653,590	788,583 15,969,538
38.	Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 37) (Page 3, Line 35)	10,055,590	15,969,536
	DETAILS OF WRITE-INS		
0501			
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)		
		(500)	
1401. 1402.	Other income (expenses)	(586)	
1403.			
	Summary of remaining write-ins for Line 14 from overflow page	·	
	Totals (Lines 1401 through 1403 plus Line 1498) (Line 14 above)	(586)	
3601.			
3602. 3603.			
3698.	Summary of remaining write-ins for Line 36 from overflow page		
	Totals (Lines 3601 through 3603 plus Line 3698) (Line 36 above)		

CASH FLOW	1	2
Cash from Operations	Current Year	Prior Year
Premiums collected net of reinsurance		2,396,250
2. Net investment income 2. Miscollandous income 3. M	891,397	1,108,226
3. Miscellaneous income	1,012,228	255
<ul><li>4. Total (Lines 1 through 3)</li><li>5. Benefit and loss related payments</li></ul>	(2,369,041)	3,504,731 2,764,475
Net transfers to Separate, Segregated Accounts and Protected Cell Accounts		2,704,475
Net transiers to Separate, Segregated Accounts and Protected Cell Accounts     Commissions, expenses paid and aggregate write-ins for deductions	(2,070)	
<ul><li>7. Commissions, expenses paid and aggregate write-ins for deductions</li><li>8. Dividends paid to policyholders</li></ul>	(2,070)	
9. Federal and foreign income taxes paid (recovered) \$ 0 net of tax on capital gains (losses)	298,898	567,026
10 Total (Lines E through 0)	(2.072.242)	3,331,501
11 Not each from operations (Line 4 minus Line 10)	3 084 441	173,230
	3,004,441	173,200
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	865,038	4,130,059
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		964
12.8 Total investment proceeds (Lines 12.1 to 12.7)	865,038	4,131,023
13. Cost of investments acquired (long-term only):	4 540 000	7 200 000
13.1 Bonds	1,549,062	7,399,922
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		7 200 022
13.7 Total investments acquired (Lines 13.1 to 13.6)	1,550,116	7,399,922
14. Net increase (decrease) in policy loans and premium notes		(2.000.000)
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(685,078)	(3,268,899)
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	(3,240)	1,000
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	(1,611,569)	3,365,554
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(1,614,809)	3,366,554
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
18. Net change in cash and short-term investments (Line 11, plus Lines 15 and 17)	784,554	270,885
19. Cash and short-term investments:		
19.1 Beginning of year	(412,794)	(683,679)
19.2 End of year (Line 18 plus Line 19.1)	371,760	(412,794)
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**

Gross Premiums (Less Return Premiums), Including Policy and Membership Fees Written and Renewed During Year

	1 1	Reinsurand	e Assumed	Reinsuran	6		
Line of Business	Direct Business (a)	2 From Affiliates	3 From Non- Affiliates	4 To Affiliates	5 To Non- Affiliates	Net Premiums Written Cols. 1 + 2 + 3 4 - 5	
1. Fire							
2. Allied lines							
3. Farmowners multiple peril							
Homeowners multiple peril							
Commercial multiple peril							
6. Mortgage guaranty							
Ocean marine						* * * * * * * * * * * * * * * * * * * *	
9. Inland marine							
10. Financial guaranty							
11.1 Medical malpractice - occurrence							
11.2 Medical malpractice - claims-made  12. Earthquake							
13. Group accident and health							
14. Credit accident and health (group and individual)							
15. Other accident and health							
16. Workers' compensation							
17.1 Other liability - occurrence							
17.2 Other liability - claims-made	.						
18.1 Products liability - occurrence	.		l				
18.2 Products liability - claims-made							
19.1, 19.2 Private passenger auto liability	27,360,020			27,360,020			
19.3, 19.4 Commercial auto liability							
21. Auto physical damage	11,592,920			11,592,920			
22. Aircraft (all perils)							
23. Fidelity							
24. Surety	240			240			
26. Burglary and theft							
27. Boiler and machinery							
28. Credit							
20 International							
30. Reinsurance-Nonproportional Assumed Property	XXX						
* * * * * * * * * * * * * * * * * * * *							
<ul><li>31. Reinsurance-Nonproportional Assumed Liability</li><li>32. Reinsurance-Nonproportional Assumed Financial Lines</li></ul>	XXX						
*****	.						
33. Aggregate write-ins for other lines of business	38,953,180			20.052.100			
34. TOTALS	30,933,100			38,953,180			
DETAILS OF WRITE-INS							
301.							
302.							
1303.							
1398. Summary of remaining write-ins for Line 33 from overflow page	. [						
1399. Totals (Lines 3301 through 3303 plus 3398) (Line 33 above)	· <del>                                    </del>						
333. Totals (Lines 3301 through 3303 plus 3330) (Line 33 above)							

oes the	cor	mpany's direct premiums written include premiums recorded on an installment basis? Yes [ ] No [ X ]	
yes:	1.	The amount of such installment premiums \$ 0	
	2.	Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$	0

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

		Losses Paid I	Less Salvage		5	6	7	8
Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
Fire     Allied lines								
Farmowners multiple peril     Homeowners multiple peril     Commercial multiple peril								
Mortgage guaranty     Ocean marine     Inland marine								
10. Financial guaranty 11.1 Medical malpractice - occurrence 11.2 Medical malpractice - claims - made								
12. Earthquake 13. Group accident and health								
Credit accident and health (group and individual)     Other accident and health     Workers' compensation								
17.1 Other liability - occurrence 17.2 Other liability - claims - made 18.1 Products liability - occurrence								
18.2 Products liability - claims - made 19.1, 19.2 Private passenger auto liability 19.3, 19.4 Commercial auto liability	13,261,411		13,261,411					
Auto physical damage     Aircraft (all perils)     Fidelity	5,472,814		5,472,814					
24. Surety 26. Burglary and theft 27. Boiler and machinery	254,945		254,945					
Credit     International     Reinsurance-Nonproportional Assumed Property	XXX							
31. Reinsurance-Nonproportional Assumed Liability 32. Reinsurance-Nonproportional Assumed Financial Lines 33. Aggregate write-ins for other lines of business	XXX XXX							
34. TOTALS	18,989,170		18,989,170					
DETAILS OF WRITE-INS								
3301. 3302. 3303.								
3398. Summary of remaining write-ins for Line 33 from overflow page 3399. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)								

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

		Report	ted Losses			Incurred But Not Reported	d	8	9
Line of Business	1 Direct	2  Reinsurance Assumed	3 Deduct Reinsurance Recoverable from Authorized and Unauthorized Companies	4  Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6  Reinsurance Assumed	7 Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Unpaid Loss Adjustment Expenses
Line of dusiness	Direct	Assumed	Companies	(0015. 1 + 2 - 3)	Direct	Assumeu	Ceded	(COIS. 4 + 5 + 0 - 1)	Expenses
1. Fire									
2. Allied lines	* * * * * * * * * * * * * * * * * * * *								
Farmowners multiple peril	* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *
Homeowners multiple peril	* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *				
5. Commercial multiple peril									
6. Mortgage guaranty									
8. Ocean marine									
9. Inland marine									
Financial guaranty     Medical malpractice - occurrence									
11.1 Medical malpractice - occurrence									
12. Earthquake	* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		
13. Group accident and health	* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *			(a)	
14. Credit accident and health (group and individual)	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	(a)	* * * * * * * * * * * * * * * * * * * *
15. Other accident and health	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	(a)	* * * * * * * * * * * * * * * * * * * *
16. Workers' compensation	* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	1,67	
17.1 Other liability - occurrence	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		
17.2 Other liability - claims - made			* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *		
18.1 Products liability - occurrence			* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		
18.2 Products liability - claims - made									
19.1, 19.2 Private passenger auto liability	12,157,842		12,157,842		8,097,036		8,097,036	I	
19.3, 19.4 Commercial auto liability									
21. Auto physical damage	706,012		706,012		(1,026,467)		(1,026,467)		
22. Aircraft (all perils)	* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *				* * * * * * * * * * * * * * * * * * * *
23. Fidelity									
24. Surety	100,880		100,880		599,478		599,478		
26. Burglary and theft									
27. Boiler and machinery									
28. Credit 29. International									
30. Reinsurance-Nonproportional Assumed Property	XXX				XXX				
31. Reinsurance-Nonproportional Assumed Froperty	······································				x x x				
32. Reinsurance-Nonproportional Assumed Enablity	XXX				XXX		* * * * * * * * * * * * * * * * * * * *		
33. Aggregate write-ins for other lines of business									
34. TOTALS	12,964,734		12,964,734		7,670,047		7,670,047		
TO TALLO	12,307,734		12,507,104		1,010,041	<u> </u>	1,010,041	<u>I</u>	
DETAILS OF WRITE-INS									
3301.									
3302.	* * * * * * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * * * * * * *					
3303.				*********			* * * * * * * * * * * * * * * * * * * *		
3398. Summary of remaining write-ins for Line 33 from overflow page				*******					
3399. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)									
1 3333. Totals (Lines 3301 tillough 3303 + 3330) (Line 33 above)						1			

(a) Including \$ ... 0 for present value of life indemnity claims.

