ANNUAL STATEMENT OF THE **The National Corporation** as Attorney in Fact for the Subscribers at **National Insurance Association** Indianapolis of_____ Indiana in the state of _____ TO THE **Insurance Department OF THE**

STATE OF

FOR THE YEAR ENDED December 31, 2004



ANNUAL STATEMENT

27944200420100100

For the Year Ended December 31, 2004

OF THE CONDITION AND AFFAIRS OF THE

| National Insurance Association | | | | | | |
|--|---|--|---|---|--|--|
| NAIC Group Code 0111 | 0111 NAIC Company | Code 27944 | Employer's ID | Number 35-1287317 | | |
| (Current Period) Organized under the Laws of | (Prior Period) Indiana | , State of Domicile | or Port of Entry | Indiana | | |
| Country of Domicile United St | ates of America | | | | | |
| Incorporated: November 15, 1972 | Com | menced Business: | March 2, 1973 | | | |
| Statutory Home Office: 350 Ea | st 96th Street Indianapolis, IN | 46240 | | | | |
| Main Administrative Office: 35 | D East 96th Street Indianapolis | s, IN 46240 3 ⁻ | 17-816-3400 | | | |
| Mail Address: 175 Berkeley Street | Boston, MA 02117 | | | | | |
| Primary Location of Books and R | ecords: 175 Berkeley Street | Boston, MA 02117 | 617-357-9500 | | | |
| Internet Website Address:www | .goamericaauto-ins.com | | | | | |
| Statutory Statement Contact: Ste | even W. Latham | | 6 | 17-357-9500 43660 | | |
| • | even.Latham@LibertyMutual.com | | | 17-574-5955 | | |
| Policyowner Relations Contact:_ | Mail Address) | napolis, IN 46240 | (317-816-3400 | Fax Number) | | |
| Tonoyowner Relations Contact. | | • | 317-010-3400 | | | |
| | OFFIC Chairman o | | | | | |
| , | Roger Lu | cien Jean | ïtle | | | |
| 1. Kevin John | Name Kirschner | President & Chief I | | | | |
| | icker Jenkins | Secretary | | | | |
| 3. Stephen Do | ouglas Powell | Treasurer | | | | |
| | Vice-Pre | esidents | | | | |
| Name | Title | Name | • | Title | | |
| Mark Edward Fiebrink | Executive Vice President | Anthony Alexander For | | Executive Vice President | | |
| Michael Ray Christiansen | Executive Vice President | Bob David Effinger, Jr. | | Executive Vice President | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| John Derek Doyle | DIRECTORS C Mark Edward Fiebrink | DR TRUSTEES Roger Lucien Jean | | Amv Johnston Leddy | | |
| William George Mersch | James Francis Dore | Michael Ray Christians | | Bob David Effinger, Jr. | | |
| Kevin John Kirschner | Kenneth Paul Blackwood | | | | | |
| | | | | | | |
| - | | | | | | |
| | | | | | | |
| | | _ | | | | |
| State of Massachusetts | | - | | | | |
| County of Suffolk ss | and the second of the second | or the day of the day of the | 24 | that are the conservation as Sadardadad | | |
| The officers of this reporting entity being duly above, all of the herein described assets were | e the absolute property of the said reporti | ing entity, free and clear from | any liens or claims the | reon, except as herein stated, and | | |
| that this statement, together with related exhiliabilities and of the condition and affairs of the | e said reporting entity as of the reporting | period stated above, and of it | ts income and deduction | ns therefrom for the period ended, | | |
| and have been completed in accordance with law may differ; or, (2) that state rules or regula | ations require differences in reporting not | related to accounting practic | es and procedures, ac | cording to the best of their | | |
| information, knowledge and belief, respective with the NAIC, when required, that is an exact | t copy (except for formatting differences | ion by the described officers due to electronic filing) of the | also includes the relate enclosed statement. T | ed corresponding electronic filing he electronic filing may be | | |
| requested by various regulators in lieu of or ir | addition to the enclosed statement. | | | | | |
| - | | | | | | |
| (Signature) Kevin John Kirschner | • | ignature) Tucker Jenkins | | (Signature) Stephen Douglas Powell | | |
| (Printed Name) | | nted Name) | | (Printed Name) | | |
| President & Chief Executive Officer | | Secretary | | Treasurer | | |
| (Title) | (| (Title) | lo this are substituted for the | (Title) | | |
| Subscribed and sworn to before me this day of February | . 2005 | | Is this an original filing' If no: 1. State the | YES [X] NO [] amendment number | | |
| 00) 0 | | 5. 1 | 2. Date filed | | | |
| | | | 3. Number | of pages attached | | |

ASSETS

| | | Current Year | | Prior Year |
|--|------------|------------------|-----------------------------|-------------------|
| | 1 | 2 Nonadmitted | 3 Net Admitted Assets | 4 Net Admitted |
| | Assets | Assets | (Cols. 1 - 2) | Assets |
| Bonds (Schedule D) | 19,975,622 | | 19,975,622 | 18,281,117 |
| 2. Stocks (Schedule D): | | | | |
| 2.1 Preferred stocks | | | | |
| 2.2 Common stocks | | | | |
| Mortgage loans on real estate (Schedule B): | | | | |
| 3.1 First liens | | | | |
| 3.2 Other than first liens | | | | |
| 4. Real estate (Schedule A): | | | | |
| A.A. Danastica according to the common (loss the common of | | | | |
| 4.2 Properties held for the production of income (less \$ 0 encumbrances) | | | | |
| 4.3 Properties held for sale (less \$ 0 encumbrances) | | | | |
| 5. Cash (\$ 74,759, Schedule E-Part 1), cash equivalents (\$ 0, | | | | |
| Schedule E-Part 2) and short-term investments (\$ 924,233 , Schedule DA) | 998,992 | | 998,992 | 884,206 |
| Contract loans (including \$ 0 premium notes) | | | | |
| 7. Other invested assets (Schedule BA) | | | | |
| 8. Receivable for securities | 598 | | 598 | 25,000 |
| Aggregate write-ins for invested assets | 1 | | | |
| 10. Subtotals, cash and invested assets (Lines 1 to 9) | 20,975,212 | | 20,975,212 | 19,190,323 |
| 11. Investment income due and accrued | 240 654 | | 319,654 | 271,445 |
| 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 | 426,979 | | 426,979 | 640,484 |
| 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 | 27,155 | | 27,155 | 7,000 |
| 15.2 Net deferred tax asset | 1,656,000 | 1,355,100 | 300,900 | |
| 16. Guaranty funds receivable or on deposit | | | | (3,496) |
| 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 | | | | |
| 21. Health care (\$ 0) and other amounts receivable | | | | |
| 22. Other assets nonadmitted | | | | |
| 23. Aggregate write-ins for other than invested assets | | | | 221 |
| 24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell | 20 10- 25- | 4.0== 465 | 00.010.000 | 00 /00 0== |
| Accounts (Lines 10 to 23) | 23,405,000 | 1,355,100 | 22,049,900 | 20,406,877 |
| 25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | 4.055.400 | 00.040.000 | 00.400.077 |
| 26. Total (Lines 24 and 25) | 23,405,000 | 1,355,100 | 22,049,900 | 20,406,877 |
| DETAILS OF WRITE-INS | | | | |
| SETTING OF THE MICE | | | | |
| 0901. | | | | |

| 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 | | | 221 |
| 2302. | l | l | l |
| 2303. | | | |
| 2398. Summary of remaining write-ins for Line 23 from overflow page | | | |
| 2399. Totals (Lines 2301 through 2303 + 2398) (Line 23 above) | | | 221 |

| | LIABILITIES, SURPLUS AND OTHER FUNDS | 1 Current Year | 2 Prior Year |
|----------|--|-------------------|-----------------------|
| | L (D. 104 L | | |
| 1. 2. | 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 expenses (Part 2A Line 34 Column 0) | | |
| 4. | Commissions payable, contingent commissions and other similar charges | | |
| 5. | Other expenses (excluding taxes, licenses and fees) | | |
| 6. | Taxes, licenses and fees (excluding federal and foreign income taxes) | | |
| 7.1 | Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses)) | | |
| 7.2 | | | |
| 8. | Borrowed money \$ 0 and interest thereon \$ 0 | (2,811) | |
| 9. | Unearned premiums (Part 1A, Line 37, Column 5) (after deducting unearned premiums for ceded reinsurance of | | |
| | \$ 1,292,293 and including warranty reserves of \$ 0) | | |
| | Advance premium | | |
| 11. | Dividends declared and unpaid: | | |
| | 11.1 Stockholders 11.2 Policyholders | | |
| 12 | Oddadainana anning a | 204 207 | 382,424 |
| 13. | | | 302,424 |
| | | | |
| 15. | * | | |
| 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 | 12,170,047 | 11,160,811 |
| 20. | Payable for securities | | |
| 21. | Liability for amounts held under uninsured accident and health plans | | |
| | Capital notes \$ 0 and interest thereon \$ 0 | | |
| 23. | Aggregate write-ins for liabilities Total liabilities excluding protected cell liabilities (Lines 1 through 23) | 210,330 | 346,214 11,889,449 |
| 25. | Protected cell liabilities | 1 1 | 11,009,448 |
| 26. | Total liabilities (Lines 24 and 25) | 12,718,941 | 11,889,449 |
| 27. | | | ,000,0 |
| 28. | Common capital stock | | |
| 29. | | | |
| 30. | Aggregate write-ins for other than special surplus funds | | |
| 31. | Surplus notes | 10,000,000 | 10,000,000 |
| 32. | Gross paid in and contributed surplus | | |
| | Unassigned funds (surplus) | (669,041) | (1,482,572) |
| 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 | 34.2 0 shares preferred (value included in Line 29 \$ 0) Surplus as regards policyholders (Lines 27 to 33, less 34) (Page 4, Line 38) | 9,330,959 | 8,517,428 |
| | TOTALS (Page 2, Line 26, Col. 3) | 22,049,900 | 20,406,877 |
| | , , , , , , , , , , , , , , , , , , , | | ==,::=;::: |
| | DETAILS OF WRITE-INS | | |
| 2301 | Other liabilities | 270,338 | 346,214 |
| 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) | 270,338 | 346,214 |
| 2701 | | | |
| 2702 | | | |
| 2703 | | | |
| | 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 | | [| |
| | Summary of remaining write-ins for Line 30 from overflow page | | |
| JU99 | Totals (Lines 3001 through 3003 plus 3098) (Line 30 above) | | |

