# **ANNUAL STATEMENT**

## OF THE

LIBERTY NORTHWEST INSURANCE CORPORATION				
of	PORTLAND	,		
in the state of	OREGON			

# **TO THE**

**Insurance Department** 

**OF THE** 

FOR THE YEAR ENDED

**December 31, 2009** 

**PROPERTY AND CASUALTY** 

2009



# 41939200920100100

# **ANNUAL STATEMENT**

For the Year Ended December 31, 2009 OF THE CONDITION AND AFFAIRS OF THE

**Liberty Northwest Insurance Corporation** 

	0111 0111 ent Period) (Prior Period	NAIC Company C	Code41939	En	nployer's ID Number	93-0824674
Organized under the Laws of	ent Period) (Prior Period Oregon	1)	State of Dor	micile or Port of Entry	Oregon	
Country of Domicile	United States of America		Grate of Doi	one or i one or Endry		
Incorporated/Organized:		uary 21, 1983	Comr	menced Business:	February 18, 19	983
Statutory Home Office:	One Liberty Centre	1dry 21, 1000		Portland, OR 97232-2	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		eet and Number)	,,		Town, State and Zip Code)	
Main Administrative Office:	One Liberty Centre					
			(Street and Number)			
	Portland, OR 97232-203	8 Fown, State and Zip Code)	//	503-239-5800 (Talanhana	Ni umah a si	
Mail Address. 475 D.	, ,	own, State and Zip Code)	(Area	Code) (Telephone	Number)	
Mail Address: 175 Be	erkeley Street (Street and Nun	nber or P.O. Box)		Boston, MA 02116 (City or	Town, State and Zip Code)	
Primary Location of Books and	,	keley Street	Boston.	MA 02116	617-357-95	00
· · · · · · · · · · · · · · · · · · ·		(Street and Number)		, State and Zip Code)	(Area Code) (Teleph	
Internet Web Site Address:	www.LibertyMutualAgencyN	flarkets.com				
Statutory Statement Contact:	Joanne Connolly			617-357-9500 x44393		
	0	(Name)	(Area	Code) (Telephone	, , ,	
	Statutory.Compliance@	(E-Mail Address)			617-574-5955 (Fax Number)	
		,	EDO.		(i ax ivambor)	
		OFFIC	_			
		Chairman of	the Board			
		Gary Richa	ard Gregg			
	Name	•	•	Title		
1	Gary Richard Gregg		President and Chi	ef Executive Officer		
2	Dexter Robert Legg		Secretary			
3	Michael Joseph Fallon		Treasurer and Chi	ief Financial Officer		
		VICE-PRES	SIDENTS			
Name		Title		ame	Tit	·le
Anthony Alexander Fontanes	EVP and Chief In		Joseph Anthony Gilles	umo	Executive Vice Presider	
Scott Rhodes Goodby	EVP and Chief O					•
, , , , , , , , , , , , , , , , , , ,		<u> </u>				
		DIDECTORS O	D TOUCTEE			
		DIRECTORS O				
Gary Richard Gregg	Julie Ann Burnett		Michael Joseph Fallon		Scott Rhodes Goodby	
Christopher Charles Mansfield	Mary Ann August	<u>.yn</u>	John Derek Doyle			
	<del></del>					
					-	
State of Massachusetts						
County of Suffolk						
The officers of this reporting entity b	eing duly sworn, each depose and s	ay that they are the described of	ficers of said reporting entity	, and that on the reportir	ig period stated above, all of	the herein described
assets were the absolute property of	of the said reporting entity, free and	clear from any liens or claims th	ereon, except as herein stat	ted, and that this stateme	ent, together with related exh	ibits, schedules and
explanations therein contained, anne	exed or referred to, is a full and true s	tatement of all the assets and lial	pilities and of the condition ar	nd affairs of the said repo	rting entity as of the reporting	period stated above
and of its income and deductions the	erefrom for the period ended, and have	ve been completed in accordance	with the NAIC Annual State	ment Instructions and Ac	counting Practices and Proced	dures manual except
to the extent that: (1) state law may	differ; or, (2) that state rules or reg	ulations require differences in re	porting not related to accou	nting practices and proc	edures, according to the best	of their information
	Furthermore, the scope of this attesta	· · · · · ·		-	•	
(except for formatting differences du	e to electronic filing) of the enclosed	statement. The electronic filing m	ay be requested by various r	regulators in lieu of or in a	iddition to the enclosed stater	nent.
(Signature	<b>a</b> )	(Sign	nature)		(Signature)	
Gary Richard			obert Legg		Michael Joseph Fallo	n
(Printed Na	me)	•	d Name)		(Printed Name)	
1.	r: 0ff		2.		3.	10%
President and Chief Ex	ecutive Officer		retary		Treasurer and Chief Financia	ai Officer
(Title)		(1	itle)		(Title)	
Subscribed and sworn to (or affirmed	) before me on this					
1st day of February	, 2010, by					
				a. Is this an origina	l filing?	[X]Yes []No
				b. If no: 1. State	e the amendment number	
				2. Date	filed	
				3. Num	ber of pages attached	
					· -	