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

		1	2	3	4
		Loop Adjustment	Other	lavostmont	
		Loss Adjustment Expenses	Underwriting Expenses	Investment Expenses	Total
1	Claim adjustment services:				
	44.50	1,767,423			1,767,423
	1.1 Direct 1.2 Reinsurance assumed				1,707,728
					1,767,423
	1.3 Reinsurance ceded				1,707,423
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				
	Commission and brokerage:				
	2.1 Direct excluding contingent		4,579,097		4,579,097
	2.2 Reinsurance assumed excluding contingent				
	2.3 Reinsurance ceded excluding contingent		4,579,097		4,579,097
	2.4 Contingent-direct				461,189
	2.5 Contingent-reinsurance assumed				
	2.6 Contingent-reinsurance ceded		461,189		461,189
	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				
	Advertising				
	Boards, bureaus and associations				
	Surveys and underwriting reports			*******	
	Audit of assureds' records				
	Salary and related items:				
				1,176	1,176
	8.1 Salaries				
	8.2 Payroll taxes				222
	Employee relations and welfare			608	6.08
	Insurance				
	Directors' fees				
	Travel and travel items				
13.	Rent and rent items				
14.	Equipment			48	48
15.	Cost or depreciation of EDP equipment and software				
16.	Printing and stationery			19	19
17.	Postage, telephone and telegraph, exchange and express			10	
	Legal and auditing			4,455	
	Totals (Lines 3 to 18)			6,538	6,538
	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$ 0				
	20.2 Insurance department licenses and fees				
	20.3 Gross guaranty association assessments			* * * * * * * * * * * * * * * * * * * *	
	20.4 All other (excluding federal and foreign income and real estate)				
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
	Real estate expenses				
	Real estate taxes				
	Reimbursements by uninsured accident and health plans				
24.	Aggregate write-ins for miscellaneous expenses				
25.	Total expenses incurred			6,538	(a) 6,538
26.	Less unpaid expenses-current year				
28.	Amounts receivable relating to uninsured accident and health				
	plans, prior year	[			
	Amounts receivable relating to uninsured accident and health				
	plans, current year				
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			6,538	6,538
2401.	DETAILS OF WRITE-INS				
2401.					
MILL					
					<u>-</u>
2403.	Summary of remaining write-ins for Line 24 from overflow page				

(a) Includes management fees of \$ 6,538 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) 777,406	788,653
1.1		(a)	
1.2	Other bonds (unaffiliated)	(a) 62,678	62,678
1.3	Bonds of affiliates	(a)	
	Preferred stocks (unaffiliated)	(b)	
	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)		
2.21	Common stocks of affiliates	<b></b>	
3.	Mortgage loans	(c)	
4.	Real estate	(d)	
5.	Contract loans	l	
6.	Cash, cash equivalents and short-term investments	(e) 7,649	7,961
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income	1,737	1,737
10.	Total gross investment income	849,470	861,029
11.	Investment expenses		(g) 6,538
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		6,538
17.	Net investment income (Line 10 minus Line 16)		854,491
	DETAILS OF WRITE-INS		
0901	Miscellaneous Income/(Expense)	1.737	1,737
0902.	······································		
0903.			
	Summary of remaining write-ins for Line 9 from overflow page		
	Totals (Lines 0901 through 0903) plus 0998 (Line 9, above)	1,737	1,737
1501. 1502. 1503. 1598. 1599.	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 (fin)citation	cludes \$ 0 accrual of discount less \$ 0 amortization of premium and less cludes \$ 0 accrual of discount less \$ 0 amortization of premium.	5 \$ 0 paid for accrued 5 \$ 0 paid for accrued 0 interest on encumbrances. 5 \$ 0 paid for accrued es, excluding federal income taxes, att	dividends on purchases. interest on purchases. interest on purchases.

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

				•	
		1	2	3	4
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Increases (Decreases) by Adjustment	Total
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	NIA	L		
2.2	Common stocks (unaffiliated)	NO	N E		
2.21	Common stocks of affiliates	1101	<b>4</b> . L		
3.	Mortgage loans				
4.	Real estate				
5.	Contract loans				
6.	Cash, cash equivalents and short-term investments				
7.	Derivative instruments				
8.	Other invested assets				
9.	Aggregate write-ins for capital gains (losses)				
10.	Total capital gains (losses)				
	DETAILS OF WRITE-INS				
0901.					
0902.		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		
0903.		* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *		
0903.	Summary of remaining write-ins for Line 9 from overflow page				
<u>0999.</u>	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			
	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			
	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			
	investments (Schedule DA)			
6.	Contract loans			
7.	Other invested assets (Schedule BA)			
8.	Receivable for securities			
9.	Aggregate write-ins for invested assets			
10.	Subtotals, cash and invested assets (Lines 1 to 9)			
11.	Investment income due and accrued			
12.	Premiums and considerations:			
	<ul> <li>12.1 Uncollected premiums and agents' balances in the course of collection</li> <li>12.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due</li> </ul>			
	12.3 Accrued retrospective premiums			
13.	Reinsurance:	******		
	13.1 Amounts recoverable from reinsurers			
	13.2 Funds held by or deposited with reinsured companies			* * * * * * * * * * * * * * * * * * * *
	13.3 Other amounts receivable under reinsurance contracts			* * * * * * * * * * * * * * * * * * * *
14.	Amounts receivable relating to uninsured plans	******		
15.1		******		* * * * * * * * * * * * * * * * * * * *
15.2	Net deferred tax asset	140 000		(149,000
16.	Guaranty funds receivable or on deposit			
17.	Electronic data processing equipment and software			* * * * * * * * * * * * * * * * * * * *
18.	Furniture and equipment, including health care delivery assets			* * * * * * * * * * * * * * * * * * * *
19.	Net adjustment in assets and liabilities due to foreign exchange rates	******		
20.	Receivable from parent, subsidiaries and affiliates	*****		
21.	Health care and other amounts receivable	******		
22.	Other assets nonadmitted	******		
23.	Aggregate write-ins for other than invested assets	1,440		(1,440
24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell			
	Accounts (Lines 10 to 23)	150,440		(150,440
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
26.	Total (Lines 24 and 25)	150,440		(150,440
	DETAILS OF WRITE-INS			
0901.				
0902.				
0903.				

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	1,	440	(1,440
2302.			
2303.			
2398. Summary of remaining write-ins for Line 23 from overflow page			
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	1.	440	(1.440

#### 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 Ohio, the accompanying financial statements of Globe American Casualty 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 for direct business and are based on reports received from ceding companies for reinsurance assumed. 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:

- Investment grade 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).
- Investment grade 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 value. Prepayment assumptions for single class mortgage-backed/asset backed securities and multi-class securities were obtained from internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all single class mortgage-backed/asset-backed securities and multi-class securities. Non-investment grade mortgage-backed/asset backed securities are stated at the lower of amortized value or fair value.
- 7. The Company has no subsidiary investments.
- 8. The Company has no investments in joint ventures, partnerships or limited liability companies.
- 9. The Company has no derivative instruments.
- 10. The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, *Property-Casualty Contracts Premiums*.
- 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 2004.

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

- A. There were no material changes in accounting principles or corrections of errors during the year.
- B. The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Ohio. Effective January 1, 2001, the Ohio Department of Insurance required that insurance companies domiciled in Ohio prepare their statutory-basis financial statements in accordance with the NAIC APP Manual, effective January 1, 2001, subject to any deviations prescribed or permitted by the Ohio Insurance Commissioner.

#### 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 does not hold any mortgage loans as investments.

B. Troubled Debt Restructuring for Creditors

Not applicable

C. Reverse Mortgages

The Company has no reverse mortgages.

- D. Loan-Backed Securities
  - 1. The Company has 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 assumptions for single class and multi-class mortgages-backed/asset-backed securities were based upon 1-month historical constant prepayment rates.
  - 3. The Company used IDSI, Bloomberg, and Lehman Index data in determining the market value of the vast majority of its loan-backed securities. A small number of securities are priced in other ways, such as contacting brokers.
  - 4. 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.

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

- A. The Company has no investments in joint ventures, partnerships, or limited liability companies.
- B. 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, 2004.

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

The Company was not a party to any derivative financial instruments during the year.

#### 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, 2004	December 31, 2003	Change
Total of gross deferred tax assets	152,083	6,067	146,016
Total of deferred tax liabilities	(3,083)	(12,000)	8,917
Net deferred tax asset	149,000	(5,933)	154,933
Net deferred tax asset non-admitted	(149,000)	0	(149,000)
Net admitted deferred tax asset	0	(5,933)	5,933

- 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:

	2004	2003
Federal	471,846	362,933
Net operating loss benefit	(297,500)	0
Foreign	0	0
Federal and foreign income tax incurred	174,346	362,933

The Company's deferred tax assets and liabilities result primarily from reversal of discount accretion on bonds, alternative minimum tax credit carryforward, and statutory non-admitted assets.

- D. Effective tax rates differ from the current statutory rate of 35% principally due to the effects of revisions to prior year estimates and changes in deferred taxes related to statutory non-admitted assets.
- The amount of Federal income taxes incurred and available for recoupment in the event of future losses are 169,000 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.

The Company has minimum tax credit of \$169,000 which does not expire.

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

Access Insurance Services, Co. ALM Services, Inc. Ambco Capital Corporation America First Insurance Company America First Lloyds Insurance Company American Ambassador Casualty Company 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.

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. Companies Agency, Inc.

Colorado Casualty Insurance Company

Companies Annuity Agency of Texas, Inc.

Consolidated Insurance Company Copley Venture Capital, Inc. Countrywide Services Corporation Diversified Settlements, Inc.

Employers Insurance Company of Wausau

**Excelsior Insurance Company** First State Agency, Inc. Florida State Agency, Inc. Globe American Casualty Company

Golden Eagle Insurance Corporation

Gulf States AIF, Inc.

Hawkeye-Security Insurance Company Helmsman Insurance Agency of Illinois, Inc. Helmsman Insurance Agency of Texas, Inc. Heritage-Summit Healthcare of Florida, Inc.

Indiana Insurance Company

LEXCO Limited

Liberty Assignment Corporation Liberty Corporate Services, Inc. Liberty Energy Corporation Liberty Financial Services, Inc. Liberty Hospitality Group, Inc.

Liberty Insurance Company of America

Liberty Insurance Corporation Liberty Insurance Holdings, Inc. Liberty Insurance Underwriters, Inc. Liberty International Aberdeen, Inc.