| | UNDERWRITING AND INVESTMENT EXHIBIT | 1 | 2 |
|----------------|--|--------------|------------|
| | STATEMENT OF INCOME | Current Year | Prior Year |
| | UNDERWRITING INCOME | Ourient real | 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 underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) | | |
| | INVESTMENT INCOME | | |
| 9 | Net investment income earned (Exhibit of Net Investment Income, Line 17) | 760,185 | 760,646 |
| 10. | Net realized capital gains (losses) (Exhibit of Capital Gains (Losses)) | | 12,989 |
| 11. | Net investment gain (loss) (Lines 9 + 10) | 760,185 | 773,635 |
| | OTHER INCOME | | |
| 12. | Net gain (loss) from agents' or premium balances charged off | | |
| 40 | (amount recovered \$ 0 amount charged off \$ 0) | | |
| 13. 14 | Finance and service charges not included in premiums Aggregate write-ins for miscellaneous income | | |
| 15. | Total other income (Lines 12 through 14) | | |
| | Net income before dividends to policyholders and before federal and foreign income taxes (Lines 8 + 11 + 15) | 760,185 | 773,635 |
| | Dividends to policyholders Net income, after dividends to policyholders but before federal and foreign income taxes (Line 16 minus Line 17) | 760.185 | 773,635 |
| | Federal and foreign income taxes incurred | (53,346) | 176,808 |
| 20. | Net income (Line 18 minus Line 19) (to Line 22) | 813,531 | 596,827 |
| | CAPITAL AND SURPLUS ACCOUNT | | |
| 21 | Surplus as regards policyholders, December 31 prior year (Page 4, Line 38, Column 2) | 8,517,428 | 8,069,521 |
| | GAINS AND (LOSSES) IN SURPLUS | 0,011,120 | 0,000,021 |
| | OAMO AND (LOUGES) IN CONT. EUC | | |
| | Net income (from Line 20) | 813,531 | 596,827 |
| 23. | Change in net unrealized capital gains or (losses) | | |
| 24. 25. | Change in net unrealized foreign exchange capital gain (loss) Change in net deferred income tax | (365 247) | (149,803 |
| 26. | Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3) | 365,247 | 883 |
| 27. | Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) | | |
| | Change in surplus notes | | |
| 29. 30. | Surplus (contributed to) withdrawn from protected cells Cumulative effect of changes in accounting principles | | |
| | 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 Transferred from capital | | |
| 33. | Net remittances from or (to) Home Office | | |
| 34. | Dividends to stockholders | | |
| | Change in treasury stock (Page 3, Lines 34.1 and 34.2, Column 2 minus Column 1) | | |
| 36. 37. | Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders for the year (Lines 22 through 36) | 813,531 | 447,907 |
| | Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 37) (Page 3, Line 35) | 9,330,959 | 8,517,428 |
| | | | |
| | DETAILS OF WRITE-INS | | |
| 0501. | | | |
| 0502. | | | |
| 0503. 0598 | Summary of remaining write-ins for Line 5 from overflow page | | |
| | Totals (Lines 0501 through 0503 plus Line 0598) (Line 5 above) | | |
| 1401. | | | |
| 1402. | | | |
| 1403. | 0 1 1 1 1 1 | | ***** |
| | Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 through 1403 plus Line 1498) (Line 14 above) | | |
| | Totals (Lines 1401 through 1403 plus Line 1498) (Line 14 above) | | |
| 3601. | | | |
| 3602. 3603. | | | |
| 3698. | Summary of remaining write-ins for Line 36 from overflow page | | |
| 3699. | 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 | (101,057) | 382.424 |
| Net investment income | 770,249 | 819,279 |
| Miscellaneous income | | (361) |
| 4. Total (Lines 1 through 3) | 669,192 | 1,201,342 |
| Benefit and loss related payments | (213,505) | 559,119 |
| Net transfers to Separate, Segregated Accounts and Protected Cell Accounts | | |
| Commissions, expenses paid and aggregate write-ins for deductions | 3,496 | 81,365 |
| Dividends paid to policyholders | | 01,000 |
| 9. Federal and foreign income taxes paid (recovered) \$ 0 net of tax on capital gains (losses) | (33,191) | 24,729 |
| 10 Total (Lines E through 0) | (242 200) | 665,213 |
| 11 Not each from operations (Line 4 minus Line 10) | 012 302 | 536,129 |
| | 312,332 | 330,123 |
| Cash from Investments | | |
| 12. Proceeds from investments sold, matured or repaid: | | |
| 12.1 Bonds | 807,417 | 946,217 |
| 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 | 24,403 | |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 831,820 | 946,217 |
| 13. Cost of investments acquired (long-term only): | | |
| 13.1 Bonds | 2,560,195 | 4,869,414 |
| 13.2 Stocks | | |
| 13.3 Mortgage loans | | |
| 13.4 Real estate | | |
| 13.5 Other invested assets | | |
| 13.6 Miscellaneous applications | | 59,484 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 2,560,195 | 4,928,898 |
| 14. Net increase (decrease) in policy loans and premium notes | | |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) | (1,728,375) | (3,982,681) |
| 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 | (2,811) | (525) |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | (2,011) | (323) |
| 16.5 Dividends to stockholders | | |
| *************************************** | 022.500 | 4 252 004 |
| 16.6 Other cash provided (applied) | 933,580 | 4,353,991 |
| 17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) | 930,769 | 4,353,466 |
| RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS | | |
| 18. Net change in cash and short-term investments (Line 11, plus Lines 15 and 17) | 114,786 | 906,914 |
| 19. Cash and short-term investments: | | |
| 19.1 Beginning of year | 884,206 | (22,708) |
| 19.2 End of year (Line 18 plus Line 19.1) | 998,992 | 884,206 |
| 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 | Reinsurance Assumed | | Reinsurance Ceded | | 6 |
|-------|---|-----------------|---|--------------------|---------------------------------------|--------------------|----------------------------|
| | | Direct | 2 | 3 From | 4 | 5 To | Net Premiums Written |
| | Line of Business | Business (a) | From Affiliates | Non- Affiliates | To Affiliates | Non- Affiliates | Cols. 1 + 2 + 3 - 4 - 5 |
| 1. | Fire | | | | | | |
| 2. | Allied lines | | | | | | |
| 3. | Farmowners multiple peril | | | | | | |
| 4. | Homeowners multiple peril | | | | | | |
| 5. | Commercial multiple peril | | | | | | |
| 6. | Mortgage guaranty | | | | | | |
| 8. | Ocean marine | | | | | | |
| 9. | Inland marine | | * | | | | |
| | Financial guaranty | | | | | | |
| | Medical malpractice - occurrence | | | | | | |
| | Medical malpractice - claims-made | | | | | | |
| | Earthquake | | | | | | |
| | Group accident and health | | | | | | |
| | Credit accident and health (group and individual) | | | | | | |
| | Other accident and health | | | | | | |
| | Workers' compensation | | ***** | | | | |
| | Other liability - occurrence | | | | | | |
| | Other liability - claims-made | | | | | | |
| | Products liability - occurrence | | | | | | |
| | Products liability - claims-made | | ***** | | | | |
| | , 19.2 Private passenger auto liability | 3,866,367 | ***** | | 3,866,367 | | |
| | , 19.4 Commercial auto liability | | | | | | |
| | Auto physical damage | 1,366,945 | | | 1,366,945 | | |
| | Aircraft (all perils) | | ***** | | | | |
| | Fidelity | | ***** | | | | |
| | Surety | | | | | | |
| | Burglary and theft | | | | * * * * * * * * * * * * * * * * * * * | | |
| | Boiler and machinery | | | | | | |
| | Credit | | | | | | |
| | International | ********* | | | | | |
| | Reinsurance-Nonproportional Assumed Property | XXX | | | | | |
| | Reinsurance-Nonproportional Assumed Liability | XXX | | | | | |
| 32. | Reinsurance-Nonproportional Assumed Financial Lines | XXX | | | | | |
| | Aggregate write-ins for other lines of business | 5 000 040 | | | 5 000 040 | | |
| 34. | TOTALS | 5,233,312 | | | 5,233,312 | | |
| | | | | | | | |
| | DETAILS OF WRITE-INS | | | | | | |
| 3301. | | | | | | | |
| 3302. | | | | | | | |
| 3303. | | | | | | | |
| | Summary of remaining write-ins for Line 33 from overflow page | | | | | | |
| | Totals (Lines 3301 through 3303 plus 3398) (Line 33 above) | | | | | | |

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

Annual Statement for the year 2004 of the

UNDERWRITING AND INVESTMENT EXHIBIT PART 2 - LOSSES PAID AND INCURRED

| | | Losses Paid Less Salvage | | | 5 | 6 | 7 | 8 |
|---|-------------------------|---|-------------------------------|---|---|------------------------------------|---|--|
| Line of Business | 1 Direct Business | 2 Reinsurance Assumed | 3 Reinsurance Recovered | 4 Net Payments (Cols. 1 + 2 - 3) | Net Losses Unpaid Current Year (Part 2A, Col. 8) | Net Losses Unpaid Prior Year | Losses Incurred Current Year (Cols. 4 + 5 - 6) | Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1) |
| 1. Fire | | | | | | | | |
| 2. Allied lines | | | | | | | | |
| Farmowners multiple peril | | | | | | | | |
| Homeowners multiple peril | | | | | | | | |
| Commercial multiple peril | | * | | | | | | |
| 6. Mortgage guaranty | | | | | | | | |
| 8. Ocean marine | | | | | | | | |
| 9. Inland marine | | | I | | | | | |
| 10. Financial guaranty | | * | | | | | | |
| 11.1 Medical malpractice - occurrence | | * | | | | | | |
| 11.2 Medical malpractice - claims - made | | * | | | **** | | | |
| 12. Earthquake | | | | | | | | |
| 13. Group accident and health | | | | | | | | |
| 14. Credit accident and health (group and individual) | | | | | | | | |
| 15. Other accident and health | | | | | * | | | |
| 16. Workers' compensation | | | | | | | | |
| 17.1 Other liability - occurrence | | | | | | | | |
| 17.2 Other liability - claims - made | | | | | | | | |
| 18.1 Products liability - occurrence | | | | | | | | |
| 18.2 Products liability - claims - made | | | | | | | | |
| 19.1, 19.2 Private passenger auto liability | 3,958,549 | | 3,958,549 | | | | | |
| 19.3, 19.4 Commercial auto liability | | | | | | | | |
| 21. Auto physical damage | 630,157 | | 630,157 | | | | | |
| 22. Aircraft (all perils) | | | | | | | | |
| 23. Fidelity | | | | | | | | |
| 24. Surety | | | | | | | | |
| 26. Burglary and theft | | | | | | | | |
| 27. Boiler and machinery | | | | | | | | |
| 28. Credit | | | | | | | | |
| International Reinsurance-Nonproportional Assumed Property | | | | | | | | |
| | X X X | | | | | | | |
| Reinsurance-Nonproportional Assumed Liability Reinsurance-Nonproportional Assumed Financial Lines | XXX | | | | | | | |
| 22. Aggregate write ine for other lines of hydrogen | | | | | | | | |
| Aggregate write-ins for other lines of business TOTALS | 4,588,706 | | 4,588,706 | | | | | |
| OT. IVIALU | 1 4,300,700 | | 1 4,300,700 | l | | <u>I</u> | <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) | | | | | | | | |