# **ASSETS**

		Current Year		Prior Year	
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)	69,422,470		69,422,470	76,240,825
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks	15,882,946		15,882,946	15,704,063
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$ 0 encumbrances)				
	4.2 Properties held for the production of income (less \$ 0 encumbrances)				
_	4.3 Properties held for sale (less \$ 0 encumbrances)				
5.	Cash (\$ 2,393,113, Schedule E - Part 1), cash equivalents (\$ 194,919,	0.004.005		0.004.005	,,,,,,
•	Schedule E - Part 2), and short-term investments (\$ 676,603, Schedule DA)	3,264,635		3,264,635	(494,153
6.	Contract loans (including \$ 0 premium notes)				
7.	Other invested assets (Schedule BA)	5,579,731		5,579,731	5,597,823
8.	Receivables for securities				
9.	Aggregate write-ins for invested assets	04 140 702		04 140 702	07.049.55
10.	Subtotals, cash and invested assets (Lines 1 to 9)	94,149,782		94,149,782	97,048,558
12.	Title plants less \$ 0 charged off (for Title insurers only)  Investment income due and accrued	760.472		760,472	Q7/ Q19
	Premiums and considerations:	700,472		100,472	874,918
13.	13.1 Uncollected premiums and agents' balances in the course of collection	1,278,000		1,278,000	1,917,958
	13.2 Deferred premiums, agents' balances and installments booked but deferred	1,270,000		1,270,000	1,517,950
	and not yet due (including \$ 0 earned but unbilled premiums)				
	13.3 Accrued retrospective premiums				
14	Reinsurance:				
	14.1 Amounts recoverable from reinsurers	22,280,011		22,280,011	25.535.48
	14.2 Funds held by or deposited with reinsured companies			<del> ,</del>	,,,,,,,,
	14.3 Other amounts receivable under reinsurance contracts				
15.	Amounts receivable relating to uninsured plans				
16.1	Current federal and foreign income tax recoverable and interest thereon				
16.2	Net deferred tax asset	3,782,850	3,626,400	156,450	2,013,550
17.					
18.	Electronic data processing equipment and software				
19.	Furniture and equipment, including health care delivery assets (\$ 0)	706,331	706,331		[
20.	Net adjustment in assets and liabilities due to foreign exchange rates				
21.	Receivables from parent, subsidiaries and affiliates	30,352,865		30,352,865	14,295,380
22.	Health care (\$ 0) and other amounts receivable				l
23.	Aggregate write-ins for other than invested assets	299,893		299,893	303,722
24.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 10 to 23)	153,610,204	4,332,731	149,277,473	141,989,567
25.					
26.	Total (Lines 24 and 25)	153,610,204	4,332,731	149,277,473	141,989,567
	DETAILS OF WRITE-IN LINES				

DETAILS OF WRITE-IN LINES			
0901.			
0902.			
0903.			
0998. Summary of remaining write-ins for Line 09 from overflow page			
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)			
2301. Equities and deposits in pools and associations	154,945	 154,945	154,947
2302. Other assets	144,948	 144,948	148,775
2303.	1	 	
2398. Summary of remaining write-ins for Line 23 from overflow page			
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	299,893	299,893	303,722

# LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)		
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		1,890,000
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)		
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))		607,801
7.2			
8.	Borrowed money \$ 0 and interest thereon \$ 0		
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded		
	reinsurance of \$ 42,888,822 and including warranty reserves of \$ 0)		
10	Advance premium		
	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.		1	21,980,035
13.	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)		
14.			
15.			
16.			
	Provision for reinsurance (Schedule F, Part 7)		
17.			
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		30,670,960
20.	Payable for securities		
21.	7		
22.	Capital notes \$ 0 and interest thereon \$ 0		
23.			2,003,317
24.	, , , , , , , , , , , , , , , , , , ,	60,567,407	57,152,113
25.			
26.	Total liabilities (Lines 24 and 25)	60,567,407	57,152,113
27.			
28.	Common capital stock	3,000,000	3,000,000
29.	Preferred capital stock		
30.	Aggregate write-ins for other than special surplus funds		
31.	• • • • • • • • • • • • • • • • • • • •		
32.	Gross paid in and contributed surplus	58,400,000	58,400,000
33.	Unassigned funds (surplus)	0= 00= 004	23,437,454
34.	Less treasury stock, at cost:		
	34.10 shares common (value included in Line 28 \$0)		
	34.2 0 shares preferred (value included in Line 29 \$ 0)		
35.	Surplus as regards policyholders (Lines 27 to 33, less 34) (Page 4, Line 39)	88,710,066	84,837,454
36.	Totals (Page 2, Line 26, Col. 3)	149,277,473	141,989,567
		-	
	DETAILS OF WRITE-IN LINES		
		700 = / =	0.000.04=
∠301.	Collateral held for securities loaned	706,717	2,003,317

	DETAILS OF WRITE-IN LINES		
2301.	Collateral held for securities loaned	706,717	2,003,317
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)	706,717	2,003,317
2701.	SSAP 10R incremental change	42,102	
2702.			
2703.			
2798.	Summary of remaining write-ins for Line 27 from overflow page		
2799.	Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)	42,102	
3001.			
3002.			
3003.			
3098.	Summary of remaining write-ins for Line 30 from overflow page		
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)		