Liberty International Asia Pacific Holdings, Inc.

Liberty International Holdings, 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 Capital Corporation (Boston) Liberty Mutual Fire Insurance Company

Liberty Mutual Group Inc.

Liberty Mutual Holding Company, Inc. Liberty Mutual Insurance Company Liberty Mutual Managed Care, Inc. Liberty Northwest Insurance Corporation Liberty Personal Insurance Company

Liberty RE (Bermuda) Limited Liberty Real Estate Corporation Liberty Surplus Insurance Corporation

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

LLS Insurance Agency of Nevada, Inc.

LM Insurance Corporation

LMHC Massachusetts Holding, Inc.

LRE Properties, Inc. Mid-American Agency, Inc.

Mid-American Fire and Casualty Company

Missouri Agency, Inc.

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

Peerless Insurance Company LM Personal Insurance Company LM General Insurance Company

LM Property and Casualty Insurance Company

San Diego Insurance Company

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

St. James Insurance Company Summit Consulting, Inc.

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

The National Corporation

The Netherlands Insurance Company

Wausau (Bermuda) Ltd.

Wausau Business Insurance Company Wausau General Insurance Company

Wausau Holdings, Inc. Wausau Service Corporation

Wausau Underwriters Insurance Company

\*This company joined the consolidated group in 2004 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 Indemnity Insurance Company, an insurance company incorporated in the State of Illinois. Peerless Indemnity Insurance Company is wholly owned by Liberty-USA Corporation.

The outstanding shares of Liberty-USA are owned by Peerless Insurance Company, an insurance company incorporated in the State of New Hampshire. Peerless Insurance Company 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, an insurance company incorporated in Massachusetts. The ultimate parent of Liberty Mutual Insurance Company is Liberty Mutual Holding Company, Inc., a Massachusetts company.

- B. All non-insurance transactions which the Company had with its affiliates involved less than ½ of 1% of the total admitted assets of the reporting entity.
- C. See Note 26.
- D. At December 31, 2004, the Company reported \$1,022,845 due from affiliates. In general, the terms of the intercompany arrangements require settlement at least quarterly.
- D. The Company has made no guarantee or initiated undertaking for the benefit of affiliates that result in a material contingent exposure of the Company's or affiliates' assets or liabilities.
- F. The Company entered into a management and services agreement (the "Agreement"), effective January 1, 1999, with the Peerless Insurance Company (PIC) and other affiliates. The Service Agreement allows all 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 an investment management agreement, effective May, 1999 with Liberty Mutual Insurance Group (LMIG). Under this agreement, LMIG provides investment management services to the Company.

The Company entered into a management services and cost sharing agreement, effective December 15, 2001, with Liberty Mutual Insurance Company (LMIC) and affiliates. 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.

- 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. Not applicable

#### 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 an intercompany cost-sharing arrangement as described in note 10F.

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

- 1. The Company has 2,000 shares authorized, issued and outstanding as of December 31, 2004. All shares have a stated par value of \$1,000.
- 2. Preferred Stock

Not applicable

Dividend Restrictions

There are no dividend restrictions.

- 4. The maximum amount of dividends which can be paid by Ohio-domiciled insurance companies to shareholders without prior approval of the Insurance Commissioner is the greater of (a) 10% of surplus, or (b) net income. The maximum dividend payout that may be made without prior approval in 2005 is \$1,665,359.
- 5. 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 or reduced by each item below is as follows:

nulative Increase	Current Year Increase
rease) in Surplus	(Decrease) in Surplus
0	0
(\$150,440)	(\$150,440)
0	0
(\$150,440)	(\$150,440)
	0 (\$150,440) 0

10. Surplus Notes

Not applicable

11. Quasi re-organization (dollar impact)

Not applicable

12. Quasi re-organization (effective date)

Not applicable

#### **Note 14- Contingencies**

#### A. Contingent Commitments

The Company has no commitments or contingent commitments to affiliates or other entities as indicated in Note 10E, 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 the inter-company reinsurance arrangement with Peerless Insurance Company (see note 26), all balances are ceded to the Peerless pool.

C. Gain Contingencies

Not applicable

D. All other Contingencies

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

#### 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 sales transactions during the year.

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

A. Administrative Services Only (ASO) Plans

Not applicable

B. Administrative Services Contract (ASC) Plans

Not applicable

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contracts

Not applicable

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

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

#### Note 20 – September 11 Events

Not applicable

#### Note 21- 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 \$2,629,983 and \$2,629,303 as of December 31, 2004 and 2003, respectively, were on deposit with government authorities or trustees as required by law.
- D. As a result of the inter-company reinsurance agreement with Peerless Indemnity Insurance Company, see Note 26, the Company has no exposure to uncollectible premium receivable balances.
- E. Business Interruption Insurance Recoveries

There were no reported losses that exceeded the policy deductible.

### Note 22- Events Subsequent

There were no events subsequent to December 31, 2004 which would require disclosure.

#### Note 23- Reinsurance

- A. Excluding amounts arising pursuant to the intercompany pooling agreement, as described in Note 26, there are no unsecured reinsurance recoverables with an individual reinsurer which exceed 3% of policyholders surplus.
- B. There are no reinsurance recoverables in dispute from an individual reinsurer which 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
  - 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, 2004.

	Assumed 1	Reinsurance Programme Reinsurance	Ceded Re	<u>insurance</u>	Net Reins	surance
		Commission		Commission		Commission
	UEP	Equity	UEP	Equity	UEP	Equity
				***	0.000000	\$44.000.00 <b>.00</b>
Affiliates	\$0	\$0	\$9,343,268	\$1,098,337	\$(9,343,268)	\$(1,098,337)
All Other	\$(	\$0	\$0	\$0	\$0	\$0
Total	\$(	\$0	\$9,343,268	\$1,098,337	\$(9,343,268)	\$(1,098,337)

Direct unearned premium reserve of \$9,343,268

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

Direct	\$534,715
Assumed	\$0
Ceded	\$(534,715)
Net	\$0

- D. The Company did not write off any uncollectible balances in 2004.
- 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, 2004.

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

The Company does not have net accrued retrospective premiums.

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

As a result of the inter-company reinsurance agreement with Peerless Indemnity Insurance Company, see Note 26, the Company has no exposure to changes in incurred losses and loss adjustment expenses.

#### **Note 26- Intercompany Pooling Arrangements**

The Company participates in a 100% Quota Share (Fronting) Reinsurance Agreement (the Agreement) with its parent, Peerless Indemnity Insurance Company (PIIC). Pursuant to the Agreement, after external reinsurance, the Company cedes its net underwriting activity to PIIC.

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

- A. The Company has not purchased annuities.
- B. Not applicable

#### Note 28 - Health Care Receivables

Not applicable

#### Note 29 - Participating Policies

Not applicable

### Note 30 – Premium Deficiency Reserves

As a result of the inter-company reinsurance agreement with Peerless Indemnity Insurance Company, see Note 26, the Company has no exposure to liabilities related to premium deficiency reserves.

#### Note 31- High Dollar Deductible Policies

Not applicable

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

Not applicable

#### Note 33 - Asbestos/Environmental Reserves

Not applicable

#### Note 34- Subscriber Savings Accounts

The Company is not a reciprocal insurance company.

#### Note 35 - Multiple Peril Crop Insurance

Not applicable

# **SUMMARY INVESTMENT SCHEDULE**

		Gro Investment	Holdings	Holdings Annual Statement		
	Investment Categories	1 Amount	2 Percentage	3 Amount	4 Percentage	
1. Bo	nds:					
	U.S. treasury securities	14,529,265	79.681	14,529,265	79.681	
1.:	2 U.S. government agency and corporate obligations					
	(excluding mortgage-backed securities):					
	1.21 Issued by U.S. government agencies	1,022,029	5.605	1,022,029	5.605	
	1.22 Issued by U.S. government sponsored agencies					
	B Foreign government (including Canada, excluding mortgage-backed securities)					
1.4	Securities issued by states, territories, and possessions					
	and political subdivisions in the U.S.:					
	1.41 States, territories and possessions general obligations     1.42 Political subdivisions of states, territories and possessions and political					
	authiniana ganaral abligations					
	1.43 Revenue and assessment obligations					
	1.44 Industrial development and similar obligations		* * * * * * * * * * * * * * * * * * * *			
1.	Mortgage-backed securities (includes residential and commercial MBS):					
	1.51 Pass-through securities:					
	1.511 Issued or guaranteed by GNMA	1,311,989	7.195	1,311,989	7.195	
	1.512 Issued or guaranteed by FNMA and FHLMC	998,234	5.474	998,234	5.474	
	1.513 All other					
	1.52 CMOs and REMICs:					
	1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA					
	1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-					
	backed securities issued or guaranteed by agencies shown in Line 1.521					
	1.523 All other					
1	her debt and other fixed income securities (excluding short term):					
1	Unaffiliated domestic securities (includes credit tenant loans rated by the SVO)					
	2 Unaffiliated foreign securities					
l	3 Affiliated securities					
l	uity interests: Investments in mutual funds					
l	Preferred stocks:					
J	3.21 Affiliated					
	3.22 Unaffiliated					
3.	Publicly traded equity securities (excluding preferred stocks):		* * * * * * * * * * * * * * * * * * * *			
	3.31 Affiliated					
	3.32 Unaffiliated					
3.	Other equity securities:					
	3.41 Affiliated					
	3.42 Unaffiliated					
3.	Other equity interests including tangible personal property under lease:					
	3.51 Affiliated					
	3.52 Unaffiliated		*****			
	ortgage loans:					
1	Construction and land development					
l	2 Agricultural					
4.						
4.						
4.						
l	al estate investments:					
l	Property occupied by company					
l	Property held for production of income					
	(includes \$ 0 of property acquired in satisfaction of debt)					
5.	Property held for sale (\$ 0 including property					
	acquired in satisfaction of debt)					
6. Po	licy loans					
7. R	ceivables for securities	1,054	0.006	1,054	0.006	
8. Ca	sh, cash equivalents and short-term investments	371,760	2.039	371,760	2.039	
9. Ot	her invested assets					
10. To	tal invested assets	18,234,331	100.000	18,234,331	100.000	