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

| | | Report | ted Losses | | | Incurred But Not Reported | 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 | (0013. 1 + 2 - 3) | Dilect | Assumed | Ceded | (0013. 4 + 3 + 0 - 1) | <u> </u> |
| 1. Fire | | | | | | | | | |
| 2. Allied lines | | | | | | | | | |
| Farmowners multiple peril Homeowners multiple peril | | | | | | | | | |
| Commercial multiple peril | | | | | | | | | |
| Commercial multiple peril Mortgage guaranty | | | | | * | * | | | |
| 8. Ocean marine | | | | | * | | | | |
| 9. Inland marine | * | | * | | * | * | * | | * |
| 10. Financial guaranty | | | | ******** | | | | | * |
| 11.1 Medical malpractice - occurrence | | | | *********** | | | * | | |
| 11.2 Medical malpractice - claims - made | * | | * | | * | * | * | | |
| 12. Earthquake | | | * | | | | * | | |
| 13. Group accident and health | | | | | | | | (a) | |
| 14. Credit accident and health (group and individual) | | | | | | | | | |
| 15. Other accident and health | | | | | | | | (a) | |
| 16. Workers' compensation | | | | | | | | | |
| 17.1 Other liability - occurrence | | | | | | | | | |
| 17.2 Other liability - claims - made | | | | | | | | | |
| 18.1 Products liability - occurrence | | | * | **** | | | | | |
| 18.2 Products liability - claims - made | | | | | | | | | |
| 19.1, 19.2 Private passenger auto liability | 3,543,660 | | 3,543,660 | | 1,960,097 | | 1,960,097 | | |
| 19.3, 19.4 Commercial auto liability | | | | | | | | | |
| 21. Auto physical damage | 81,079 | | 81,079 | | 109,651 | * | 109,651 | | |
| 22. Aircraft (all perils) 23. Fidelity | | | | | | | | | |
| 23. Fidelity 24. Surety | | | | | * | | | | |
| 26. Burglary and theft | | | | | | | | | |
| 27. Boiler and machinery | | | | | * | | | | |
| 28. Credit | * | | * | **** | | | * | | |
| 29. International | * | | | | * | | * | | |
| 30. Reinsurance-Nonproportional Assumed Property | XXX | | * | | XXX | * | * | | |
| 31. Reinsurance-Nonproportional Assumed Liability | XXX | | * | | XXX | | * | | |
| 32. Reinsurance-Nonproportional Assumed Financial Lines | XXX | | | | XXX | | | | |
| 33. Aggregate write-ins for other lines of business | | | | | | | | | |
| 34. TOTALS | 3,624,739 | | 3,624,739 | | 2,069,748 | | 2,069,748 | | |
| | | | | | | | | | |
| 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 0000. Totals (Lilies 300 Filliough 3000 + 3000) (Lilie 30 above) | | | | | | 1 | | | 1 |

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

UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

| | | | • | ^ | _ , |
|----------|--|-----------------|---|---|---|
| | | 1 | 2 | 3 | 4 |
| | | Loss Adjustment | Other Underwriting | Investment | |
| | | Expenses | Expenses | Expenses | Total |
| 1 | Claim adjustment services: | | | | |
| " | 1.1 Direct | (126,020) | | | (126,020) |
| | *************************************** | | | | , |
| | 1.2 Reinsurance assumed | | | | |
| | 1.3 Reinsurance ceded | | | | (126,020) |
| | 1.4 Net claim adjustment service (1.1 + 1.2 - 1.3) | | | | |
| 2. | Commission and brokerage: | | | | |
| | 2.1 Direct excluding contingent | | | | |
| | 2.2 Reinsurance assumed excluding contingent | | | | |
| | 2.3 Reinsurance ceded excluding contingent | | | | |
| | 2.4 Contingent-direct | | | | |
| | 2.5 Contingent-reinsurance assumed | | | | |
| | 2.6 Contingent-reinsurance ceded | | | | 50.040 |
| | | | 55,540 | | 55,540 |
| | 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 | | | | |
| 4. | Advertising | | | | |
| 5. | Boards, bureaus and associations | | | | |
| 6. | Surveys and underwriting reports | | | | |
| 7. | Audit of assureds' records | | | | |
| | Salary and related items: | | | | |
| | 8.1 Salaries | | | 1 298 | 1,298 |
| | 8.2 Payroll taxes | | | | |
| ١, | | | | 245 | |
| 1 | Employee relations and welfare | | | | |
| | Insurance | | | | |
| | Directors' fees | | | | |
| | Travel and travel items | | | | |
| 13. | Rent and rent items | | | | |
| 14. | Equipment | | | 53 | 53 |
| 15. | Cost or depreciation of EDP equipment and software | | | | |
| | Printing and stationery | | | | 21 |
| 1 | Postage, telephone and telegraph, exchange and express | | | | |
| 1 | Legal and auditing | | | 4,914 | |
| 1 | Totals (Lines 3 to 18) | | | 7,212 | |
| 1 | Taxes, licenses and fees: | | | | |
| 20. | | | | | |
| | 20.1 State and local insurance taxes deducting guaranty association | | | | |
| | credits of \$ 0 | | | | |
| | 20.2 Insurance department licenses and fees | | | | |
| | 20.3 Gross guaranty association assessments | | | | |
| | 20.4 All other (excluding federal and foreign income and real estate) | | | | |
| | 20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) | | * | | |
| 21. | | | | | |
| 22. | Real estate taxes | | | | |
| 23. | Reimbursements by uninsured accident and health plans | | | | |
| 24. | Aggregate write-ins for miscellaneous expenses | | | | |
| 25. | | | | 7 010 | (a) 7.010 |
| | Total expenses incurred | | | | |
| 26. | Less unpaid expenses-current year | | | | |
| 27. | Add unpaid expenses-prior year | | | | |
| 28. | Amounts receivable relating to uninsured accident and health | | | | |
| | plans, prior year | | | | |
| 29. | Amounts receivable relating to uninsured accident and health | | | | |
| | plans, current year | | | | |
| 30. | TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29) | | | 7,212 | 7,212 |
| <u> </u> | | | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <u>,_,_</u> |
| | DETAILS OF WRITE-INS | | | | |
| | | | | | |
| 2402. | | | | | |
| | | | | | |
| | Summary of remaining write-ins for Line 24 from overflow page | | | | |
| 1 | Totals (Lines 2401 through 2403 plus 2498) (Line 24 above) | | | | |
| | | | | | |

(a) Includes management fees of \$ $\frac{7,212}{2}$ 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) 714,805 | 768,582 |
| 1.1 | Bonds exempt from U.S. tax | (a) | |
| 1.2 | Other bonds (unaffiliated) | (a) 17,613 | 8,654 |
| | Bonds of affiliates | (a) | |
| 2.1 | Preferred stocks (unaffiliated) | (b) | |
| 2.11 | Preferred stocks of affiliates | (b) | |
| 2.2 | Common stocks (unaffiliated) | | |
| 2.21 | Common stocks of affiliates | I | I |
| 3. | Mortgage loans | (c) | |
| 4. | Real estate | (d) | I |
| 5. | Contract loans | | |
| 6. | Cash, cash equivalents and short-term investments | (e) 14,598 | 17,990 |
| 7. | Derivative instruments | (f) | I |
| 8. | Other invested assets | | |
| 9. | Aggregate write-ins for investment income | (27,829) | (27,829) |
| 10. | Total gross investment income | 719,187 | 767,397 |
| 11. | Investment expenses | | (g) 7,212 |
| 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 | | (4, |
| 16. | Total deductions (Lines 11 through 15) | | 7,212 |
| 17. | Net investment income (Line 10 minus Line 16) | | 760.185 |
| | DETAILS OF WRITE-INS | | |
| 0901. 0902. | Miscellaneous Income/(Expense) | (27,829) | (27,829) |
| 0903. | | | |
| | Summary of remaining write-ins for Line 9 from overflow page | | |
| | Totals (Lines 0901 through 0903) plus 0998 (Line 9, above) | (27,829) | (27,829) |
| 1501. 1502. 1503. | Summary of remaining write-ins for Line 15 from overflow page | 1 (2.1929) | (2.102) |
| (b) In (c) In (d) In (e) In (f) In (g) In to | cludes \$ 0 accrual of discount less \$ 0 amortization of premium and less cludes \$ 0 accrual of discount less \$ 0 amortization of premium. | s \$ 0 paid for accrued s \$ 0 paid for accrued 0 interest on encumbrances. s \$ 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) | | | | |
| | Preferred stocks of affiliates | | | | |
| 2.2 | Common stocks (unaffiliated) | NO | N — | | |
| 2.21 | Common stocks of affiliates | | | | |
| 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. 0998. | Summary of remaining write-ins for Line 9 from overflow page | | | ************ | |

0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9, above)

EXHIBIT OF NONADMITTED ASSETS

| | | 1 | 2 | 3 |
|------|---|--|--|--|
| | | Current Year Total Nonadmitted Assets | Prior Year Total Nonadmitted Assets | Change in Total Nonadmitted Assets (Col. 2 - Col. 1) |
| 1. | Bonds (Schedule D) | | | |
| 2. | Stocks (Schedule D): | | | |
| ۷. | 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) | | | |
| ŝ. | Contract loans | | | |
| 7. | Other invested assets (Schedule BA) | | | * |
| 8. | Receivable for securities | | | |
| 9. | Aggregate write-ins for invested assets | | | |
| 0. | Subtotals, cash and invested assets (Lines 1 to 9) | | | |
| 1. | Investment income due and accrued | | | |
| 2. | 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 | | | ***************** |
| | 12.3 Accrued retrospective premiums | | | |
| 3. | Reinsurance: | | | |
| • | 12.1 Amounto recoverable from reincurers | | | |
| | 13.2 Funds held by or deposited with reinsured companies | | | * |
| | 13.3 Other amounts receivable under reinsurance contracts | | | * |
| 4. | Amounta receivable relating to unincured plans | | | |
| 5.1 | Current federal and foreign income tax recoverable and interest thereon | | | |
| 5.2 | Net deferred tax asset | 1,355,100 | 1,720,347 | 365,2 |
| 6. | Guaranty funds receivable or on deposit | | | |
| 7. | Electronic data processing equipment and software | | | |
| 8. | Furniture and agricument including health age delivery assets | | | |
| 9. | Net adjustment in assets and liabilities due to foreign exchange rates | | | * |
| 0. | Receivable from parent, subsidiaries and affiliates | | | |
| 1. | Health care and other amounts receivable | | | |
| 2. | Other assets nonadmitted | | | * |
| 3. | Aggregate write-ins for other than invested assets | | | |
| 4. | Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell | ***** | | |
| | Accounts (Lines 10 to 23) | 1,355,100 | 1,720,347 | 365,2 |
| 5. | From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | |
| 6. | Total (Lines 24 and 25) | 1,355,100 | 1,720,347 | 365,2 |
| | DETAIL OF WIDITE IN | | | |
| | DETAILS OF WRITE-INS | | | |
| 901. | | | | **** |
| 902. | | | | |
| | | | | |
| 903. | | | | |

| 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. | | |
| 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) | | |
| 2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above) | | |

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 Indiana, the accompanying financial statements of National Insurance Association (the "Association") 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 Association 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 Association does not own common stocks.
- 4. The Association does not own preferred stocks.
- 5. The Association does not own mortgage loans.
- 6. The Association does not own Mortgage-backed/asset backed securities.
- 7. The Association has no investments in subsidiaries.
- 8. The Association has no investments in joint ventures, partnerships or limited liability companies.
- 9. The Association has no derivative instruments.
- The Association 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 Association 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 Association prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Indiana. Effective January 1, 2001, the Indiana Department of Insurance required that insurance companies domiciled in Indiana 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 Indiana Insurance Commissioner.

Note 3- Business Combinations and Goodwill

A. Statutory Purchase Method

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

B. Statutory Mergers

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

C. Impairment Loss

Not applicable

Note 4- Discontinued Operations

The Association has no discontinued operations to report.

Note 5- Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

The Association does not hold any mortgage loans as investments.

B. Troubled Debt Restructuring for Creditors

Not applicable

C. Reverse Mortgages

The Association has no reverse mortgages.

D. Loan-Backed Securities

The Association has no mortgage-backed or loan-backed securities.

E. Repurchase Agreements

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

F. Real Estate

The Association does not own real estate.

Note 6- Joint Ventures, Partnerships & Limited Liability Companies

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

Not applicable

Note 7- Investment Income

A. Accrued Investment Income

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

B. Amounts Nonadmitted

No amounts were excluded as of December 31, 2004.