# **STATEMENT OF INCOME**

		1	2
		Current Year	Prior Year
	UNDERWRITING INCOME		
1.	Premiums earned (Part 1, Line 35, Column 4)  DEDUCTIONS:		
2.	Losses incurred (Part 2, Line 35, Column 7)		
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		
5. 6.	Aggregate write-ins for underwriting deductions Total underwriting deductions (Lines 2 through 5)		
7.	Net income of protected cells		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)		
	INVESTMENT INCOME		
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	4,757,008	5,200,059
10.	Net realized capital gains (losses) less capital gains tax of \$ 27,271 (Exhibit of Capital Gains (Losses))	50,647	(258,412)
11.	Net investment gain (loss) (Lines 9 + 10)	4,807,655	4,941,647
	OTHER INCOME		
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered		
	\$ 0 amount charged off \$ 0)		
13.	Finance and service charges not included in premiums		13,572
14.	Aggregate write-ins for miscellaneous income	(00.750)	
	Total other income (Lines 12 through 14)  Net income before dividends to policyholders, after capital gains tax and before all other	(20,752)	13,572
10.	federal and foreign income taxes (Lines 8 + 11 + 15)	4,786,903	4,955,219
	Dividends to policyholders		
18.	Net income, after dividends to policyholders, after capital gains tax and before		
40	all other federal and foreign income taxes (Line 16 minus Line 17)		4,955,219
	Federal and foreign income taxes incurred  Net income (Line 18 minus Line 19) (to Line 22)	4 0 40 07 4	1,697,045 3,258,174
20.		4,343,274	3,230,174
	CAPITAL AND SURPLUS ACCOUNT		
	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)		90,094,218
22. 23.	Net income (from Line 20)  Net transfers (to) from Protected Cell accounts	4,349,274	3,258,174
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ (4,720)		370,777
25.	Change in net unrealized foreign exchange capital gain (loss)		
26.	Change in net deferred income tax	(1.861.870)	
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3)	1,601,010	(2,802,427)
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29. 30.	Surplus (contributed to) withdrawn from protected cells		
31.	Cumulative effect of changes in accounting principles		
32.	Capital changes:		
	32.1 Paid in		
	<ul><li>32.2 Transferred from surplus (Stock Dividend)</li><li>32.3 Transferred to surplus</li></ul>		
33	Surplus adjustments:		
	33.1 Paid in		
	33.2 Transferred to capital (Stock Dividend)		
•	33.3 Transferred from capital		
34. 35.	Net remittances from or (to) Home Office Dividends to stockholders		(0,000,424)
36.	Change in treasury stock (Page 3, Lines 34.1 and 34.2, Column 2 minus Column 1)		(9,009,421)
37.	Aggregate write-ins for gains and losses in surplus	(173,991)	
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	3,872,612	(5,256,764)
39.	Surplus as regards policyholders, as of December 31 current year (Lines 21 plus Line 38) (Page 3, Line 35)	88,710,066	84,837,454

	DETAILS OF WRITE-IN LINES		
0501.			
0502.			
0503.			
0598.	Summary of remaining write-ins for Line 05 from overflow page		
0599. T	Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)		
1401. C	Other income/(expense)	(20,752)	
1402.			
1403.			
1498.	Summary of remaining write-ins for Line 14 from overflow page		
1499. T	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	(20,752)	
3701.	SSAP 10R incremental change	42,102	
3702. C	Other changes in surplus	(216,093)	
3703.			
3798.	Summary of remaining write-ins for Line 37 from overflow page		
3799. T	Fotals (Lines 3701 through 3703 plus 3798) (Line 37 above)	(173,991)	

# **CASH FLOW**

		1	2
	Cash from Operations	Current Year	Prior Year
1.	Premiums collected net of reinsurance		(161,662
2.	Net investment income		5,261,53
	Miscellaneous income		630,28
	Total (Lines 1 through 3)	6,003,516	5,730,15
		3,867,339	9,664,69
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
	Dividende meid te melinde aldere		
8.		740.007	1 002 55
9. 10.	Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)  Total (Lines 5 through 9)		1,023,55 10.688,25
	Total (Lines 5 through 9) Net cash from operations (Line 4 minus Line 10)		(4,958,09
11.		1,300,130	(4,330,03
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:	44.044.004	10.050.11
	12.1 Bonds	11,311,264	13,858,11
	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		200,00
	40.7 Missellessesses		49,43
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	11,311,264	14.100.54
13	Cost of investments acquired (long-term only):	11,511,204	14,102,54
10.	13.1 Bonds	4 487 620	14,570,82
	13.2 Stocks		17,070,02
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)	4,487,620	14,570,82
14.			
15.		6,823,644	(408,27
	Cash from Financing and Miscellaneous Sources		
16	Cash provided (applied):		
10.	16.1 Curalua notos, canital notos		
	16.2. Conital and paid in auralus loss traceury steels		
	16.2 Capital and paid in surplus, less treasury stock 16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		9,009,42
	16.6 Other cash provided (applied)	(4,453,006)	17,988,85
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to Line 16.4 minus Line 16.5	,	
	plus Line 16.6)	(4,453,006)	8,979,43
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.		3,758,788	3,613,05
19.		5,700,700	0,010,00
	19.1 Beginning of year	(494,153)	(4,107,21
	· · · · · · · · · · · · · · · · · · ·	3,264,635	(494,15