# PART 1 - COMMON INTERROGATORIES

### **GENERAL**

1.1		reporting entity a member of an Insurance Holding (insurer?	Company System consisting o	of two or more affiliated	d persons, one or more of which	Yes [ X	. ] No [ ]	
1.2	such provid Mode	, did the reporting entity register and file with its dom regulatory official of the state of domicile of the princiding disclosure substantially similar to the standards of Insurance Holding Company System Regulatory Ac	pal insurer in the Holding Co adopted by the National Asso t and model regulations perta	mpany System, a regis ociation of Insurance C aining thereto, or is the	stration statement ommissioners (NAIC) in its	Yes [ X	.] No[]	N/A [
1.3	State	Regulating?					Ohio	
2.1		any change been made during the year of this statem reporting entity?	ent in the charter, by-laws, ar	ticles of incorporation,	or deed of settlement	Yes [	] No[X]	
2.2	-	, date of change: previously filed, furnish herewith a certified copy of the	ne instrument as amended.					
3.1	State	as of what date the latest financial examination of th	e reporting entity was made of	or is being made.			12/31/1999	)
3.2		the as of date that the latest financial examination redate should be the date of the examined balance she					12/31/1999	)
3.3	domi	as of what date the latest financial examination repo- cile or the reporting entity. This is the release date or nice sheet date).		•			10/24/2001	l
3.4	By w	nat department or departments? Ohio Department of	Insurance					
4.1	comb	g the period covered by this statement, did any agen ination thereof under common control (other than sal stantial part (more than 20 percent of any major line	aried employees of the report	ting entity) receive cred	•			
				4.	11 sales of new business? 12 renewals?	Yes [ Yes [	] No [X] ] No [X]	
4.2	affilia	g the period covered by this statement, did any sales te, receive credit or commissions for or control a sub- premiums) of:	•					
					21 sales of new business? 22 renewals?	Yes [ Yes [	] No [X] ] No [X]	
5.1	Has t	he reporting entity been a party to a merger or conso	lidation during the period cov	ered by this statement	?	Yes [	] No [ X ]	
5.2	-	, provide the name of the entity, NAIC company code and to exist as a result of the merger or consolidation.	e, and state of domicile (use t	wo letter state abbrevi	ation) for any entity that has			
		1 Name of Entity	2 NAIC Company Code	3 State of Domicile				
	ļ							
	ŀ							
	ŀ							
	ŀ							
	1							
6.1	susp	he reporting entity had any Certificates of Authority, I ended or revoked by any governmental entity during t onfidentiality clause is part of the agreement.)	-			Yes [	] No[X]	
6.2		aire full information					1	
		any foreign (non-United States) person or entity dire	ctly or indirectly control 10% of	or more of the reporting	g entity?	Yes [	] No [X]	
1.2	If yes	7.21 State the percentage of foreign control					0 %	
		7.22 State the nationality(s) of the foreign person manager or attorney-in-fact and identify the				:t).		
	[	1	2					
	}	Nationality	Type of	Entity	$\overline{}$			
	İ							

1 Ist	he company a subsidiary of a bank holdi	ng company regulated by the Federal Re	eserve Board?			Yes	[ ] No[X]
2 If ro	esponse to 8.1 is yes, please identify the	name of the bank holding company.					
If re fina Thi	the company affiliated with one or more be esponse to 8.3 is yes, please provide the ancial regulatory services agency [i.e. the rift Supervision (OTS), the Federal Depo liate's primary federal regulator.	names and location (city and state of the Federal Reserve Board (FRB), the Offi	ce of the Comptroller	r of the Currency	(OCC), the Office	e of	[ ] No[X]
	1	2	3	4	5	6	7
	Affiliate Name	Location (City, State)	FRB	OCC	OTS	FDIC	SEC
			NO	NO	NO	NO	NO
			NO NO	NO NO	NO NO	NO NO	NO NO
			NO NO	NO NO	NO NO	NO	NO
			NO	NO	NO	NO	NO
			NO	NO	NO	NO	NO
			NO NO	NO	NO NO	NO	NO NO
			NO NO	NO NO	NO NO	NO NO	NO NO
			NO	NO	NO	NO	NO
62 Lib FO Wh N/# Do Ha If a ls t cor Cor Ha affi	nsulting firm) of the individual providing the Maple Avenue Keene, NH 03431 erty Regional Agency Markets.  IR UNITED STATES BRANCHES OF ALL hat changes have been made during the All hat changes have been any changes made to any inswer to (11.3) is yes, has the domicilianthe purchase or sale of all investments of mmittee thereof?  The purchase or sale of all investments of mmittee thereof?  The purchase or sale of all investments of mmittee thereof?  The purchase or sale of all investments of mmittee thereof?  The purchase or sale of all investments of mmittee thereof?  The purchase or sale of all investments of mmittee thereof?  The purchase or sale of all investments of mmittee thereof?	JEN REPORTING ENTITIES ONLY: year in the United States manager or the unsacted for the reporting entity through of the trust indentures during the year? y or entry state approved the changes?  BOARD OF the reporting entity passed upon either permanent record of the proceedings of ite	DIRECTORS by the board of directors of trustees of an	ees of the reportion on risks who eters or a subord and all subording material interes	ing entity? erever located? inate ate	Yes Yes Yes Yes	[ ] No[X] [ ] No[X] [ ] No[ ] N/A  [X] No[ ]  [X] No[ ]
		FINA	NCIAL				
l Tot	tal amount loaned during the year (inclus	15.11 To directors 15.12 To stockhold	or other officers	ternal only)		<i>\$</i>	
2 Tot	tal amount of loans outstanding at the er	15.21 To directors 15.22 To stockhold	or other officers			\$ \$	
obl	ere any assets reported in this statement igation being reported in the statement?		nsfer to another party	y without the liab	oility for such	Yes	[ ] No[X]
	es, state the amount thereof at Decembers, state the amount thereof at Decembers, state the amount the state of	16.21 Rented from 16.22 Borrowed from 16.23 Leased from 16.24 Other	om others			<i>6</i> 666	
l Do	es this statement include payments for a sociation assessments?	· ·	Statement Instruction	ns other than gu	aranty fund or gua		[ ] No[X]
<u>≀</u> Ifa	inswer is yes:	17.21 Amount paic 17.22 Amount paic 17.23 Other amou		justment		\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

#### **INVESTMENT**

18. List the following capital stock information for the reporting entity:

 $22.2\,\,$  If yes, state the amount thereof at December 31 of the current year.

	1	2	3	4	5	6
	Number of Shares	Number of Shares	Par Value	Redemption Price	Is Dividend Rate	Are Dividends
Class	Authorized	Outstanding	Per Share	If Callable	Limited?	Cumulative?
Preferred					Yes [ ] No [X]	Yes[] No[X]
Common	2,000	2,000	1,000	XXX	XXX XXX	XXX XXX

19.1	Were all the stocks, bonds and other securities owned Decin the actual possession of the reporting entity on said date	•	. • .	Yes [X] No [ ]
19.2	If no, give full and complete information, relating thereto			
20.1	Were any of the stocks, bonds or other assets of the repor control of the reporting entity, except as shown on Schedu any assets subject to a put option contract that is currently	le E - Part 3 - Special Deposits, or has the	reporting entity sold or transferred	Yes[ ] No[X]
	If yes, state the amount thereof at December 31 of the cur  For category (20.28) provide the following:	20.21 Loaned to oth 20.22 Subject to rep 20.23 Subject to rev 20.24 Subject to dol 20.25 Subject to rev 20.26 Pledged as co 20.27 Placed under	ourchase agreements erse repurchase agreements lar repurchase agreements erse dollar repurchase agreements	\$ \$ \$ \$ \$ \$
	1 Nature of Restriction	2 Description	3 Amount	
21.2	Does the reporting entity have any hedging transactions relif yes, has a comprehensive description of the hedging proof in no, attach a description with this statement.  Were any preferred stocks or bonds owned as of December	gram been made available to the domicilia	,	Yes[ ] No[X] Yes[ ] No[ ] N/A[X]
	issuer, convertible into equity?	,		Yes[] No[X]

#### **INVESTMENT**

23. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1-General, Section IV.H-Custodial or Safekeeping agreements of the NAIC Financial Condition Examiners Handbook?