Note 8- Derivative Instruments

The Association 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 Association's Assets, Liabilities, Surplus and Other Funds are as follows:

| | December 31, 2004 | December 31, 2003 | Change |
|-------------------------------------|-------------------|-------------------|-----------|
| Total of gross deferred tax assets | 1,657,176 | 2,109,247 | (452,071) |
| Total of deferred tax liabilities | (1,176) | (88,000) | 86,824 |
| Net deferred tax asset | 1,656,000 | 2,021,247 | (365,247) |
| Net deferred tax asset non-admitted | (1,355,100) | (1,720,347) | 365,247 |
| Net admitted deferred tax asset | 300,900 | 300,900 | 0 |

- B. The Association 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 | 272,846 | 493,558 |
| Net operating loss benefit | (326,192) | (316,750) |
| Foreign | 0 | 0 |
| Federal and foreign income tax incurred | (53,346) | 176,808 |

The Association's deferred tax assets and liabilities result primarily from net operating loss carryforwards and tax credit carryforwards.

- D. The effective tax rates differs from the current statutory rate of 35% primarily due to revisions to prior year estimates and changes in deferred taxes related to statutory non-admitted assets.
- E. The amount of Federal income taxes incurred and available for recoupment in the event of future losses is \$16,000 from the current year and none from the preceding year.

The amount of net losses carried forward and available to offset future net income subject to Federal income taxes are as follows:

| | Amount | Expiration |
|-----------------------|-----------|------------|
| NOL Generated in 2001 | 4,232,981 | 2021 |
| NOL Generated in 2000 | 443,161 | 2020 |

The Association has a minimum tax credit of \$26,000 which does not expire.

F. The Association does not join in the filing of a consolidated Federal income tax return.

Note 10- Information concerning Parent, Subsidiaries and Affiliates

- A. The National Corporation serves as attorney-in fact for the Association. The National Corporation is wholly owned by Liberty-USA Corporation, an insurance holding company incorporated in Delaware. 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 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. During 2003 the Association recorded transactions relating to the management and service agreements (see Note 10F), the Federal tax allocation agreement (see Note 9F), and the intercompany pooling agreement (see Note 26).
- C. See Note 26.
- D. At December 31, 2004, the Association reported \$12,170,047 due to affiliates. In general, the terms of the intercompany arrangements require settlement at least quarterly.
- E. The Association has made no guarantee or initiated undertaking for the benefit of affiliates which result in a material contingent exposure of the Association's or affiliates' assets or liabilities.
- F. The Association entered into a management and services agreement (the "Agreement"), effective January 1, 1999, with the Peerless Insurance Company (PIC) and other affiliates. The 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 a consulting and other services as the parties may request.

The Association 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 Association.

The Association entered into a Federal Tax Sharing Agreement between LMIG and affiliates (see Note 9F). A minor change was made in 2004 to the Federal Tax Sharing Agreement that adds a provision to clarify that the Agreement may not be assigned except by an agreement in writing signed by the parties.

The Association 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 Association is part of a holding company structure as illustrated in Schedule Y Part 1.
- H. The Association does not own shares of an upstream company, either directly or indirectly.
- I. The Association has no investments in subsidiary, controlled or affiliated companies greater than 10% of admitted assets.
- J. The Association did not recognize any impairment write down for its subsidiary, controlled, or affiliated companies during the statement period.

Note 11- Debt

A. Capital Notes

Not applicable.

B. All Other Debt

The Company has no other debt.

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

The Association 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 Association 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. Common Stock

Not applicable

2. Preferred Stock

Not applicable

3. Dividend Restrictions

There are no dividend restrictions.

4. Dividend Restrictions

Not applicable

- No restrictions have been placed on unassigned funds. Unassigned surplus funds are being held for the benefit of the Subscribers.
- 6. The Association had no advances to surplus.
- 7. The Association does not hold stock for special purpose
- 8. The Association does not hold special surplus funds.
- 9. The portion of unassigned funds (surplus) represented or reduced by each item below is as follows:

| | | Cumulative Increase | Current Year Increase |
|--|-------|-----------------------|-----------------------|
| | | (Decrease) in Surplus | (Decrease) in Surplus |
| a. Unrealized gains/(losses) | | 0 | 0 |
| b. Nonadmitted asset values | | (\$1,355,100) | \$365,247 |
| c. Provision for reinsurance | | 0 | 0 |
| | Total | (\$1,355,100) | \$365,247 |

10. Surplus Notes

Cash advances to surplus not repaid consist of a guaranty fund certificate in the amount of \$10,000,000 issued to an affiliated company, Peerless Indemnity Insurance Company, fka Atlas Assurance Company of America, a wholly owned subsidiary of Liberty-USA Corporation. The issue date for this certificate was January 2, 1997. Repayment of the principal or interest is subject to the approval of the Department of Insurance of the State of Indiana and annual repayment of principal is limited to a maximum of 10% of the balance of the unassigned surplus at the prior year end. No interest was incurred in 2004 on the guaranty fund certificate.

| (1) | (2) | (3) | (4) | (5) | (6) | (7) | (8) |
|-----------------|-----------|--------------|--------------|-----------------|----------------|-------------|----------|
| Date Issued | Interest | Amount | Carrying | Interest Paid | Total Interest | Unapproved | Date of |
| | Rate | of Note(s) | Value** | Current Year | Paid | Interest | Maturity |
| January 2, 1997 | See Note* | \$10,000,000 | \$10,000,000 | \$0 | \$3,309,311 | \$0 | |
| | Total | \$10,000,000 | \$10,000,000 | \$0 | \$3,309,311 | \$0 | |

⁻ Interest Rate cannot exceed prime +3/4% or 10%

11. Quasi re-organization (dollar impact)

Not applicable

12. Quasi re-organization (effective date)

Not applicable

Note 14- Contingencies

A. Contingent Commitments

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

^{** -} All notes issued at Par Value.

B. Assessments

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

As a result of the inter-company 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 Association 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 Association.

Note 15- Leases

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

Not applicable

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

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

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

A. Transfers of Receivables reported as sales

There were no transfers of receivables reported as sales during the year.

B. Transfers and servicing of financial assets

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

C. Wash Sales

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

Not applicable

- C. Other Disclosures
 - 1) Assets in the amount of \$3,594,857 and \$3,602,586 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 Insurance Company, see Note 26, the Association 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 Association's surplus. In addition, the aggregate reinsurance recoverables in dispute do not exceed 10% of the Association's surplus.
- C. Reinsurance Assumed & Ceded
 - 1. The following table sets forth the maximum return premium and commission equity due the reinsurer or the Association if all of the Association's assumed and ceded reinsurance were canceled as of December 31, 2004.

| | Assumed F | <u>Reinsurance</u> | Ceded Rein | Ceded Reinsurance | | Net Reinsurance | | |
|-------------------------|------------|--------------------|--------------------|-------------------|----------------------|--------------------|--|--|
| | Commission | | | Commission | | Commission | | |
| | UEP | Equity | UEP | Equity | UEP | Equity | | |
| Affiliates All Other | \$0 \$0 | \$0 \$0 | \$1,292,293 \$0 | \$149,011 \$0 | \$(1,292,293) \$0 | \$(149,011) \$0 | | |
| Total | \$0 | \$0 | \$1,292,293 | \$149,011 | \$(1,292,293) | \$(149,011) | | |

Direct unearned premium reserve of \$1,292,293

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 | \$106,571 |
|---------|-------------|
| Assumed | \$0 |
| Ceded | \$(106,571) |
| Net | \$0 |

- D. The Association did not write off any uncollectible balances in 2004.
- E. The Association does not have ceded commutations.
- F. The Association does not have any retroactive reinsurance agreements.
- G. The Association 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 Association 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 Insurance Company, see Note 26, the Association has no exposure to changes in incurred losses and loss adjustment expenses.

Note 26- Intercompany Pooling Arrangements

The Association participates in a 100% Quota Share Reinsurance Agreement (the Agreement) with an affiliate, Peerless Insurance Company, the lead company in the LIH Inter-Company Reinsurance Agreement. Pursuant to the Agreement, after external reinsurance, the Association cedes its net underwriting activity to the lead company.

Note 27- Structured Settlements

- A. The Association 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 arrangement with Peerless Insurance Company, see note 26, the Association 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 Association is not a reciprocal insurance company.

Note 35 - Multiple Peril Crop Insurance

Not applicable

SUMMARY INVESTMENT SCHEDULE

| | | Gro Investment | Holdings | Admitted Assets as Reported in the Annual Statement 3 | | |
|----------------------|---|-------------------|-----------------|---|------------|--|
| | Investment Categories | 1 Amount | 2 Percentage | Amount | Percentage | |
| 1. Bonds: | | , | | | | |
| | reasury securities | 17,902,695 | 85.352 | 17,902,695 | 85.352 | |
| 1 | government agency and corporate obligations | | | | | |
| | ding mortgage-backed securities): ssued by U.S. government agencies | 2,072,927 | 9.883 | 2,072,927 | 9.883 | |
| | ssued by U.S. government agencies | 2,012,021 | 3.000 | 2,012,321 | 3.000 | |
| | gn government (including Canada, excluding mortgage-backed securities) | | | | | |
| | ities issued by states, territories, and possessions | | | | | |
| 1 | olitical subdivisions in the U.S.: | | | | | |
| 1.41 S | States, territories and possessions general obligations | | | | | |
| 1 | Political subdivisions of states, territories and possessions and political | | | | | |
| | subdivisions general obligations | | | | | |
| | Revenue and assessment obligations | | | | | |
| 1 | ndustrial development and similar obligations | | | | | |
| | age-backed securities (includes residential and commercial MBS): | | | | | |
| | Pass-through securities: 1.511 Issued or guaranteed by GNMA | | | | | |
| | 1.510 Jacobs or suprenteed by ENIMA and ELILIMO | | | | | |
| | 1.512 Issued of guaranteed by FNMA and FRLMC | | | | | |
| 1 | CMOs and REMICs: | | | | | |
| 1 | 1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA | | | | | |
| 1 | 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 | | | | | |
| | and other fixed income securities (excluding short term): | | | | | |
| | liated domestic securities (includes credit tenant loans rated by the SVO) | | | | | |
| | liated foreign securities | | | | | |
| | ted securities | | | | | |
| 3. Equity inter | translation mustical funda | | | | | |
| 3.2 Prefer | | | | | | |
| | Affiliated | | | | | |
| 3.22 L | Jnaffiliated | | | | | |
| 3.3 Public | sly traded equity securities (excluding preferred stocks): | | | | | |
| 3.31 A | Affiliated | | | | | |
| | Jnaffiliated | | | | | |
| l | equity securities: | | | | | |
| l | Affiliated | | | | | |
| l | Jnaffiliated | | | | | |
| l | equity interests including tangible personal property under lease: Affiliated | | | | | |
| | Jnaffiliated | | | | | |
| 4. Mortgage k | *************************************** | | | | | |
| | ruction and land development | | | | | |
| 4.2 Agricu | ultural | | | | | |
| 4.3 Single | e family residential properties | | | | | |
| l | amily residential properties | | | | | |
| 1 | nercial loans | | | | | |
| | anine real estate loans | | | | | |
| l | investments: | | | | | |
| | erty occupied by company erty held for production of income | | | | | |
| J.Z Frope (includ | · | | | | | |
| ' | orty held for sale (\$ 0 including property | | | | | |
| | red in satisfaction of debt) | | | | | |
| 6. Policy loans | | | | | | |
| · · | s for securities | 597 | 0.003 | 597 | 0.003 | |
| | equivalents and short-term investments | 998,992 | 4.763 | 998,992 | 4.763 | |
| 9. Other inves | *************************************** | | | | | |
| 10. Total invest | ted assets | 20,975,211 | 100.000 | 20,975,211 | 100.000 | |