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

# NONE Underwriting and Investment Exhibit - Part 1

# NONE Underwriting and Investment Exhibit - Part 1A

# UNDERWRITING AND INVESTMENT EXHIBIT PART 1B – PREMIUMS WRITTEN

	1	Reinsurance Assumed		Reinsurar	nce Ceded	6
		2	3	4	5	Net Premiums
	Direct		From		То	Written
	Business	From	Non-	То	Non-	Cols. 1 + 2 + 3 -
Line of Business	(a)	Affiliates	Affiliates	Affiliates	Affiliates	4 - 5
Line of Dusiness	(a)	Ailliates	Ailliates	Ailliates	Ailliates	4-3
1. Fire	220,887			220,887		
2. Allied lines	113,943			100,423	13,520	
Farmowners multiple peril	.			(36,290)	36,290	
Homeowners multiple peril	12,517,120			12,517,120		
Commercial multiple peril	17,838,553			17,521,022	317,531	
6. Mortgage guaranty	.					
8. Ocean marine						
9. Inland marine	070.050			678,356		
10. Financial guaranty						
11.1 Medical professional liabilityoccurrence						
11.2 Medical professional liabilityclaims-made						
40 Fadha ala	693,536			648,686	44,850	
13. Group accident and health				040,000	1	
14. Credit accident and health						
(group and individual)						
15. Other accident and health	404.040.507	4 000 070		470 000 000	40.070.007	
16. Workers' compensation	184,813,507	4,606,679	6,492,811	1	19,279,667	
17.1 Other liability—occurrence	5,225,895			5,225,895		
17.2 Other liability—claims-made						
17.3 Excess Workers' Compensation						
18.1 Products liability—occurrence	365,093			365,093		
18.2 Products liability—claims-made						
19.1,19.2 Private passenger auto liability				30,210,856		
19.3,19.4 Commercial auto liability	7,757,043			7,757,043		
21. Auto physical damage	18,191,931			18,191,931		
22. Aircraft (all perils)	.					
23. Fidelity	.					
24. Surety	.					
26. Burglary and theft	2,259			2,259		
27. Boiler and machinery						
28. Credit						
29. International						
30. Warranty						
31. Reinsurance-Nonproportional						
Assumed Property	xxx					
32. Reinsurance-Nonproportional						
A a a and I in hillist.	xxx					†
33. Reinsurance-Nonproportional						
Assumed Financial Lines	XXX					
34. Aggregate write-ins for other lines	^. ^ . ^					
of business	270 000 070	4 000 070	C 400 044	070 000 044	10 004 050	
35. TOTALS	278,628,979	4,606,679	6,492,811	270,036,611	19,691,858	

DETAILS OF WRITE-IN LINES			
3401.			
3402.			
3403.			
3498. Sum of remaining write-ins for			
3498. Sum of remaining write-ins for Line 34 from overflow page			
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)			
plus 3498) (Line 34 above)			

(a)	Does the company'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 re	ecorded on an annualized basis \$	0

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

		Losses Paid Le	ess Salvage		5	6	7	8
Line of Business	1 Direct Business	2 Reinsurance Assumed	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	59,437		59,437					
2. Allied lines					1			
Farmowners multiple peril					[			
Homeowners multiple peril	7,397,209		7,397,209		1			
Commercial multiple peril	8,381,643	(59)	8,381,584		1			1
Mortgage guaranty					1			
8. Ocean marine					1		1	1
9. Inland marine	207,385		207,385		1			
10. Financial guaranty					1			
11.1 Medical professional liability—occurrence					1			
11.2 Medical professional liability—claims-made					1			
12. Earthquake					1			
13. Group accident and health					1			
14. Credit accident and health (group and individual)					1			
15. Other accident and health					1			
16. Workers' compensation	145,812,629	7.465.525	153,278,154		1			
17.1 Other liability—occurrence	47,351		47,351		1			
17.2 Other liability—claims-made					1			
17.3 Excess Workers' Compensation					1			
18.1 Products liability—occurrence	77,151		77,151		1			
18.2 Products liability—claims-made					1			
19.1,19.2 Private passenger auto liability	17,581,283	9.000	17,590,283					
19.3,19.4 Commercial auto liability	2,550,557		2,550,557					
21. Auto physical damage	10,034,999		10,034,999					
22. Aircraft (all perils)			10,004,300					
23. Fidelity								
24. Surety								
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty					1			
31. Reinsurance-Nonproportional Assumed Property	XXX				· · · · · · · · · · · · · · · · · · ·			
32. Reinsurance-Nonproportional Assumed Liability	XXX				<b> </b>			
33. Reinsurance-Nonproportional Assumed Financial Lines	XXX							
34. Aggregate write-ins for other lines of business					· · · · · · · · · · · · · · · · · · ·			
35. TOTALS	192,149,644	7,474,466	199,624,110		+			
00. 10 IALO	132,143,044	1,400	100,024,110					-
DETAILS OF WRITE-IN LINES					<u> </u>			
0.101								

DETAILS OF WRITE-IN LINES				
3401. 3402.		 	 	 
3403.	 	 	 	 
3498. Sum. of remaining write-ins for Line 34 from overflow page 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)				