Yes [X] No [ ]

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

1 Name of Custodian(s)	2 Custodian's Address
JP Morgan Chase	3 Chase Metro Tech Center, Brooklyn, NY 11245

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

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

23.03 Have there been any changes, including name changes, in the custodian(s) identified in 23.01 during the current year? 23.04 If yes, give full and complete information relating thereto:

Yes [ ] No [X]

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

23.05 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 Depository Number(s)		
Depository Number(s)	Name	Address

24.1 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]

24.2 If yes, complete the following schedule:

1	2	3
		Book/Adjusted Carrying Value
CUSIP#	Name of Mutual Fund	Carrying Value
9999999 Total		

24.3 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

#### INVESTMENT

25. 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 (+)
25.1 Bonds	18,728,398	19,199,987	471,589
25.2 Preferred stocks			
25.3 Totals	18,728,398	19,199,987	471,589

25.4	Describe the sources or methods utilized in determining the fair values: Fair value If quoted market prices are not available, fair values are based on quoted market instruments or values obtained from independent pricing services.		  
26.1	Have all the filing requirements of the Purposes and Procedures manual of the N	Yes [ X ] No [ ]	
26.2	If no, list exceptions:		
	(	OTHER	
7.1	Amount of payments to Trade Associations, Service Organizations and Statistica	al or Rating Bureaus, if any?	\$
:7.2	List the name of the organization and the amount paid if any such payment repre Associations, Service Organizations and Statistical or Rating Bureaus during the		
	1	2	
	Name	Amount Paid	
		\$	
		\$	
		<u> </u>	
28.1	Amount of payments for legal expenses, if any?		\$
	Amount of payments for legal expenses, if any?  List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement.	\$	\$
	List the name of the firm and the amount paid if any such payment represented 2	\$25% or more of the total payments for legal expenses	\$
	List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement.	\$ 25% or more of the total payments for legal expenses  2 Amount Paid	\$
	List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement.	\$25% or more of the total payments for legal expenses  2 Amount Paid	\$
	List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement.	25% or more of the total payments for legal expenses  2  Amount Paid \$	\$
	List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement.	2 Amount Paid \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$
	List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement.	2 Amount Paid \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	\$
8.2	List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement.	25% or more of the total payments for legal expenses  2 Amount Paid \$ \$ \$ \$ \$ \$	\$

1	2
Name	Amount Paid
	\$
	\$
	\$
	\$
	\$

# PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?			YES[]NO[X]		
1.2	If yes, indicate premium earned on U. S. business only.				\$	
1.3	What portion of Item (1.2) is not reported on the Medicare Supp	lement Insurance Experience Exhibit	?		\$	
	1.31 Reason for excluding					
1.4	Indicate amount of earned premium attributable to Canadian and	d/or Other Alien not included in Item (	(1.2) above.		\$	
1.5	ndicate total incurred claims on all Medicare Supplement insurance.			\$		
1.6	Individual policies:				<u>-</u>	
		current three years:				
	1.61	Total premium earned			\$	
	1.62	Total incurred claims			\$	
	1.63	Number of covered lives			\$	
	All ye	ears prior to most current three years:				
	1.64	Total premium earned			\$	
	1.65	Total incurred claims			\$	
	1.66	Number of covered lives			\$	_
1.7	Group policies:					_
	Most	current three years:				
	1.71	Total premium earned			\$	
	1.72	Total incurred claims			\$	
	1.73	Number of covered lives			\$	
	All ye	ears prior to most current three years:				
	1.74	Total premium earned			\$	
	1.75	Total incurred claims			\$	
	1.76	Number of covered lives			\$	
2	Health Test:					
۷.	ricaliti 163t.		1	2		
			Current Year	Prior Year		
	2.1	Premium Numerator	\$	\$		
	2.2	Premium Denominator	\$	\$		
		Premium Ratio (2.1/2.2)	,	,		
		Reserve Numerator	\$	\$		
		Reserve Denominator	\$	\$		
	2.0	Reserve Ratio (2.4/2.5)	* * * * * * * * * * * * * * * * * * * *			
3.1	Does the reporting entity issue both participating and non-partic	ipating policies?			YES[]	NO [ X ]
3.2	If yes, state the amount of calendar year premiums written on:					
	3.21	Participating policies			\$	
	3.22	Non-participating policies			\$	
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 contin					
4.4	Total amount of assessments paid or ordered to be paid during	the year on deposit notes or continge	ent premiums.		\$	
P5or I	Reciprocal Exchanges Only:					
5.1	Does the exchange appoint local agents?				YES[]	NO [ X ]
5.2	If yes, is the commission paid:					
	5.21	Out of Attorney's-in-fact compens				NO [ ] N/A [ X ]
	5.22	As a direct expense of the excha	-		YES[]	NO [ ] N/A [ X ]
5.3	What expenses of the Exchange are not paid out of the comper	nsation of the Attorney-in-fact?				
5.4	Has any Attorney-in-fact compensation, contingent on fulfillmen	t of certain conditions, been deferred	?		YES[]	NO [ X ]
5.5	If yes, give full information		*****			

(Continued)

# PART 2 - PROPERTY & CASUALTY INTERROGATORIES

0.1	compensation contract issued without limit of loss:  The Company has a 100% quota share agreement with Peerless Insurance Company	
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:	
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? The Company has a 100% quote share agreement with Peerless Insurance Company	
	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?  If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss	YES[X]NO[ ]
	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract which includes a provision which 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]
	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]
10.1	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?  Has the reporting entity guaranteed policies issued by any other entity and now in force:  If yes, give full information	YES[X]NO[ ]N/A[ ] YES[ ]NO[X]
11.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 12.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:	
	11.11 Unpaid losses 11.12 Unpaid underwriting expenses (including loss adjustment expenses)	\$ \$
	Of the amount on Line 12.3 of the asset schedule, Page 2, state the amount which is secured by letters of credit, collateral and other funds? If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	\$ YES[]NO[]N/A[X]
11.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement:  11.41 From  11.42 To	
	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?  If yes, state the amount thereof at December 31 of current year:	YES[]NO[X]
	11.61 Letters of Credit 11.62 Collateral and other funds What amount of installment notes is owned and now held by the reporting entity?	\$ \$ \$
12.3	Have any of these notes been hypothecated, sold or used in any manner as security for money loaned within the past year?  If yes, what amount?  Largest net aggregate amount insured in any one risk (excluding workers' compensation):	YES[]NO[X] \$ \$
13.2	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?  State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.	YES[]NO[X]

(Continued)

### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

Is the company a cedant in a mul If yes, please describe the metho		YES[]NO[X]				
reinsurance contracts?				ple cedant		YES[ ]NO[X] YES[ ]NO[X]
If the answer to 14.4 is no, please	e explain: Not Applicab	le				
						YES[]NO[X]
Does the reporting entity own any	securities of a real estate h	olding company or other	rwise hold real estate in	directly?		YES[]NO[X]
	16.1	1 Name of real estat	te holding company			
	16.1	2 Number of parcels	involved			
	16.1	3 Total book/adjuste	d carrying value		:	\$
If yes, provide explanation						
Does the reporting entity write an	v warranty business?					
		ing types of warranty co	overage:			YES[]NO[X]
	1	2	3	4	5	
	Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premium	
	Incurred	Unpaid	Premium	Unearned	Earned	
17.11 Home	\$	\$	\$	\$	\$	
17.12 Products	\$	\$	\$	\$	\$	•
17.13 Automobile	\$	\$	\$	\$	\$	
17.14 Other*	\$	\$	\$	\$	\$	•
	If the answer to 14.1 is yes, are the reinsurance contracts? If the answer to 14.3 is no, are all If the answer to 14.4 is no, please.  Has the reporting entity guarante. If yes, give full information.  Does the reporting entity own any If yes, disclose the following information.  17.11 Home 17.12 Products 17.13 Automobile	If the answer to 14.1 is yes, are the methods described in item reinsurance contracts?  If the answer to 14.3 is no, are all the methods described in 1. If the answer to 14.4 is no, please explain:  Not Applicab  Has the reporting entity guaranteed any financed premium act If yes, give full information  Does the reporting entity own any securities of a real estate here.  16.1  16.1  If yes, provide explanation  Does the reporting entity write any warranty business?  If yes, disclose the following information for each of the following incomments of the foll	If yes, please describe the method of allocating and recording reinsurance among the reinsurance contracts?  If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained reinsurance contracts?  If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in If the answer to 14.4 is no, please explain:  Not Applicable  Has the reporting entity guaranteed any financed premium accounts?  If yes, give full information  Does the reporting entity own any securities of a real estate holding company or other and the reporting entity own any securities of a real estate holding company or other in 16.11 and Name of real estate holding company or other in 16.12 and Number of parcels in 16.13 and Total book/adjusted in 16.13 and Total book/adjusted in 16.13 and Number of parcels in 16.1	If yes, please describe the method of allocating and recording reinsurance among the cedants:  If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multive reinsurance contracts?  If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?  If the answer to 14.4 is no, please explain:  Not Applicable  Has the reporting entity guaranteed any financed premium accounts?  If yes, give full information  Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate in 16.11 Name of real estate holding company 16.12 Number of parcels involved 16.13 Total book/adjusted carrying value  If yes, provide explanation  Does the reporting entity write any warranty business?  If yes, disclose the following information for each of the following types of warranty coverage:  1 2 3  Direct Losses Direct Losses Direct Losses Direct Written Incurred Unpaid Premium  17.11 Home \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?  If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?  If the answer to 14.4 is no, are all the methods described in 14.2 entirely contained in written agreements?  If the answer to 14.4 is no, please explain:  Not Applicable  Has the reporting entity guaranteed any financed premium accounts?  If yes, give full information  Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?  16.11 Name of real estate holding company 16.12 Number of parcels involved 16.13 Total book/adjusted carrying value  If yes, provide explanation  Does the reporting entity write any warranty business?  If yes, disclose the following information for each of the following types of warranty coverage:  1 2 3 4  Direct Losses Direct Written Direct Premium Incurred Unpaid Premium Unearned  17.11 Home \$ \$ \$ \$ \$ \$ \$  17.12 Products \$ \$ \$ \$ \$  17.13 Automobile \$ \$ \$ \$ \$	If yes, please describe the method of allocating and recording reinsurance among the cedants:  If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?  If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?  If the answer to 14.4 is no, please explain:  Not Applicable  Has the reporting entity guaranteed any financed premium accounts?  If yes, give full information  Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?  16.11 Name of real estate holding company 16.12 Number of parcels involved 16.13 Total book/adjusted carrying value  If yes, provide explanation  Does the reporting entity write any warranty business?  If yes, disclose the following information for each of the following types of warranty coverage:  1 2 3 4 5  Direct Losses Direct Written Direct Premium Direct Premium Direct Premium Unearmed Earned  17.11 Home \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