PART 1 - COMMON INTERROGATORIES

GENERAL

| 1.1 | Is the reporting entity a member of an Insurance Holding C is an insurer? | Company System consisting of | of two or more affiliated | persons, one or more of which | Yes [X |] No[] | |
|-----|--|---|---|---|----------------|----------------------|-----|
| 1.2 | If yes, did the reporting entity register and file with its domic such regulatory official of the state of domicile of the princip providing disclosure substantially similar to the standards a Model Insurance Holding Company System Regulatory Act standards and disclosure requirements substantially similar | pal insurer in the Holding Col adopted by the National Asso t and model regulations perta | mpany System, a registraciation of Insurance Contining thereto, or is the r | ration statement mmissioners (NAIC) in its | Yes [X |] No[] N// |] ۵ |
| 1.3 | State Regulating? | | | | | INDIANA | |
| 2.1 | Has any change been made during the year of this statement of the reporting entity? | ent in the charter, by-laws, ar | ticles of incorporation, o | or deed of settlement | Yes [|] No [X] | |
| 2.2 | If yes, date of change: If not 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 the | e reporting entity was made o | or is being made. | | | 12/31/1999 | |
| 3.2 | State the as of date that the latest financial examination repairs that should be the date of the examined balance sheet | • | | | | 12/31/1999 | |
| 3.3 | State as of what date the latest financial examination report domicile or the reporting entity. This is the release date or (balance sheet date). | | • | | | 05/02/2001 | |
| 3.4 | By what department or departments? INDIANA | | | | | | |
| | | | | | | | |
| 4.1 | During the period covered by this statement, did any agent combination thereof under common control (other than sala a substantial part (more than 20 percent of any major line of | aried employees of the report | ting entity) receive credi | • | | | |
| | a substantial part (more than 20 percent or any major line c | or business measured on and | 4.1 | 1 sales of new business? 2 renewals? | Yes [Yes [|] No [X]] No [X] | |
| 4.2 | During the period covered by this statement, did any sales/ affiliate, receive credit or commissions for or control a subs direct premiums) of: | - | | | | | |
| | and promoting on | | | 1 sales of new business? 2 renewals? | Yes [Yes [|] No[X]] No[X] | |
| 5.1 | Has the reporting entity been a party to a merger or consol | lidation during the period cov | ered by this statement? | | Yes [|] No [X] | |
| 5.2 | If yes, provide the name of the entity, NAIC company code ceased to exist as a result of the merger or consolidation. | e, and state of domicile (use t | wo letter state abbrevia | tion) for any entity that has | | | |
| | 1 Name of Entity | 2 NAIC Company Code | 3 State of Domicile | | | | |
| | | , | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 6.1 | suspended or revoked by any governmental entity during the | | | | | | |
| | if a confidentiality clause is part of the agreement.) | | | | Yes [|] No [X] | |
| 5.2 | If yes, give full information N/A | | | | | | |
| | | • | | | | | |
| | Does any foreign (non-United States) person or entity direct | ctly or indirectly control 10% of | or more of the reporting | entity? | Yes [|] No [X] | |
| 7.2 | If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign perso | | | | | 0 % | |
| | manager or attorney-in-fact and identify the | e type of entity(s) (e.g., indivi | uuai, corporation, gover | nment, manager or attorney-in-fac | л). | | |
| | 1 Nationality | 2 Type of | | | | | |
| | Nationality | туре от | Lituly | \exists | | | |

| 8.1 | Is the company a subsidiary of a bank holding company regu | lated by th | ne Federal Reserve | Board? | | | Yes | s[] No[X] | |
|------|--|----------------|---|---|-------------------|--------------------|------------|------------|--|
| 8.2 | If response to 8.1 is yes, please identify the name of the ban N/A | | | | | | | | |
| | | | | | | | | | |
| 83 | Is the company affiliated with one or more banks, thrifts or se | | | | | | | s[] No[X] | |
| | If response to 8.3 is yes, please provide the names and location (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the | | | | | e of | S[] NO[X] | | |
| | affiliate's primary federal regulator. | | | | | | | | |
| | 1 | 2 | | 3 | 4 | 5 | 6 | 7 | |
| | Affiliate Name Location | ı (City, Sta | te) | FRB | OCC | OTS | FDIC | SEC | |
| | | . (0.1.), 0.1. | , | 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 | NO NO | |
| ٥ | What is the name and address of the independent certified p | ublic coco | untant or accounting | - | | | 110 | 110 | |
| 9. | | | | | | | | | |
| | Ernst & Young, LLP 200 Clarendon Street, Boston MA 02116 | | | | | | | | |
| 10. | What is the name, address and affiliation (officer/employee or consulting firm) of the individual providing the statement of at 62 Maple Avenue, Keene, NH 03431 | ctuarial op | inion/certification? V | Villiam M. Finr | n, FCAS, MAAA, | VP & Senior Acti | įąry | | |
| | Liberty Regional Agency Markets | | | * | | | * * | | |
| | FOR UNITED STATES BRANCHES OF ALIEN REPORTING | | | | | | | | |
| 1.1 | What changes have been made during the year in the United N/A | | | | | | | | |
| 11 2 | Door this statement contain all business transported for the re | | | | | | | I Valvi | |
| | 2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No [X] | | | | | | | | |
| | 3 Have there been any changes made to any of the trust indentures during the year? | | | | | s[] No[X] | | | |
| 11.4 | If answer to (11.3) is yes, has the domiciliary or entry state approved the changes? | | | | Yes | s[] No[] | N/A [X] | | |
| | | В | OARD OF DIRE | CTORS | | | | | |
| 12. | 12. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate | | | | | | | | |
| | committee thereof? | | | | | | Yes | s[X] No[] | |
| 13. | Does the reporting entity keep a complete permanent record committees thereof? | of the pro | ceedings of its boar | d of directors a | and all subordina | ate | Vac | s[X] No[] | |
| 11 | | to ita la | and of directors or | turnetana af am | matarial intera | at a | 163 | S[X] NO[] | |
| 14. | Has the reporting entity an established procedure for disclosi affiliation on the part of any of its officers, directors, trustees | | | | | | | | |
| | official duties of such person? | | | | | | Yes | s[X] No[] | |
| | | | FINANCIA | l | | | | | |
| 15 1 | Total amount looped during the year (inclusive of Congrete A | l accupto | | | | | | | |
| 15.1 | Total amount loaned during the year (inclusive of Separate A | | To directors or othe | | | | \$ | | |
| | 15.12 To stockholders not officers | | | | | \$ | | | |
| | | | Trustees, supreme | • , | • • | | \$ | | |
| 15.2 | Total amount of loans outstanding at the end of year (inclusive | | | | loans): | | | | |
| | | | To directors or other To stockholders no | | | | \$ | | |
| | | | Trustees, supreme | | ternal only) | | \$ | | |
| 16.1 | Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? | | | | | Yes | s[] No[X] | | |
| 16.2 | If yes, state the amount thereof at December 31 of the current | nt year: | | | | | | | |
| | , , | 16.21 | Rented from others | | | | \$ | | |
| | | | Borrowed from others Leased from others | ers | | | \$ | | |
| | | 16.23 | | | | | \$ \$ | | |
| | Disclose in Notes to Financial the nature of each obligation. | | | | | | | | |
| 17.1 | Does this statement include payments for assessments as de | escribed ir | the Annual Statem | ent Instructior | ns other than gua | aranty fund or gua | | | |
| | association assessments? | | | | | | Yes | s[] No[X] | |
| 17.2 | If answer is yes: | 17.04 | Amount waid as les | المصادات والمساورة | iatmant | | • | | |
| | | | Amount paid as los Amount paid as exp | | justinent | | \$\$ | | |
| | | | Other amounts paid | | | | \$ | | |

INVESTMENT

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

| | 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 | | | | XXX | XXX XXX | XXX XXX |

| 19.1 | Were all the stocks, bonds and other securities owned De in the actual possession of the reporting entity on said da | , . | • | 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 repo control of the reporting entity, except as shown on Sched any assets subject to a put option contract that is current | ule E - Part 3 - Special Deposits, or has the reporting en | tity sold or transferred | Yes[] No[X] |
| 20.2 | If yes, state the amount thereof at December 31 of the cu | rrent year: | | |
| | | 20.21 Loaned to others | | \$ |
| | | 20.22 Subject to repurchase agre | | \$ |
| | | 20.23 Subject to reverse repurch 20.24 Subject to dollar repurchas | | \$ |
| | | 20.25 Subject to reverse dollar re | - | \$ |
| | | 20.26 Pledged as collateral | , | \$ |
| | | 20.27 Placed under option agree | | \$ |
| | | 20.28 Letter stock or securities re | estricted as to sale | \$ |
| | | 20.29 Other | | \$ |
| 20.3 | For category (20.28) provide the following: | | | |
| | 1 | 2 | 3 | |
| | Nature of Restriction | Description | Amount | _ |
| | | + | | \dashv |
| | | | | 二 |
| | | | | _ |
| 21.1 | Does the reporting entity have any hedging transactions r | eported on Schedule DB? | | Yes[] No[X] |
| 21.2 | If yes, has a comprehensive description of the hedging pr | ogram been made available to the domiciliary state? | | Yes [] No [] N/A [X] |
| | If no, attach a description with this statement. | | | |
| 22.1 | Were any preferred stocks or bonds owned as of Decemb issuer, convertible into equity? | per 31 of the current year mandatorily convertible into eq | uity, or, at the option of the | Yes[] No[X] |
| 22.2 | If yes, state the amount thereof at December 31 of the cu | rrent year. | | \$ |

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 |
| CUSIP# | Name of Mutual Fund | Book/Adjusted 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.

| Γ | | 1 | 2 | 3 |
|---|-----------------------|----------------------|------------|---------------------|
| ı | | | | Excess of Statement |
| ı | | | | over Fair Value |
| ı | | Statement (Admitted) | | (-), or Fair Value |
| L | | Value | Fair Value | over Statement (+) |
| | 25.1 Bonds | 20,899,855 | 21,219,922 | 320,066 |
| | 25.2 Preferred stocks | | | |
| Г | 25.3 Totals | 20,899,855 | 21,219,922 | 320,066 |

| | 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. | | * * * * * * * * * | | |
|-----|---|--|-------------------|--|--|
| 6.1 | 1 Have all the filing requirements of the Purposes and Procedures manual of the NAIC Securitites Valuation Office been followed? | | | | |
| 6.2 | If no, list exceptions: | | | | |
| | | DTHER | | | |
| 7.1 | Amount of payments to Trade Associations, Service Organizations and Statistica | ll or Rating Bureaus, if any? | \$ | | |
| | 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 | | e | | |
| | 1 | 2 | | | |
| | Name | Amount Paid | | | |
| | | \$ | | | |
| | | | | | |
| | | \$ | | | |
| | | \$ | | | |
| | | \$ | | | |
| 3.1 | Amount of payments for legal expenses, if any? | \$ \$ \$ | \$ | | |
| 8.2 | 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. | \$ \$ \$ \$ | \$ses | | |
| 3.2 | List the name of the firm and the amount paid if any such payment represented 2 | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | \$ses | | |
| .2 | List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | \$ses | | |
| 3.2 | List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | \$ses | | |
| 3.2 | List the name of the firm and the amount paid if any such payment represented 2 during the period covered by this statement. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | \$ses | | |
| 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. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | \$ses | | |
| 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. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | \$ses | | |
| 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. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | | | |

| 1 | 2 |
|------|-------------|
| l l | 2 |
| Name | Amount Paid |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