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

		Reported	Losses		In	curred But Not Reported		8	9	
	1	2	3 Deduct	4	5	6	7			
Line of Business	Direct	Reinsurance Assumed	Reinsurance Recoverable from Authorized and Unauthorized Companies	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses	
1. Fire	22,500		22,500		7,790		7,790			
Allied lines     Farmowners multiple peril					4,038		4,038			
Homeowners multiple peril     Commercial multiple peril	5,462,077 8,854,991	3,000	5,465,077 8,861,283		452,061 6,602,895	77.307	452,061 6,680,202			
Mortgage guaranty     Ocean marine										
9. Inland marine	15,500		15,500		15,812		15,812			
Financial guaranty     Medical professional liablity—occurrence										
11.2 Medical professional liablity—claims-made 12. Earthquake										
Group accident and health     Credit accident and health (group and individual)								(a)		
15. Other accident and health 16. Workers' compensation	599,367,243	29,263,735	628,630,978		295,464,613	19,784,962	315,249,575	(a)		
17.1 Other liability—occurrence 17.2 Other liability—claims-made	1,323,399		1,323,399		2,718,111	77,307	2,795,418			
17.3 Excess Workers' Compensation	40,998		40.998		112,106		112,106			
18.1 Products liability—occurrence 18.2 Products liability—claims-made										
19.1,19.2 Private passenger auto liability 19.3,19.4 Commercial auto liability	19,552,360 4,367,300	1,343	19,553,703 4,367,300		4,408,610 2,347,284		4,408,610 2,347,284			
21. Auto physical damage 22. Aircraft (all perils)	858,956		858,956		416,066		416,066			
23. Fidelity 24. Surety										
26. Burglary and theft 27. Boiler and machinery	105,526		105,526							
28. Credit 29. International										
30. Warranty 31. Reinsurance-Nonproportional Assumed Property	XXX				XXX					
Reinsurance-Nonproportional Assumed Liability     Reinsurance-Nonproportional Assumed Financial Lines     Aggregate write-ins for other lines of business	XXX XXX				XXX					
35. TÖTALS	639,970,850	29,274,370	669,245,220		312,549,386	19,939,576	332,488,962			
DETAILS OF WRITE-IN LINES								,		
3401.										
3402. 3403.										
3498. Sum. of remaining write-ins for Line 34 from overflow page 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)										

(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	22,196,696			22,196,696
	1.2 Reinsurance assumed	000 504			338,594
	1.3 Reinsurance ceded	00 505 000			22,535,290
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)				
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent		24,369,377		24,369,377
	2.2 Reinsurance assumed, excluding contingent		4,046,876		4,046,876
	2.3 Reinsurance ceded, excluding contingent				28,416,253
	2.4 Contingent—direct		1,780,978		1,780,978
	2.5 Contingent—reinsurance assumed		(1,973)		(1,973)
	2.6 Contingent—reinsurance ceded		1,779,005		1,779,005
	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			104	104
5.	Boards, bureaus and associations				
6.	Surveys and underwriting reports			107	107
7.	Audit of assureds' records				
8.	Salary and related items:				
	8.1 Salaries			19,401	19,401
	8.2 Payroll taxes			1,110	1,110
9.	Employee relations and welfare			1,076	1,076
	Insurance			225	225
11.	Directors' fees				
12.	Travel and travel items			354	354
	Rent and rent items			352	352
14.	Equipment			311	311
15.	Cost or depreciation of EDP equipment and software			159	159
	Die 140			51	51
17.	Postage, telephone and telegraph, exchange and express			639	639
18.	Legal and auditing			640	640
19.	Totals (Lines 3 to 18)			24,532	24,532
20.	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty				
	association credits of \$ 0				
	20.2 Insurance department licenses and fees				
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)				
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
21.	Real estate expenses				
	Real estate taxes				
	Reimbursements by uninsured plans				
24.	Aggregate write-ins for miscellaneous expenses			3,480	3,480
25.				28,012	(a) 28,012
26.	Less unpaid expenses—current year				
	Add unpaid expenses—prior year				
	Amounts receivable relating to uninsured plans, prior year				
	Amounts receivable relating to uninsured plans, current year				
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			28,012	28,012

DETAILS OF WRITE-IN LINES			
2401. Other Expenses		3,480	3,480
2402.	 		
2403.	 		
2498. Sum of remaining write-ins for Line 24 from overflow page			
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)		3,480	3,480

<sup>(</sup>a) Includes management fees of \$ 28,012 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) 898,265	894,779
1.1	Bonds exempt from U.S. tax	(a) 571,178	568,278
1.2	Other bonds (unaffiliated)	(a) 2,222,506	2,127,328
1.3	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		
3.	Mortgage loans	(c)	
4.	Real estate	(d)	1
5.	Contract loans		1
6.	Cash, cash equivalents and short-term investments	(e) 73,093	60,211
7.	Derivative instruments	(f)	1
8.	Other invested assets	1,020,000	
9.	Aggregate write-ins for investment income	114,423	114,423
10.	Total gross investment income	4,899,465	4,785,019
11.	Investment expenses		(g) 28,011
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		1
16.	Total deductions (Lines 11 through 15)		28,011
17.	Net investment income (Line 10 minus Line 16)		4,757,008

	DETAILS OF WRITE-IN LINES		
0901.	Miscellaneous Income/ (Expense)	114,423	114,423
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)	114,423	114,423
1501.			
1502.	NONE		
1503.	NUINE		
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 through 1503) plus 1598 (Line 15 above)		

(a) (b)	Includes \$	33,454 accrual of discount less \$ 0 accrual of discount less \$	106,083 amortization of premium and less \$ 0 amortization of premium and less \$	3,709 paid for accrued interest on purchases.  0 paid for accrued dividends on purchases.
(c)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(d)	Includes \$	0 for company's occupancy of its ov	wn buildings; and excludes \$ 0 into	erest on encumbrances.
(e)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(f)	Includes \$	0 accrual of discount less \$	0 amortization of premium.	
(g)	Includes \$	0 investment expenses and \$	0 investment taxes, licenses and fees,	excluding federal income taxes,
	attributable to se	egregated and Separate Accounts.		
(h)	Includes \$	0 interest on surplus notes and \$	0 interest on capital notes.	
(i)	Includes \$	0 depreciation on real estate and \$	0 depreciation on other invested a	assets.