# **FIVE-YEAR HISTORICAL DATA**

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

		1		I		
		1	2	3	4	5
		2004	2003	2002	2001	2000
	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,					
	19.1, 19.2 & 19.3, 19.4)	27,360,020	21,041,178	19,784,856	26,511,260	26,955,879
2.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	11,592,920	8,593,827	9,589,169	13,394,792	11,620,913
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
l	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)	240	(3,353)	502,109	2,050,250	3,984,798
5.	Nonproportional reinsurance lines (Lines 30, 31 & 32)					
6.	Total (Line 34)	38,953,180	29,631,652	29,876,134	41,956,302	42,561,590
,	Net Premiums Written (Page 8, Part 1B, Col. 6)					
′·	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)					
ı	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	***				
ı	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)					
ı	Net underwriting gain (loss) (Line 8)					
ı	Net investment gain (loss) (Line 11)	854,491	1,157,448	751,486	843,955	769,104
l	Total other income (Line 15)	(586)				
16.	Dividends to policyholders (Line 17)				000 535	007.004
ı	Federal and foreign income taxes incurred (Line 19)  Net income (Line 20)	174,346	362,933 794,515	262,850 488,636	296,535 547,420	267,924 501,180
10.	Balance Sheet Lines (Pages 2 and 3)	079,559		400,030		301,100
19	Total admitted assets excluding protected cell business					
'	(Page 2, Line 24, Col. 3)	19,400,754	19,427,484	20,549,486	17,870,627	14,191,696
20.	Premiums and considerations (Page 2, Col. 3)					
	20.1 In course of collection (Line 12.1)					
	20.2 Deferred and not yet due (Line 12.2)					
	20.3 Accrued retrospective premiums (Line 12.3)					
21.	Total liabilities excluding protected cell business (Page 3, Line 24)	2,747,164	3,457,946	5,368,531	3,178,308	46,797
22.	Losses (Page 3, Lines 1 and 2)					
ı	Loss adjustment expenses (Page 3, Line 3)					
ı	Unearned premiums (Page 3, Line 9)					
ı	Capital paid up (Page 3, Lines 28 & 29)	2,000,000	2,000,000	2,000,000	2,000,000	2,000,000 14,144,899
20.	Surplus as regards policyholders (Page 3, Line 35)  Risk-Based Capital Analysis	16,653,590	15,969,538	15,180,955	14,692,319	14,144,099
27.		16,653,590	15,969,538	15.180.955	14,692,319	14,144,899
ı	Authorized control level risk-based capital	27,044	87,756	3,632	172,512	34,886
	Percentage Distribution of Cash and Invested Assets					
	(Page 2, Col. 3)					
	(Item divided by Page 2, Line 10, Col. 3) x 100.0					
29.	Bonds (Line 1)	98.0	102.5	105.1	81.5	90.6
	Stocks (Lines 2.1 & 2.2)					
l	Mortgage loans on real estate (Lines 3.1 and 3.2)					
32.	Real estate (Lines 4.1, 4.2 & 4.3)					
33.	Cash and short-term investments (Line 5)	2.0	(2.5)	(5.2)	18.5	9.4
ı	Other invested assets (Line 7)			XXX	XXX	XXX
35. 36.	Other invested assets (Line 7) Receivable for securities (Line 8)					
ı	Aggregate write-ins for invested assets (Line 9)					
ı	Cash and invested assets (Line 10)	100.0	100.0	100.0	100.0	100.0
	Investments in Parent, Subsidiaries and Affiliates					
39.	Affiliated bonds, (Sch. D, Summary, Line 25, Col. 1)					
40.	Affiliated preferred stocks (Sch. D, Summary, Line 39, Col. 1)					
ı	Affiliated common stocks (Sch. D, Summary, Line 53, Col. 2)					
42.	Affiliated short-term investments (subtotals included in Schedule DA,					
	Part 2, Col. 5, Line 11)					
ı	Affiliated mortgage loans on real estate					
l	All other affiliated Total of above Lines 39 to 44					
45. 46.	Total of above Lines 39 to 44  Percentage of investments in parent, subsidiaries and affiliates					
٠٠٠.	to surplus as regards policyholders (Line 45 above divided by					
	Page 3, Col. 1, Line 35 x 100.0)					

# **FIVE-YEAR HISTORICAL DATA**

(Continued)

		1 2004	2 2003	3 2002	4 2001	5 2000
	Capital and Surplus Accounts (Page 4)					
48.	Net unrealized capital gains (losses) (Line 23)  Dividends to stockholders (Line 34)  Change in surplus as regards policyholders		700 502			
	for the year (Line 37)	684,052	788,583	488,636	547,420	501,180
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
50.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,					
	19.1, 19.2 & 19.3, 19.4)	13,261,411	12,890,443	16,487,160	22,523,784	23,362,273
1	Property lines (Lines 1, 2, 9, 12, 21 & 26)	5,472,814	4,542,595	6,271,823	10,160,775	7,780,066
52.	7					
53.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)	254,945	671,488	1,672,241	2,453,089	2,894,019
55.	Nonproportional reinsurance lines (Lines 30, 31 & 32)  Total (Line 34)	18,989,170	18,104,526	24,431,224	35,137,648	34,036,358
33.	Total (Line 34)	10,303,170	10,104,320	24,431,224	33,137,040	34,030,330
	Net Losses Paid (Page 9, Part 2, Col. 4)					
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
57.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
58.						
59.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)					
60. 61.	Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34)					
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
62.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
	Losses incurred (Line 2)					
1	Loss expenses incurred (Line 3)					
65.	Other underwriting expenses incurred (Line 4)					
66.	Net underwriting gain (loss) (Line 8)					
	Other Percentages					
	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 34 x 100.0)					
68.	Losses and loss expenses incurred to premiums earned					
60	(Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)  Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6,					
69.	Line 34 divided by Page 3, Line 35, Col. 1 x 100.0)					
	One Year Loss Development (000 omitted)					
70.	Development in estimated losses and loss expenses incurred prior					
	to current year (Schedule P, Part 2 - Summary, Line 12, Col. 11)			* * * * * * * * * * * * * * * * * * * *		
71.	Percent of development of losses and loss expenses incurred					
	to policyholders' surplus of prior year end (Line 70 above divided by Page 4, Line 21, Col. 1 x 100.0)	* * * * * * * * * * * * * * * * * * * *		****		
	Two Year Loss Development (000 omitted)					
72.	Development in estimated losses and loss expenses incurred					
	2 years before the current year and prior year (Schedule P,					
	Part 2 - Summary, Line 12, Col. 12)			****		
73.	Percent of development of losses and loss expenses incurred to reported					
	policyholders' surplus of second prior year end (Line 72 above divided					
Щ	by Page 4, Line 21, Col. 2 x 100.0)					

### **SCHEDULE D - SUMMARY BY COUNTRY**

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

		1	2	3	4
Description		Book/Adjusted Carrying Value	Fair Value	Actual Cost	Par Value of Bonds
BONDS Governments	United States     Canada     Other Countries	16,863,283		16,938,721	16,399,978
(Including all obligations guaranteed by governments)	Other Countries     Totals	16,863,283	17,287,476	16,938,721	16,399,97
by governments)	5. United States		, ,	, ,	10,000,01
States, Territories and Possessions (Direct and guaranteed)	6. Canada 7. Other Countries				****
	8. Totals				
Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	9. United States 10. Canada 11. Other Countries				
	12. Totals				
Special revenue and special assessment obligations and all non-guaranteed	13. United States 14. Canada 15. Other Countries	998,234			1,000,00
obligations of agencies and authorities of governments and their political subdivisions	16. Totals	998,234	1,045,630	997,870	1,000,00
• • • • • • • • • • • • • • • • • • •	17. United States	,		· ·	.,,,,,,,
Public Utilities (unaffiliated)	19. Other Countries				
	20. Totals				
Industrial and Miscellaneous and Credit Tenant Loans (unaffiliated)	21. United States 22. Canada 23. Other Countries				
Grout Fortant Louis (unaminatou)	24. Totals				
Parent, Subsidiaries and Affiliates	25. Totals				
	26. Total Bonds	17,861,517	18,333,106	17,936,591	17,399,97
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	41 United States				
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 49. United States				
Industrial and Miscellaneous (unaffiliated)	50. Canada 51. Other Countries				
	52. Totals				
Parent, Subsidiaries and Affiliates	53. Totals				
	54. Total Common Stocks				
	55. Total Stocks	17.001.5:=	10.000.100	17.000 =0:	
	56. Total Bonds and Stocks	17,861,517	18,333,106	17,936,591	

# **SCHEDULE D - VERIFICATION BETWEEN YEARS**

1.	Book/adjusted carrying value of bonds and stocks, prior year	17,225,957	6. Foreign Exchange Adjustment: 6.1 Column 15, Part 1
2.	Cost of bonds and stocks acquired, Column 7, Part 3	1,549,062	6.2 Column 19, Part 2, Section 1
3.	Increase (decrease) by adjustment:		6.3 Column 16, Part 2, Section 2
	3.1 Columns 12 + 13 - 14, Part 1 (49,555)		6.4 Column 15, Part 4
	3.2 Column 18, Part 2, Section 1		7. Book/adjusted carrying value at end of current period 17,861,517
	3.3 Column 15, Part 2, Section 2		Total valuation allowance
	3.4 Column 14, Part 4	(48,464)	9. Subtotal (Lines 7 plus 8) <u>17,861,517</u>
4.	Total gain (loss), Column 19, Part 4		10. Total nonadmitted amounts
5.	Deduct consideration for bonds and stocks		11. Statement value of bonds and stocks, current period 17,861,517
	disposed of Column 7, Part 4	865,038	

# SCHEDULE P-ANALYSIS OF LOSSES AND LOSS EXPENSES

# **SCHEDULE P-PART 1-SUMMARY**

(\$000 omitted)