| 1.1 | Does the reporting entity have any direct Medicare | Supplement I | nsurance 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 Me | edicare Supple | ement Insurance Experience Exh | ibit? | | \$ |
| | 1.31 Reason for excluding | | | | | |
| | 9 | | | | ******************* | |
| 1 / | Indicate amount of earned premium attributable to | Canadian and | Var Other Alien not included in Ite | | | ¢ |
| | | | | iii (1.2) above. | | \$ \$ |
| | Indicate total incurred claims on all Medicare Supp | nement insura | nce. | | | <u> </u> |
| 1.0 | Individual policies: | Mast | | | | |
| | | | current three years: | | | • |
| | | 1.61 | Total premium earned | | | \$ |
| | | 1.62 | Total incurred claims | | | \$ |
| | | 1.63 | Number of covered lives | | | \$ |
| | | | ars prior to most current three ye | ars: | | |
| | | 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 yea | ars prior to most current three ye | ars: | | |
| | | 1.74 | Total premium earned | | | \$ |
| | | 1.75 | Total incurred claims | | | \$ |
| | | 1.76 | Number of covered lives | | | \$ |
| 2 | Health Test: | | | | | |
| ۷. | Health Test. | | | 1 | 2 | |
| | | | | Current Year | Prior Year | |
| | | 2.1 | Premium Numerator | \$ | \$ | |
| | | 2.2 F | Premium Denominator | \$ | \$ | |
| | | 2.3 F | Premium Ratio (2.1/2.2) | | * | |
| | | 2.4 F | Reserve Numerator | \$ | \$ | |
| | | 2.5 F | Reserve Denominator | \$ | \$ | |
| | | 2.6 F | Reserve Ratio (2.4/2.5) | | | |
| 3.1 | Does the reporting entity issue both participating a | ind non-partici | pating policies? | | | YES[]NO[X] |
| | If yes, state the amount of calendar year premiums | | | | | |
| | in you, state the amount of callonaar your promitant | 3.21 | Participating policies | | | \$ |
| | | 3.22 | Non-participating policies | | | \$ |
| 4 | For Mutual Reporting Entities and Reciprocal Exch | | Horr participating policies | | | <u> </u> |
| | Does the reporting entity issue assessable policies | | | | | YES[]NO[X] |
| | Does the reporting entity issue non-assessable policies | | | | | YES[]NO[X] |
| | If assessable policies are issued, what is the exten | | gent liability of the policyholders |) | | 120[]NO[X] |
| | Total amount of assessments paid or ordered to be | | | | | <u> </u> |
| | Reciprocal Exchanges Only: | e paid during t | ne year on deposit notes or conti | ngent premiums. | | Ψ |
| | Does the exchange appoint local agents? | | | | | VEGI INOTVI |
| | | | | | | YES[]NO[X] |
| J.Z | If yes, is the commission paid: | F 04 | Out of Attornaula in fact or or | onnation | | VECT INOTVINIAT I |
| | | 5.21 | Out of Attorney's-in-fact com | | | YES [] NO [X] N/A [] |
| - ^ | Miles I a service of the East | 5.22 | As a direct expense of the ex | • | | YES[X]NO[]N/A[] |
| 5.3 | What expenses of the Exchange are not paid out of | of the compens | sation of the Attorney-in-fact? | N/A | | |
| _ , | | | | | | |
| | Has any Attorney-in-fact compensation, contingent | t on fulfillment | of certain conditions, been defer | red? | | YES[]NO[X] |
| 5.5 | If yes, give full information N/A | | | | | |
| | | | | | | |

(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% quota share agreement with Peerless Insurance Company | 1 |
| | 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 N/A | 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 N/A | 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 N/A | 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 losses11.12 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

| einsurance contracts? | the methods described in item 1 | | * | | | | | | | | |
|--|--|---|--|--|--|---|--|--|--|--|--|
| 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? | | | | | | | | | | | |
| the answer to 14.3 is no, are a | all the methods described in 14.2 | entirely contained in | written agreements? | | | YES[]NO[X] | | | | | |
| the answer to 14.4 is no, pleas | se explain: N/A | | | | | | | | | | |
| las the reporting entity guarante yes, give full information | | | | | | YES[]NO[X] | | | | | |
| oes the reporting entity own ar | ny securities of a real estate hold | ding company or other | rwise hold real estate in | directly? | | YES[]NO[X] | | | | | |
| | 16.11 | Name of real estat | e holding company | | | N/A | | | | | |
| | 16.12 | Number of parcels | involved | | | | | | | | |
| | 16.13 | Total book/adjuste | d carrying value | | | \$ | | | | | |
| yes, provide explanation | | | | | | | | | | | |
| | | | | | | | | | | | |
| yes, disclose the following info | ormation for each of the following | g types of warranty co | verage: | | | YES[]NO[X] | | | | | |
| | 1 | 2 | 3 | 4 | 5 | | | | | | |
| | Direct Losses | | | Direct Premium | | 1 | | | | | |
| | Incurred | Unpaid | Premium | Unearned | Earned | | | | | | |
| 17.11 Home | \$ | \$ | \$ | \$ | \$ | | | | | | |
| 17.12 Products | \$ | \$ | \$ | \$ | \$ | | | | | | |
| 17.13 Automobile | \$ | \$ | \$ | \$ | \$ | * * | | | | | |
| | \$ | \$ | \$ | \$ | \$ | | | | | | |
| .) | yes, give full information oes the reporting entity own and yes, provide explanation //A oes the reporting entity write a yes, disclose the following info | as the reporting entity guaranteed any financed premium acco yes, give full information oes the reporting entity own any securities of a real estate hold 16.11 16.12 16.13 yes, provide explanation /A oes the reporting entity write any warranty business? yes, disclose the following information for each of the following 1 Direct Losses Incurred 17.11 Home \$ 17.12 Products \$ 17.13 Automobile \$ 17.14 Other* \$ | as the reporting entity guaranteed any financed premium accounts? yes, give full information oes the reporting entity own any securities of a real estate holding company or other 16.11 Name of real estate 16.12 Number of parcels 16.13 Total book/adjuste yes, provide explanation /A oes the reporting entity write any warranty business? yes, disclose the following information for each of the following types of warranty companies 1 2 Direct Losses Incurred Unpaid 17.11 Home \$ \$ \$ 17.12 Products \$ \$ \$ \$ 17.13 Automobile \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | as the reporting entity guaranteed any financed premium accounts? yes, give full information 16.11 Name of real estate holding company or otherwise hold real estate inc 16.11 Number of parcels involved 16.13 Total book/adjusted carrying value yes, provide explanation /A oes the reporting entity write any warranty business? yes, disclose the following information for each of the following types of warranty coverage: 1 | as the reporting entity guaranteed any financed premium accounts? yes, give full information oes 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 yes, provide explanation /A oes the reporting entity write any warranty business? yes, disclose the following information for each of the following types of warranty coverage: 1 2 3 4 Direct Losses Direct Written Direct Premium Unearned 17.11 Home \$ \$ \$ \$ \$ \$ 17.12 Products \$ \$ \$ \$ 17.13 Automobile \$ \$ \$ \$ \$ \$ \$ | as the reporting entity guaranteed any financed premium accounts? yes, give full information oes 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 yes, provide explanation //A oes the reporting entity write any warranty business? 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 Incurred Unpaid Premium Unearned 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 2004 | 2 2003 | 3 2002 | 4 2001 | 5 2000 |
|-----------------|---|------------------------|------------------------|------------------------|-------------------------|---|
| <u> </u> | | 2004 | 2000 | 2002 | 2001 | 2000 |
| 1. | Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, | 2,000,207 | 4 500 007 | 0.700.000 | 04 000 500 | 24 625 050 |
| 2. | 19.1, 19.2 & 19.3, 19.4) Property lines (Lines 1, 2, 9, 12, 21 & 26) | 3,866,367 1,366,945 | 4,562,887 1,427,405 | 9,792,008 3,428,399 | 24,009,526 8,326,119 | 31,635,059 8,231,136 |
| 3. | Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) | 1,000,043 | 1,427,400 | 0,420,000 | 0,320,113 | 0,201,100 |
| 4. | All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33) | | | | | |
| 5. | Nonproportional reinsurance lines (Lines 30, 31 & 32) | | | | | |
| 6. | Total (Line 34) | 5,233,312 | 5,990,292 | 13,220,407 | 32,335,645 | 39,866,195 |
| 7. | 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) | | | | (12,156,044) | 31,635,059 |
| 8. | Property lines (Lines 1, 2, 9, 12, 21 & 26) | | | | (3,373,924) | 8,231,136 |
| 9. | Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) | | | | | |
| 10. | All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33) | | | | | |
| 11. | Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34) | | | | (15,529,968) | 39,866,195 |
| 12. | Statement of Income (Page 4) | | | | (13,329,900) | 39,000,193 |
| 13. | Net underwriting gain (loss) (Line 8) | | | | | (3,728,706) |
| 14. | = = ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | 760,185 | 773,635 | 2,421,049 | 1,400,713 | 2,176,900 |
| 15. | Total other income (Line 15) | | | (14) | | 1,885,820 |
| 16. | Dividends to policyholders (Line 17) | | | | | * |
| 17. | , | (53,346) | 176,808 | (159,080) | | 61,000 |
| 18. | Net income (Line 20) Balance Sheet Lines (Pages 2 and 3) | 813,531 | 596,827 | 2,580,115 | 1,401,274 | 273,014 |
| 19 | Total admitted assets excluding protected cell business | | | | | |
| ' | (Page 2, Line 24, Col. 3) | 22,049,900 | 20,406,877 | 19,211,725 | 53,657,506 | 71,848,939 |
| 20. | Premiums and considerations (Page 2, Col. 3) | | | | | |
| | 20.1 In course of collection (Line 12.1) | | | | | (504,708) |
| | 20.2 Deferred and not yet due (Line 12.2) | | | | | 10,961,765 |
| | 20.3 Accrued retrospective premiums (Line 12.3) | | | | | |
| 21. | Total liabilities excluding protected cell business (Page 3, Line 24) Losses (Page 3, Lines 1 and 2) | 12,718,941 | 11,889,449 | 11,142,204 | 48,444,180 | 50,491,317 24,052,546 |
| 23. | Loss adjustment expenses (Page 3, Line 3) | | | | | 9,705,964 |
| 24. | Unearned premiums (Page 3, Line 9) | | | | | 8,810,658 |
| 25. | Capital paid up (Page 3, Lines 28 & 29) | | | | | |
| 26. | Surplus as regards policyholders (Page 3, Line 35) | 9,330,959 | 8,517,428 | 8,069,521 | 5,213,326 | 21,357,622 |
| | Risk-Based Capital Analysis | | | | | |
| 1 | Total adjusted capital | 9,330,959 | 8,517,428 | 8,069,521 | 5,213,326 | 21,357,622 |
| 28. | Authorized control level risk-based capital | 24,458 | 4,979 | 17,491 | 230,080 | 4,080,019 |
| | 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) | 95.2 | 95.3 | 100.0 | 98.2 | 98.2 |
| 30. | Stocks (Lines 2.1 & 2.2) | | | | | |
| 31. | 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) | 4.8 | 4.6 | (0.2) | 1.8 | 1.8 |
| 34. 35. | Contract loans (Line 6) Other invested assets (Line 7) | | | XXX | XXX | XXX |
| 36. | Descripping for acquirities (Line 9) | | 0.1 | 0.2 | | |
| 1 | Aggregate write-ins for invested assets (Line 9) | | | | | * |
| 1 | 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) | | | | | |
| | Affiliated common stocks (Sch. D, Summary, Line 53, Col. 2) Affiliated short-term investments (subtotals included in Schedule DA, | | | | | |
| -2. | Port 2 Col. 5 Line 11) | | | | | |
| 43. | Affiliated mortgage loans on real estate | | | | | |
| 44. | All other affiliated | | | | | * |
| 45. | Total of above Lines 39 to 44 | | | ***** | | |
| 46. | Percentage of investments in parent, subsidiaries and affiliates | | | | | |
| | to surplus as regards policyholders (Line 45 above divided by 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) | | | | | |
| 47. | Net unrealized capital gains (losses) (Line 23) | | | | | |
| 48. | Dividends to stockholders (Line 34) | | | | | |
| 49. | Change in surplus as regards policyholders | | | | | |
| | for the year (Line 37) | 813,531 | 447,907 | 2,856,195 | (16,144,296) | 273,014 |
| | 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) | 3,958,549 | 7,931,410 | 15,801,744 | 24,659,249 | 26,905,864 |
| 51. | Property lines (Lines 1, 2, 9, 12, 21 & 26) | 630,157 | 863,553 | 2,990,554 | 6,496,448 | 4,700,682 |
| 52. | Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) | | | | | |
| | All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33) | | | | | |
| | Nonproportional reinsurance lines (Lines 30, 31 & 32) | | | | | |
| 55. | Total (Line 34) | 4,588,706 | 8,794,963 | 18,792,298 | 31,155,697 | 31,606,546 |
| | Net Losses Paid (Page 9, Part 2, Col. 4) | | | | | |
| 56. | Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, | | | | 02 507 244 | 20,005,004 |
| | 19.1, 19.2 & 19.3, 19.4) | | | | 23,587,311 | 26,905,864 |
| l . | Property lines (Lines 1, 2, 9, 12, 21 & 26) | | | | 465,238 | 4,700,682 |
| 58. | Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) | | | | | |
| | All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33) | | | | | |
| 60. 61. | Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34) | | | | 24,052,549 | 31,606,546 |
| | 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) | | | | | 64.3 |
| | Loss expenses incurred (Line 3) | | | | | 17.7 |
| | Other underwriting expenses incurred (Line 4) | | | * | | 27.5 |
| | Net underwriting gain (loss) (Line 8) | | | | | (9.5) |
| 00. | | | | | | (9.5) |
| 67 | Other Percentages Other underwriting expenses to net premiums written (Page 4, | | | | | |
| 07. | Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 34 x 100.0) | | | | | 22.2 |
| 68 | Losses and loss expenses incurred to premiums earned | | | * | | |
| 00. | (Page 4 Lines 2 + 3 divided by Page 4 Line 1 x 100 0) | | | | | 82.0 |
| 69 | Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, | | | | | |
| 00. | Line 34 divided by Page 3, Line 35, Col. 1 x 100.0) | | | * | (297.9) | 186.7 |
| | 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) | | | | | (734) |
| 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) | | | | | (911.0) |
| | 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) | | | | | 1,937 |
| 73 | Percent of development of losses and loss expenses incurred to reported | | | | | 1,007 |
| | policyholders' surplus of second prior year end (Line 72 above divided | | | | | |
| | | | | | | 7.6 |
| | by Page 4, Line 21, Col. 2 x 100.0) | | | | | 7.6 |