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

		1	2	3	4	5
		Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds					
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	335,198	(257,280)	77,918		
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)				4,607	
2.21	Common stocks of affiliates				(33,046)	
	Mortgage loans					
1	Real estate					
	Contract loans					
	Cash, cash equivalents and short-term investments					
7.	Derivative instruments					
8.	Other invested assets				(18,092)	
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	335,198	(257,280)	77,918	(46,531)	

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

# **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)
	Part (0-tad to P)			(
	Bonds (Schedule D)			
۷.	Stocks (Schedule D):			
	2.1 Preferred stocks 2.2 Common stocks		207 224	007 204
2			207,321	207,321
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens 3.2 Other than first liens			
1				
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	A 2 Provident held for rela			
_				
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2), and short-term			
•	investments (Schedule DA)			
	Other invested assets (Schedule BA)			
8.				
9.	Aggregate write-ins for invested assets		007.004	007.004
10.			207,321	207,321
13.	Premiums and considerations:			
	13.1 Uncollected premiums and agents' balances in the course of collection			
	13.2 Deferred premiums, agents' balances and installments booked but deferred			
	and not yet due			
	13.3 Accrued retrospective premiums			
14.	Reinsurance:			
	14.1 Amounts recoverable from reinsurers			
	14.2 Funds held by or deposited with reinsured companies			
	14.3 Other amounts receivable under reinsurance contracts			
	Amounts receivable relating to uninsured plans			
16.1	Current federal and foreign income tax recoverable and interest thereon			
	Net deferred tax asset	3,626,400	3,626,450	50
17.	Guaranty funds receivable or on deposit			
18.			1,232,667	1,232,667
19.	Furniture and equipment, including health care delivery assets	706,331	909,405	203,074
20.				
21.	Receivables from parent, subsidiaries and affiliates			
22.				
23.	Aggregate write-ins for other than invested assets			
24.	Total assets excluding Separate Accounts, Segregated Accounts and			
	Protected Cell Accounts (Lines 10 to 23)	4,332,731	5,975,843	1,643,112
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
26.	Total (Lines 24 and 25)	4,332,731	5,975,843	1,643,112

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

#### 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 Oregon, the accompanying financial statements of Liberty Northwest Insurance Corporation (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners ("NAIC") *Accounting Practices and Procedures Manual* ("APP Manual").

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

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

#### C. Accounting Policies

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

In addition, the Company uses the following accounting policies:

- Short term investments are carried at cost, adjusted where appropriate for amortization of premium or discount, or fair value as specified by the Purposes and Procedures Manual of the NAIC Securities Valuation Office (SVO Manual).
- 2. Bonds are carried at cost, adjusted where appropriate for amortization of premium or discount, or fair value as specified by the SVO Manual.
- 3. Common stocks are carried at fair value except that investments in stocks of subsidiaries, controlled and affiliated ("SCA") companies are carried according to Note 1 C(7).
- 4. The Company does not own preferred stocks.
- 5. The Company does not own mortgage loans.
- 6. Mortgage backed/asset backed securities are stated at amortized cost or fair value based on guidance in the SVO Manual. Prepayment assumptions for mortgage backed/asset backed securities are updated monthly using the Bloomberg data service. The retrospective adjustment method is used to value all mortgage backed/asset backed securities.
- 7. The Company carries its investments in SCA companies in accordance with SSAP No. 97, Investment in Subsidiaries, Controlled Entities and Affiliates, and the SVO Manual. Schedule D Part 6-Section 1 illustrates the valuation method used for each SCA company.
- 8. Investments in joint ventures, partnerships, and limited liability companies are carried in accordance with SSAP No. 48, Joint Ventures, Partnerships and Limited Liability Companies, and the SVO Manual.
- 9. Derivative Securities, refer to Note 8.Refer to Note 29.
- 10. 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.
- 11. The Company did not change its capitalization policy in 2009.
- 12. The Company has no pharmaceutical rebate receivables.

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

Effective December 31, 2009, the Company elected to admit Deferred Tax Assets (DTA's) pursuant to SSAP No. 10R, Income Taxes-Revised, a temporary replacement of SSAP No. 10. The change in DTA's resulting from adopting SSAP No. 10R, is disclosed as an aggregate write-in for gains and losses in surplus under the caption increase in SSAP 10R incremental change. (Refer to Note 9.A)

#### Note 3- Business Combinations and Goodwill

A. Statutory Purchase Method:

				Unamortized	Goodwill
Acquired Company	Date of Acquisition	% Ownership	Cost	Goodwill	<b>Amortization</b>
				December 31, 2009	Current Year
Oregon Auto Insurance Company	January 1, 2002	100.00%	\$9,000,000	\$540,000	\$270,000
North Pacific Insurance Company	January 1, 2002	100.00%	\$9,000,000	\$540,000	\$270,000

B. Statutory Mergers

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

C. Impairment Loss

Not applicable

#### **Note 4- Discontinued Operations**

The Company has no discontinued operations to report.