	Pre	emiums Earned	1		Loss and Loss Expense Payments										
Years in Which	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11 Tatal	Number of			
Premiums Were				4	5	6	7	8	9	Salvage	Total Net Paid	Claims Reported -			
Earned and	Direct		Net	Direct		Direct		Direct		and	(Cols.	Direct			
Losses Were	and		(Cols.	and		and		and		Subrogation	4 - 5 + 6	and			
Incurred	Assumed	Ceded	1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed			
1. Prior	XXX	XXX	XXX	(18)	(18)	2	2	(2)	(2)	19		XXX			
2. 1995	72,936	72,936		48,001	48,001	3,771	3,771	4,727	4,727	18		XXX			
3. 1996	76,768	76,768		52,242	52,242	6,409	6,409	3,839	3,839	60		XXX			
4. 1997	79,704	79,704		52,325	52,325	5,208	5,208	5,294	5,294	42		XXX			
5. 1998	63,850	63,850		41,054	41,054	2,834	2,834	5,854	5,854	72		XXX			
6. 1999	51,796	51,796		36,042	36,042	2,342	2,342	5,729	5,729	66		XXX			
7. 2000	40,567	40,567		27,577	27,577	1,628	1,628	4,607	4,607	99		XXX			
8. 2001	46,284	46,284		29,249	29,249	1,467	1,467	5,625	5,625	186		XXX			
9. 2002	33,738	33,738		17,262	17,262	383	383	4,389	4,389	368		XXX			
10. 2003	29,323	29,323		13,246	13,246	322	322	6,608	6,608	514		XXX			
11. 2004	37,573	37,573		11,295	11,295	309	309	3,825	3,825	376		XXX			
12. Totals	XXX	XXX	XXX	328,275	328,275	24,675	24.675	50,495	50,495	1,820		XXX			

	Losses Unpaid  Case Basis Bulk + IBNR				Defense and Cost Containment Unpaid				Adjusting a		23	24	25
	Case Basis Bulk + IBNI		IBNR	Case Basis		Bulk + IBNR		21 22				Number of	
	13	14	15	16	17	18	19	20			Salvage	Total Net	Claims Outstanding
	Direct and		Direct and		Direct and		Direct and		Direct and		and Subrogation	Losses and Expenses	Direct and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1. Prior	124	124							131	131			XXX
2. 1995	23	23							1	1			XXX
3. 1996	33	33							13	13			XXX
4. 1997	93	93	14	14			5	5	11	11			XXX
5. 1998	76	76	61	61			88	88	3	3			XXX
6. 1999	193	193	(17)	(17)			207	207	535	535			XXX
7. 2000	180	180	674	674			485	485	372	372			XXX
8. 2001	732	732	1,464	1,464			728	728	674	674			XXX
9. 2002	1,170	1,170	1,317	1,317			614	614	559	559		[	XXX
10. 2003	2,186	2,186	1,072	1,072			477	477	969	969		[	XXX
11. 2004	8,157	8,157	3,087	3,087			993	993	1,215	1,215			XXX
12. Totals	12,967	12,967	7,672	7,672			3,597	3,597	4,483	4,483			XXX

		otal Losses and Expenses Incur			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			r Discount	34	Net Balance Sheet Reserves After Discount		
	26	27	28	29 30		31	32	33	Inter-Company	35	36	
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid	
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX			
2. 1995	56,523	56,523		77.497	77.497							
3. 1996	62,536	62,536		81.461	81.461							
4. 1997	62,950	62,950		78.980	78.980							
5. 1998	49,970	49,970		78.262	78.262							
6. 1999	45,031	45,031		86.939	86.939							
7. 2000	35,523	35,523		87.566	87.566							
8. 2001	39,939	39,939		86.291	86.291							
9. 2002	25,694	25,694		76.157	76.157							
10. 2003	24,880	24,880		84.848	84.848							
11. 2004	28,881	28,881		76.866	76.866							
12 Totals	XXX	XXX	XXX	XXX	XXX	XXX	·		XXX			

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

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

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

Allocated by States and Territories

14	Allocated by States and Territories											
Page		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					5	6	7		-	
Subsect   Subs	1				•		D'					
Salida,   Company   Comp												
Sales   Co.   Propose   Dece   Permanes   Dece   Decelor   Decel								D'and	D' I			
Note				_	ŭ							
1. Abstraria AL NO	Ctatas Eta		,				,					
2 Alasta		A.1	,	vvritten	Earned	Business	Salvage)	incurred	Unpaid	Premiums	in Col. 2)	
3. Artonia AZ   XES		* * *										
4. Arkansas AR NO CA ADA CANAD												
5. California CA NO CO YES CONTROLOGY CONTROLOGY CO YES CONTROLOGY CO YES CONTROLOGY CO YES CONTROLOGY CONTROLOGY CO YES CONTROLOGY CO YES CONTROLOGY CO YES CONTROLOGY CONTROLOGY CO YES CONTROLOGY CONTROLOGY CONTROLOGY CO YES CONTROLOGY CONTROLOGY CO YES CONTROLOGY CON						* * * * * * * * * * * * * * * * * * * *			* * * * * * * * * * * * * * * * * * * *			
7. Comeracidad CT VSS						* * * * * * * * * * * * * * * * * * * *			******			
8. Delawore DE NO 9   9   10   10   10   11   11   12   12   12	6. Colorado	CO	YES									
9. Dist. Collambia DC NO NO 10 Finds												
10. Florded												
11. Georgia   GA   VFS												
12. Harwaii	11 Georgia											
13. Ideho		A A A				* * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * *	*****			
15. Indiana	13. Idaho	A A A				* * * * * * * * * * * * * * * * * * * *			******			
16. lova	14. Illinois	İL	YES	2,919,292	2,679,874		1,124,267	1,726,236	1,541,575	16,001		
17. Kansas   K.S   NO	15. Indiana	A A A										
18. Kenthucky   K Y   YES   1.516   10.938   35.045   (97.309)   101,585   25				3,030,325	2,590,958		1,268,727	1,510,366	1,569,287	16,610		
19. Louissians					40.000			(07 200)	404 505			
20 Maine		A A A		4,516	10,938		35,045	(97,309)	101,585	25		
21. Maryland   MO   YES   (293) (293)						* * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *				
22. Missaschusetts							(293)	(293)				
23 Michigan	22. Massachusetts		NO									
25. Mississipp MS NO 28. Missour MO V YES No No No No No No No No No No No No No	23. Michigan											
26. Missouri MO YES ZT. Montana MT NO 28. Nebraska NE YES 29. Nevada NV YES 30. New Hampshire NI YES 31. New Jersey N. NO 32. New Mexico NM YES 33. New York NY YES 34. No. Carolina NC NO 36. Onlo OH YES 38. Tolkalona NC NO 38. Oregon OR YES 39. Pennsylvania PA NO 40. Rhode Island RI NO 41. So. Carolina SC NO 42. So. Dakota SD NO 43. Tolkalona SC NO 44. So. Carolina SC NO 44. So. Carolina SC NO 44. So. Carolina SC NO 45. Oregon OR YES 34. No. Carolina PA NO 40. Rhode Island RI NO 41. No. Carolina SC NO 42. So. Dakota SD NO 43. Tennessee TN YES 74. No 45. Ush 17. No 46. Vermont 17. YES 74. No 46. Vermont 17. YES 74. Vergina WA 18. WeS 18. W	24. Minnesota											
27. Monthana												
28. Nebrostas   NE   YES   Y												
29, Nevada												
30. New Hampshire						* * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * *	*****			
31. New Jersey		A A A					* * * * * * * * * * * * * * * * * * * *					
33. New York NY YES 4N. Carolina NC NO 35. No. Dakota ND NO 35. No. Dakota ND NO 36. Orio OH YES 38.351,788 8.247,014 4.918,818 4.631,767 5.122,155 45,777 37. Okahoma OK NO 38. Origon OR YES 39. Pennsylvaria PA NO 40. Rhode Island RI NO 41. So. Carolina SC NO 42. So. Dakota SD NO 42. So. Dakota SD NO 43. Tennesses TN YES 74.406,856 6.890,623 2.919,088 3.839,485 2.846,033 40,598 41. Texas TX NO 43. Tennesses TN NO 44. Texas TX NO 45. Ush TY TY TY TY TY TY TY TY TY TY TY TY TY	31. New Jersey	NJ										
34. No. Carolina NC NO 35. No. Dakota ND NO NO 36. Ohio OH YES 8.351.788 8.247.014 4.918.818 4.631.767 5.122.155 45.777 37. Oklahoma OK NO 8.0 NO 8.351.788 8.247.014 4.918.818 4.631.767 5.122.155 45.777 37. Oklahoma OK NO 8.36. Ohio OH YES 8.351.788 8.247.014 4.918.818 4.631.767 5.122.155 45.777 37. Oklahoma OK NO 8.37. Oklahoma	32. New Mexico								* * * * * * * * * * * * * * * * * * * *			
35. No. Dakota ND NO Section Of YeS 8.351.786 8.247.014 4.918.818 4.631.767 5.122.155 45.777 37. Oklahoma Ok NO 38. Okegan Ok YeS 39. Pennsylvania PA NO 40. Rhoel Island R I NO 41 So. Carbina SC NO 42 So. Dakota SD NO 42. So. Dakota SD NO 43. Tennessee TN YES 7.406.866 6.890.623 2.919.088 3.839.485 2.846.033 40.598 44. Texas TX NO 44. Texas TX NO 46. Vermont YT YES 47. Virginia VA YES 20 570 110.655 (53,540) 90.632 48. Washington WA YES 49. West Virginia WA NO 50. Wisconsin WI YES 3.279.666 3.218.165 2.296.201 1.662.436 2.295.501 17.976 51. Wyoming WY NO 52. American Samoa AS NO 35. Guard On NO 57. Aggregate other alien OT XXX (a) 25. So. So. So. So. So. So. So. So. So. So												
36. Ohio		A A A										
37. Oklahome OK NO S OK NO S OK YES S OK PYES S OK PATENTIAL PATEN	35. No. Dakota			0 251 700	0.047.044		4 040 040	4 624 767	E 100 1EE			
38. Oregon OR YES 39. Pennsylvania PA NO 40. Rhode Island RI NO 41. So. Dakota SD NO 42. So. Dakota SD NO 43. Tennessee TN YES 7,406,856 6,890,623 2,919,088 3,839,485 2,846,033 40,598 44. Texas TX NO 44. Texas TX NO 45. Utah UT NO 46. Vermont VT YES 47. Virginia VA YES 20 570 110,655 (53,540) 90,632 48. Washington WA YES 90. West Virginia WY NO 50. Wisconsin WI YES 3,279,666 3,218,165 2,296,201 1,662,436 2,295,501 17,976 51. Wyoming WY NO 52. American Samoa AS NO 53. Guam GU NO 54. Puerto Rico PR NO 55. U.S. Virgin Islands VI NO 57. Aggregate other allein OT 58. Totals (a) 25 38,953,180 37,573,219 18,989,170 19,970,287 20,634,781 213,508  DETAILS OF WRITE-INS 5701. XXX 5702. XXX 5709. Summary of remaining write-ins for Line 57 from overflow page Typo. Totals (Lines 5701 through 5703 + 5798)		A A A		0,351,788	8,247,014		4,918,818	4,031,707	5,122,155	45,777		
39, Pennsylvania   PA   NO   All Rhode Island RI   NO   All Rhode Island RI   NO   All So. Carolina   SC   NO   NO   All So. Carolina   SC   NO   NO   All So. Dakotia   SD   NO   NO   All So. Dakotia   SD   NO   All So. Dakotia   All So		A A A										
40. Rhode Island RI NO 41 So. Carolina SC NO 42 So. Dakota SD NO 42 So. Dakota SD NO 43. Tennessee TN YES 7,406,856 6,890,623 2,919,088 3,839,485 2,846,033 40,598 44. Texas TX NO 44. Texas TX NO 44. Texas TX NO 45. Utah UT NO 46. Vermont VT YES 47. Virginia VA YES 20 570 110,655 (53,540) 90,632 48. Washington WA Wes Virginia WN NO 50. Wisconsin WI YES 3,279,666 3,218,165 2,296,201 1,662,436 2,295,501 17,976 51. Wyoming WY NO 52. American Samoa AS NO 33. Guam GU NO 54. Puerto Rico PR NO 55. U.S. Virgin Islands VI NO 55. Canada CN NO 57. Aggregate other alien OT AS TO ST. St. St. St. St. St. St. St. St. St. St						* * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * *	*****			
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49. West Virginia WV NO 50. Wisconsin WI YES 3,279,666 3,218,165 2,296,201 1,662,436 2,295,501 17,976 51. Wyoming WY NO 52. American Samoa AS NO 53. Guam GU NO 54. Puerto Rico PR NO 55. U.S. Virgin Islands VI NO 56. Canada CN NO 57. Aggregate other alien OT XXX 58. Totals (a) 25 38,953,180 37,573,219 18,989,170 19,970,287 20,634,781 213,508  DETAILS OF WRITE-INS 5701. XXX 5702. XXX 5703. XXX 5708. Summary of remaining write-ins for Line 57 from overflow page of the row overflow page of the street of t	48. Washington						[	(99,979)	50,502			
50. Wisconsin WI YES 3,279,666 3,218,165 2,296,201 1,662,436 2,295,501 17,976 1	49. West Virginia		NO									
52. American Samoa AS	50. Wisconsin	WI		3,279,666	3,218,165	*****	2,296,201	1,662,436	2,295,501	17,976		
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54. Puerto Rico PR												
55. U.S. Virgin Islands VI NO								* * * * * * * * * * * * * * * * * * * *				
56. Canada CN NO 57. Aggregate other alien OT XXX												
57. Aggregate other alien OT XXX  58. Totals (a) 25 38,953,180 37,573,219 18,989,170 19,970,287 20,634,781 213,508  DETAILS OF WRITE-INS  5701. XXX 5702. XXX 5703. XXX 5798. Summary of remaining write-ins for Line 57 from overflow page xXXX 5799. Totals (Lines 5701 through 5703 + 5798)	56. Canada	A A A										
alien OT XXX  58. Totals (a) 25 38,953,180 37,573,219 18,989,170 19,970,287 20,634,781 213,508  DETAILS OF WRITE-INS  5701. XXX 5702. XXX 5703. XXX 5798. Summary of remaining write-ins for Line 57 from overflow page XXX 5799. Totals (Lines 5701 through 5703 + 5798)	57. Aggregate other							* * * * * * * * * * * * * * * * * * * *				
DETAILS OF WRITE-INS         XXX           5701.         XXX           5702.         XXX           5703.         XXX           5798. Summary of remaining write-ins for Line 57 from overflow page XXX         XXX           5799. Totals (Lines 5701 through 5703 + 5798)         Totals (Lines 5701 through 5703 + 5798)		OT	XXX									
DETAILS OF WRITE-INS         XXX           5701.         XXX           5702.         XXX           5703.         XXX           5798. Summary of remaining write-ins for Line 57 from overflow page XXX         XXX           5799. Totals (Lines 5701 through 5703 + 5798)         Totals (Lines 5701 through 5703 + 5798)	58. Totals		(a) 25	38.953.180	37.573.219		18,989.170	19,970.287	20,634.781	213.508		
5701.				,,	- ,,		1		.,,	.,		
5702.	DETAILS OF WRITE-	INS										
5702.	5701		<sub>x x x</sub>									
5703.												
5798. Summary of remaining write-ins for Line 57 from overflow page XXX 5799. Totals (Lines 5701 through 5703 + 5798)												
write-ins for Line 57 from overflow page 5799. Totals (Lines 5701 through 5703 + 5798)			[ <u>X X X</u>				[					
from overflow page		_										
5799. Totals (Lines 5701 through 5703 + 5798)												
through 5703 + 5798)			XXX									
	5799. Totals (Lines 5701											
(Line 57 above)   X X X	through 5703 + 57	798)										
· · · · · · · · · · · · · · · · · · ·	(Line 57 above)		XXX									