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 | 19,975,622 | | 20,092,367 | 19,521,81 |
| (Including all obligations guaranteed | 3. Other Countries | | | | |
| by governments) | 4. Totals | 19,975,622 | | 20,092,367 | 19,521,81 |
| States, Territories and Possessions (Direct and guaranteed) | 5. United States 6. Canada 7. Other Countries | | *************************************** | | |
| , , , | 8. Totals | | | | |
| Political Subdivisions of States, Territories and Possessions (Direct and guaranteed) | 9. United States 10. Canada 11. Other Countries | | | | |
| | 12. Totals | | | | |
| Special revenue and special assessment obligations and all non-guaranteed obligations of agencies and authorities of | 13. United States 14. Canada 15. Other Countries | | | | |
| governments and their political subdivisions | 16. Totals | | | | |
| Public Utilities (unaffiliated) | 17. United States 18. Canada 19. Other Countries | | | | |
| | 20. Totals | | | | |
| Industrial and Miscellaneous and Credit Tenant Loans (unaffiliated) | 21. United States 22. Canada 23. Other Countries | | | | |
| Cloud Fortal Louis (analimator) | 24. Totals | | | | |
| Parent, Subsidiaries and Affiliates | 25. Totals | | | | |
| | 26. Total Bonds | 19,975,622 | 20,295,688 | 20,092,367 | 19,521,81 |
| PREFERRED STOCKS Public Utilities (unaffiliated) | 27. United States 28. Canada 29. Other Countries | | | | |
| | 30. Totals | | | | |
| Banks, Trust and Insurance Companies (unaffiliated) | 31. United States 32. Canada 33. Other Countries | | | | |
| | 34. Totals | | | | |
| Industrial and Miscellaneous (unaffiliated) | 35. United States 36. Canada 37. Other Countries | •••• | | | |
| | 38. Totals | | | | |
| Parent, Subsidiaries and Affiliates | 39. Totals | | | | |
| | 40. Total Preferred Stocks | | | | |
| COMMON STOCKS Public Utilities (unaffiliated) | 41. United States 42. Canada 43. Other Countries | | | | |
| | 44. Totals | | | | |
| Banks, Trust and Insurance Companies (unaffiliated) | 45. United States 46. Canada 47. Other Countries | | | | |
| | 48. Totals | | | | |
| Industrial and Miscellaneous (unaffiliated) | 49. United States 50. Canada 51. Other Countries | | | | |
| | 52. Totals | | | | |
| Parent, Subsidiaries and Affiliates | 53. Totals | | | | |
| | 54. Total Common Stocks | | | | |
| | 55. Total Stocks | 10.0== 000 | 20.00= 20.0 | 22.22.22 | |
| | 56. Total Bonds and Stocks | 19,975,622 | 20,295,688 | 20,092,367 | |

SCHEDULE D - VERIFICATION BETWEEN YEARS

| 1. | Book/adjusted carrying value of bonds and | | Foreign Exchange Adjustment: |
|----|---|------------|---|
| | stocks, prior year | 18,281,117 | 6.1 Column 15, Part 1 |
| 2. | Cost of bonds and stocks acquired, Column 7, Part 3 | 2,560,195 | 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 (58,266) | | 6.4 Column 15, Part 4 |
| | 3.2 Column 18, Part 2, Section 1 | | 7. Book/adjusted carrying value at end of current period 19,975,622 |
| | 3.3 Column 15, Part 2, Section 2 | | 8. Total valuation allowance |
| | 3.4 Column 14, Part 4 (7) | (58,273) | 9. Subtotal (Lines 7 plus 8)19,975,622 |
| 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 19,975,622 |
| | disposed of Column 7, Part 4 | 807,417 | |
| | | | |

SCHEDULE P-ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P-PART 1-SUMMARY

(\$000 omitted)

| | Pr | emiums Earned | i | | | Lo | ss and Loss Ex | pense Paymer | nts | | | 12 |
|--------------------------|---------------|---------------|---------------|---------------|---------|---------------|----------------|--------------------|--------|--------------------|---------------------|----------------------|
| Years in Which | 1 | 2 | 3 | Loss Pa | yments | Defense a | | Adjus and Other | • | 10 | 11 T-1-1 | Number of |
| Premiums Were | | | | 4 | 5 | 6 | 7 | 8 | 9 | Salvage | Total Net Paid | Claims Reported - |
| Earned and Losses Were | Direct and | | Net (Cols. | Direct and | | Direct and | | Direct and | | and Subrogation | (Cols. 4 - 5 + 6 | Direct and |
| Incurred | Assumed | Ceded | 1 - 2) | Assumed | Ceded | Assumed | Ceded | Assumed | Ceded | Received | -7+8-9) | Assumed |
| 1. Prior | XXX | XXX | XXX | 15 | 15 | 3 | 3 | | | 5 | | XXX |
| 2. 1995 | 59,408 | 59,408 | | 37,423 | 37,423 | 3,992 | 3,992 | 2,172 | 2,172 | 15 | | XXX |
| 3. 1996 | 76,161 | 76,161 | | 48,140 | 48,140 | 6,655 | 6,655 | 2,819 | 2,819 | | | XXX |
| 4. 1997 | 69,777 | 69,777 | | 48,178 | 48,178 | 5,407 | 5,407 | 3,742 | 3,742 | 23 | | XXX |
| 5. 1998 | 64,287 | 64,287 | | 38,166 | 38,166 | 2,950 | 2,950 | 5,560 | 5,560 | 29 | | XXX |
| 6. 1999 | 50,393 | 50,393 | | 34,289 | 34,289 | 2,544 | 2,544 | 4,344 | 4,344 | 44 | | XXX |
| 7. 2000 | 39,047 | 39,047 | | 24,861 | 24,861 | 1,651 | 1,651 | 3,982 | 3,982 | 67 | | XXX |
| 8. 2001 | 39,911 | 39,911 | | 26,108 | 26,108 | 1,692 | 1,692 | 5,588 | 5,588 | 68 | | XXX |
| 9. 2002 | 18,291 | 18,291 | | 9,756 | 9,756 | 217 | 217 | 975 | 975 | 117 | | XXX |
| 10. 2003 | 7,187 | 7,187 | | 3,378 | 3,378 | 176 | 176 | 272 | 272 | 112 | | XXX |
| 11. 2004 | 5,627 | 5,627 | | 1,340 | 1,340 | 57 | 57 | 69 | 69 | 50 | | XXX |
| Totals | XXX | XXX | XXX | 271,654 | 271,654 | 25,344 | 25,344 | 29,523 | 29,523 | 544 | | XXX |

| | | Losses | Unpaid | | Defen | se and Cost C | ontainment U | Inpaid | Adjusting a | and Other | 23 | 24 | 25 |
|------------|---------|--------|---------|-------|-----------------|---------------|--------------|---------|-------------|-----------|-------------|------------|-------------|
| | | | | | | | | | Unp | aid | | | |
| | Case | Basis | Bulk + | IBNR | Case Basis Bulk | | | IBNR 21 | | 22 | | | Number of |
| | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 1 | | | | Claims |
| | 5 | | 5. | | - · · | | | | 5 | | Salvage | | Outstanding |
| | Direct | | Direct | | Direct | | Direct | | Direct | | and | Losses and | Direct |
| | and | | and | | and | | and | | and | | Subrogation | Expenses | and |
| | Assumed | Ceded | Assumed | Ceded | Assumed | Ceded | Assumed | Ceded | Assumed | Ceded | Anticipated | Unpaid | Assumed |
| 1. Prior | 51 | 51 | | | | | | | 9 | 9 | | | XXX |
| 2. 1995 | (11) | (11) | 1 | 1 | | | (1) | (1) | (1) | (1) | | | XXX |
| 3. 1996 | 18 | 18 | 3 | 3 | | | (2) | (2) | 4 | 4 | | | XXX |
| 4. 1997 | 16 | 16 | | 7 | | | (2) | (2) | 5 | 5 | | | XXX |
| 5. 1998 | 65 | 65 | | 18 | | | 1 | 1 | 16 | 16 | | | XXX |
| 6. 1999 | 336 | 336 | | 74 | | | 1 | 1 | | 85 | | | XXX |
| 7. 2000 | 344 | 344 | 189 | 189 | | | 5 | | 128 | 128 | | | XXX |
| 8. 2001 | 561 | 561 | 386 | 386 | | | 8 | | 238 | 238 | | | XXX |
| 9. 2002 | 666 | 666 | 305 | 305 | | | 5 | | 228 | 228 | | | XXX |
| 10. 2003 | 589 | 589 | 341 | 341 | | | (3) | (3) | 225 | 225 | | | XXX |
| 11. 2004 | 990 | 990 | 747 | 747 | | | (52) | (52) | 443 | 443 | | | XXX |
| 12. Totals | 3,625 | 3,625 | 2,071 | 2,071 | | | (40) | (40) | 1,380 | 1,380 | | 1 | XXX |