#### Note 5- Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company does not invest in Mortgage Loans.

B. Troubled Debt Restructuring for Creditors

Not applicable

C. Reverse Mortgages

Not applicable

- D. Loan-Backed Securities
  - 1. Not used.
  - 2. Prepayment speed assumptions are updated monthly with data sourced from the Bloomberg data service.
  - 3. Not used.
  - 4. All Loaned Backed Securities with a recognized other-than-temporary impairment disclosed in the aggregate during 2009 as of December 31, 2009: None
  - Each Loaned Backed Security with a recognized other-than-temporary impairment held by the company at December 31, 2009: None
  - 6. All impaired Loaned Backed Securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss as of December 31, 2009

	1	2
	Less Than 12 Months	Greater Than 12 Months
Gross Unrealized Loss	(4.690)	(246,547)

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

- a) For loaned securities, Company policies require a minimum of 102% of the fair value of securities loaned to be maintained as collateral.
- b) The Company has not pledged any of its assets as collateral.
- Aggregate amount of contractually obligated open collateral positions for which the borrower may request the return of on demand:

	Under 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Total
Fair value of open reinvested collateral positions	211,704	223,866	183,803	87,344	706,717

4. Sources of collateral are cash and securities. Cash collateral is reinvested by the lending agent in short-term securities. The Company does not reinvest securities received as collateral.

#### F. Real Estate

The Company does not own real estate.

G. Investments in Low-Income Housing Tax Credits

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

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

- A. The Company has no investments in joint ventures, partnerships, or limited liability companies that exceed 10% of its admitted assets.
- B. The Company invests in limited partnerships that are reported in accordance with SSAP No. 48. These limited partnerships are valued by the equity method using traditional private equity valuation measures. Interim poor performance which indicates a probable inability to recover the carrying amount of the assets leads to impairment losses being recognized by management. The Company did not realize any impairment losses during the year.

#### Note 7- Investment Income

A. Accrued Investment Income

The Company does not admit investment income due and accrued if amounts are over 90 days past due.

B. Amounts Nonadmitted

Not applicable

## **Note 8- Derivative Instruments**

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

#### Note 9 - Income Taxes

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

	December 31, 2009			December 31, 2008	Change
	Ordinary	Ordinary Capital Total		Total	
Total gross DTAs	4,519,157	1,695,883	6,215,040	7,543,000	(1,327,960)
Total gross DTLs	(530,476)	(1,901,714)	(2,432,190)	(1,903,000)	(529,190)
Net DTA (DTL)	3,988,681	(205,831)	3,782,850	5,640,000	(1,857,150)
Net DTA non-admitted			(3,626,400)	(3,626,000)	(400)
Net Admitted DTA (DTL)			156,450	2,014,000	(1,857,550)

The Company has elected to admit additional DTAs pursuant to SSAP No. 10R, paragraph 10e. The current period election was not available at December 31, 2008. A statutory valuation allowance adjustment, as described in SSAP No. 10R, paragraph 6e, is not required. Accordingly, total adjusted gross DTAs equal total gross DTAs.

The increased amount, by tax character, of net admitted DTAs resulting from paragraph 10e:

Ordinary	42,102
Capital	0
Total increase in net admitted DTAs	42.102

The amount of each result or component of the calculation, by tax character, of paragraphs 10a., 10bi., 10bii., 10c.:

	De	ecember 31, 200	December 31, 2008	
	Ordinary	Capital	Total	Total
Recoverable through loss carrybacks (10a.)	21,000	0	21,000	1,805,000
Lesser of:				
Expected to be recognized within one year (10bi.)	0	93,348	93,348	209,000
10% of adjusted capital and surplus (10bii.)			8,722,458	8,149,000
Adj. gross DTAs offset against existing DTLs (10c.)	530,476	1,901,714	2,432,190	1,903,000

The amount of each result or component of the calculation, by tax character, of paragraphs 10ei., 10eiia., 10eiib., and 10eiii.:

	December 31, 2009		
	Ordinary	Capital	Total
Recoverable through loss carrybacks (10ei.)	42,000	0	42,000
Lesser of:			
Expected to be recognized within three years (10eiia.)	21,102	93,348	114,450
15% of adjusted capital and surplus (10eiib.)			13,083,687
Adj. gross DTAs offset against existing DTLs (10eiii.)	530,476	1,901,714	2,432,190

Risk-based capital level used in paragraph 10d:	December 31, 2009
Total adjusted capital	88,667,964
Authorized control level	5,715,121

The following amounts result from the calculation in paragraphs 10a., 10b., and 10c.:

	December 31, 2009
Admitted DTA	114,348
Admitted assets	149,235,371
Statutory surplus	88,667,964
Total adjust capital	88,667,964

Admitted DTAs, admitted assets and statutory surplus increased by \$42,102 resulting from the use of paragraph 10e.

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

	2009	2008
Federal	437,629	1,697,045
Foreign		
Realized capital gains	27,271	(139,145)
Federal and foreign income taxes incurred	464,900	1,557,900

The Company's DTAs and DTLs result primarily from capital loss limitation, proforma acquisition costs, income/loss from partnerships, deferred intercompany transactions, and unrealized gains/losses.

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

	2009
Change in net deferred income tax (without unrealized gain or loss)	(1,861,870)
Change in tax effect of unrealized (gains) losses	4,720
Total change in net deferred income tax	(1,857,150)

- D. Effective tax rates differ from the current statutory rate of 35% principally due to the effects of tax-exempt interest, goodwill, intercompany transactions, permanent impairments and other investment activity.
- E. The amount of Federal income taxes incurred and available for recoupment in the event of future losses is \$1,313,900 from the current year and \$674,450 from the preceding year.