#### Explanation of basis of allocation of premiums by states, etc.

\*Location of coverage - Fire, Allied Lines, Homeowners Multi Peril, Commercial Multi Peril, Earthquake, Boiler and Machinery

\*States of Jurisdiction under which payrolls and resulting premiums are developed - Worker's Compensation \*Location of Court - Surety

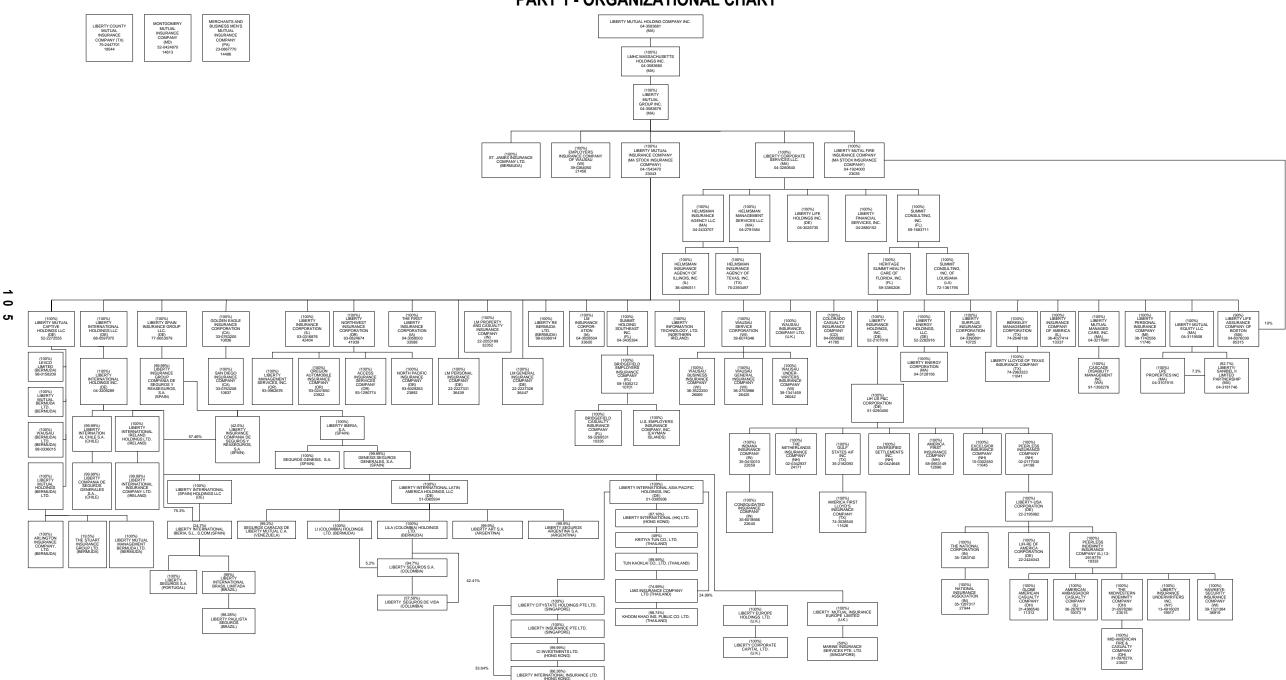
\*Location of Principal place of garaging of each individual car - Auto Liability, Auto Physical Damage \*Address of Assured - Other Accident and Health

\*Principal Location of business or location of coverage - Liability other than Auto, Fidelity

\*Location of Properties covered - Burglary and Theft \*Principal Location of Assured - Ocean Marine, Credit \*Point of origin of shipment or principal location of assured - Inland Marine \*Primary residence of Assured - Aircraft (all perils) \*State in which employees regularly work - Group Accident and Health

<sup>(</sup>a) Insert the number of yes responses except for Canada and Other Alien.

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



# **OVERFLOW PAGE FOR WRITE-INS**