| | | otal Losses and Expenses Incu | | Loss and Loss Expense Percentage (Incurred / Premiums Earned) | | | Nontabular | Discount | 34 | Net Balance Sheet Reserves After Discount | | |
|------------|--------------------------|----------------------------------|-----|--|--------|-----|------------|-----------------|--|--|----------------------------|--|
| | 26 27 | | 28 | 29 | 30 | 31 | 32 | 33 | Inter-Company | 35 | 36 | |
| | Direct and Assumed | Ceded | Net | Direct and Assumed | Ceded | Net | Loss | Loss Expense | Pooling Participation Percentage | Losses Unpaid | Loss Expenses Unpaid | |
| 1. Prior | XXX | XXX | XXX | XXX | XXX | XXX | | | XXX | | | |
| 2. 1995 | 43,575 | 43,575 | | 73.349 | 73.349 | | | | | | | |
| 3. 1996 | 57,637 | 57,637 | | 75.678 | 75.678 | | | | | | | |
| 4. 1997 | 57,353 | 57,353 | | 82.195 | 82.195 | | | | | | | |
| 5. 1998 | 46,776 | 46,776 | | 72.761 | 72.761 | | | | | | | |
| 6. 1999 | 41,673 | 41,673 | | 82.696 | 82.696 | | | | | | | |
| 7. 2000 | 31,160 | 31,160 | | 79.801 | 79.801 | | | | | | | |
| 8. 2001 | 34,581 | 34,581 | | 86.645 | 86.645 | | | | | | | |
| 9. 2002 | 12,152 | 12,152 | | 66.437 | 66.437 | | | | | | | |
| 10. 2003 | 4,978 | 4,978 | | 69.264 | 69.264 | | | | | | | |
| 11. 2004 | 3,594 | 3,594 | | 63.871 | 63.871 | | | | | | | |
| 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

| | | 1 Is | Gross Premiums, Including Policy and Membership Fees Less | | 4 Dividende | 5 | 6 | 7 | 8 Finance | 9 Direct Premium |
|---------------------------------------|-----------------------|------------------|---|-----------------|---|------------|---|---|----------------|---------------------|
| | | Insurer | Return Premium | | Dividends Paid or | Direct | | | Finance and | Written for |
| | | Licen- | on Policies | | Credited to | Losses | | | Service | Federal |
| | | sed? | 2 | 3 | Policyholders | Paid | Direct | Direct | Charges Not | Purchasing |
| | | (Yes or | Direct Premiums | Direct Premiums | on Direct | (Deducting | Losses | Losses | Included in | Groups (Included |
| States, Etc. | A.1 | No) | Written | Earned | Business | Salvage) | Incurred | Unpaid | Premiums | in Col. 2) |
| 1. Alabama | AL AK | YES NO | | | | 2,095 | (4,221) | (3,009) | | |
| 3. Arizona | AZ | YES | 166,841 | 199,066 | | 115,743 | 49,974 | 125,684 | 914 | |
| 4. Arkansas | AR | NO | | | | | | | | |
| 5. California | CA | NO | | | | | | | | |
| 6. Colorado 7. Connecticut | CO CT | YES NO | | | | | | | | |
| 8. Delaware | DE | NO | | | | | | | | |
| 9. Dist. Columbia | DC | NO | | | | | | | | |
| 10. Florida | FL | YES | (54) | 587 | | 271,062 | (43,948) | 1,565 | | |
| 11. Georgia 12. Hawaii | GA HI | YES NO | | | | | | | | |
| 13. Idaho | ID | YES | | | | | | | | |
| 14. Illinois | İL | NO | | | | | | | | |
| 15. Indiana | IN | YES | 825,635 | 986,475 | | 899,446 | (23,633) | 1,191,756 | 4,525 | |
| 16. lowa 17. Kansas | IA KS | YES YES | 224,121 | 253,249 | | 242,113 | 73,177 | 174,043 | 1,228 | |
| 18. Kentucky | KS KY | YES | 662 | 2,875 | * * * * * * * * * * * * * * * * * * * | 39,072 | 75,899 | 74,763 | | |
| 19. Louisiana | LA | YES | | | ***** | | | | | |
| 20. Maine | ME | NO | ****** | | ***** | | ***** | ***** | | |
| 21. Maryland | MD | NO | | | | | | | | |
| 22. Massachusetts 23. Michigan | _. MA MI | NO NO | | | * * * * * * * * * * * * * * * * * * * | | | * | | |
| 24. Minnesota | MN | YES | | | | | | | | |
| 25. Mississippi | MS | YES | | | | | | | | |
| 26. Missouri | MO | YES | 3,260,993 | 3,307,251 | | 2,431,248 | 2,681,383 | 3,228,005 | 17,874 | |
| 27. Montana 28. Nebraska | MT NE | YES YES | | | | 86,243 | (20,988) | (1,106) | | |
| 29. Nevada | NV NV | YES | 2,789 | 1,538 | | 16,232 | (20,966) | (3,206) (4,980) | 15 | |
| 30. New Hampshire | NH | YES | | | | | | | | |
| 31. New Jersey | NJ | NO | | | | | | | | |
| 32. New Mexico | NM | YES | | | | | | | | |
| 33. New York 34. No. Carolina | NY NC | NO NO | | | | | | | | |
| 35. No. Dakota | ND | YES | | | | | | | | |
| 36. Ohio | ОН | YES | 205,905 | 230,498 | | 180,920 | 63,219 | 167,376 | 1,129 | |
| 37. Oklahoma | OK | NO | | | | | | | | |
| 38. Oregon 39. Pennsylvania | OR PA | YES NO | | | | | | | | |
| 40 Rhode Island | RI | NO NO | | | | | | | | |
| 41. So. Carolina | SC | NO | | | * | | | * | | |
| 42. So. Dakota | SD | YES | | | | | | | | |
| 43. Tennessee | TN | YES | 455,040 | 537,707 | | 229,791 | 76,197 | 694,006 | 2,494 | |
| 44. Texas 45. Utah | TX UT | YES YES | | | | | | | | |
| 46. Vermont | VT | NO | | | | | | | | |
| 47. Virginia | VA | NO | | | | | | | | |
| 48. Washington | WA | YES | | ***** | ***** | | * | ***** | | |
| 49. West Virginia 50. Wisconsin | WV WI | YES YES | 91,380 | 108,255 | * | 74,741 | 51,808 | 49,590 | 501 | |
| 51. Wyoming | WY | YES | 91,300 | 100,233 | * | | 31,000 | 49,090 | 301 | |
| 52. American Samoa | AS | NO | | | ***** | | | ***** | | |
| 53. Guam | GU | NO | ****** | | ***** | | ***** | ***** | | |
| 54. Puerto Rico | PR | NO | | | | | | | | |
| 55. U.S. Virgin Islands 56. Canada | VI CN | NO NO | | | * * * * * * * * * * * * * * * * * * * | | | * | | |
| 57. Aggregate other | | ····! ! \ | | | * | | | * | | |
| alien | OT | XXX | | | | | | | | |
| 58. Totals | | (a) 30 | 5,233,312 | 5,627,501 | | 4,588,706 | 2,967,023 | 5,694,487 | 28,684 | |
| | | | | , | | | | | | |
| DETAILS OF WRITE | -INS | | | | | | | | | |
| 5701 | | XXX | | | | | | | | |
| 5701. 5702. | | | | | | | | | | |
| 5702. | | XXX | | | | | | | | |
| | oinina | | | | * | | | * | | |
| 5798. Summary of rema | - | | | | | | | | | |
| from overflow pa | | XXX | | | | | | | | |
| 5799. Totals (Lines 570 | | ^^^ | | | | | | | | |
| through 5703 + 5 | | | | | | | | | | |
| (Line 57 above) | ,, 50) | xxx | | | | | | | | |
| (Line or above) | | _ ^ ^ ^ | | | | L | | | | |

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

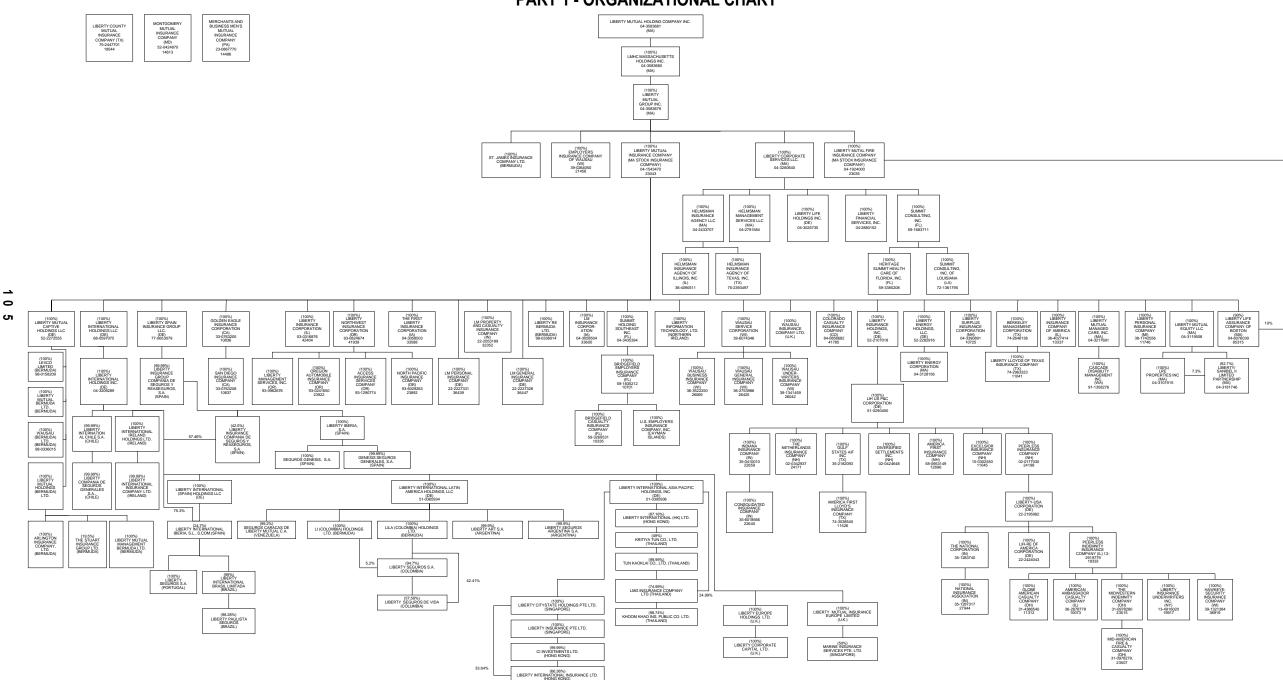
*Location of Principal place of garaging of each individual car - Auto Liability, Auto Physical Damage *Address of Assured - Other Accident and Health

*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 *State in which employees regularly work - Group Accident and Health *Primary residence of Assured - Aircraft (all perils)

⁽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