At December 31, 2009, the Company did not have any unused net operating loss carryforwards available to offset against future net income.

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

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

Access Insurance Services, Co. AMBCO Capital Corporation America First Insurance Company America First Lloyds Insurance Company American Ambassador Casualty Company

(merged 10/21/2009)

American Economy Insurance Company
American Fire & Casualty Company
American States Insurance Company
American States Insurance Company of Texas

American States Lloyds Insurance Company American States Preferred Insurance Company

Avomark Insurance Company

Barrier Ridge LLC

Berkeley Holding Company Associates, Inc. Berkeley Management Corporation Bridgefield Casualty Insurance Company Bridgefield Employers Insurance Company

Capitol Court Corporation

Capitol Agency, Inc., The (Arizona corporation) Capitol Agency, Inc., The (Ohio corporation) Capitol Agency, Inc., The (Tennessee corporation)

Cascade Disability Management, Inc.
Colorado Casualty Insurance Company
Commercial Aviation Insurance, Inc.
Companies Agency of New York, Inc.
Companies Agency of Pennsylvania, Inc.
Consolidated Insurance Company
Copley Venture Capital, Inc.
Diversified Settlements, Inc.

Emerald City Insurance Agency, Inc. Employers Insurance Company of Wausau Excelsior Insurance Company

F.B. Beattie & Company, Inc.

First National Insurance Company of America

First State Agency Inc.
Florida State Agency, Inc.
General America Corporation
General America Corporation of Texas
General Insurance Company of America

Globe American Casualty Company (merged 12/30/2009)

Golden Eagle Insurance Corporation

Gulf States AIF, Inc.

Hawkeye-Security Insurance Company Heritage-Summit HealthCare, Inc. Indiana Insurance Company Insurance Company of Illinois

LEXCO Limited

Liberty - USA Corporation Liberty Assignment Corporation Liberty Energy Canada, Inc. Liberty Financial Services, Inc. Liberty Hospitality Group, Inc.

Liberty Insurance Company of America (merged 9/17/2009)

Liberty Insurance Corporation

SCIT. Inc.

St. James Insurance Company Ltd. State Agency, Inc. (Indiana corporation) State Agency, Inc. (Wisconsin corporation)

Summit Consulting, Inc.

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

The National Corporation

The Netherlands Insurance Company

Liberty Insurance Holdings, Inc. Liberty Insurance Underwriters, Inc. Liberty International Europe Inc.\* Liberty International Holdings Inc.

Liberty Life Assurance Company of Boston

Liberty Life Holdings, Inc.

Liberty Lloyds of Texas Insurance Company

Liberty Management Services, Inc. Liberty Mexico Holdings, Inc. Liberty Mutual Fire Insurance Company

Liberty Mutual Group Inc.

Liberty Mutual Holding Company Inc. Liberty Mutual Insurance Company Liberty Mutual Personal Insurance Company Liberty Northwest Insurance Corporation Liberty Personal Insurance Company Liberty RE (Bermuda) Limited

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

LIH U.S. P&C Corporation
LIH-RE of America Corporation
LIU Specialty Insurance Agency Inc.
LM General Insurance Company
LM Insurance Corporation
LM Personal Insurance Company

LM Property & Casualty Insurance Company

LMHC Massachusetts Holdings Inc.

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

Mid-American Fire & Casualty Company
North Pacific Insurance Company

North Pacific Insurance Company

OCASCO Budget, Inc. OCI Printing, Inc. Ohio Casualty Corporation

Ohio Casualty of New Jersey, Inc. (merged 9/30/2009)

Ohio Security Insurance Company

Open Seas Solutions, Inc.

Oregon Automobile Insurance Company Peerless Indemnity Insurance Company

Peerless Insurance Company Pilot Insurance Services, Inc. Rianoc Research Corporation

S.C. Bellevue, Inc. Safecare Company, Inc. Safeco Corporation Safeco General Agency, Inc.

Safeco Insurance Company of America Safeco Insurance Company of Illinois Safeco Insurance Company of Indiana Safeco Insurance Company of Oregon Safeco Lloyds Insurance Company Safeco National Insurance Company

Safeco Properties, Inc.

Safeco Surplus Lines Insurance Company

San Diego Insurance Company
The Ohio Casualty Insurance Company
The Ohio Life Brokerage Services, Inc.
Wausau Business Insurance Company
Wausau General Insurance Company
Wausau Service Corporation

(dissolved 10/21/2009)

Wausau Underwriters Insurance Company West American Insurance Company

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

<sup>\*</sup> This company joined the consolidated group in 2009 and its activity from the date it joined the group is included in the consolidated return.

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

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

- A. All of the outstanding shares of capital stock of the Company are held by Peerless Insurance Company ("PIC"), a New Hampshire insurance company. PIC is wholly owned by LIH US P&C Corporation, an insurance holding company incorporated in Delaware. LIH US P&C Corporation is wholly owned by Liberty Insurance Holdings, Inc., an insurance holding company incorporated in Delaware. Liberty Insurance Holdings, Inc. is owned by Liberty Mutual Insurance Company ("LMIC" 93%), a Massachusetts insurance company; Liberty Mutual Fire Insurance Company ("LMFIC" 4%), a Wisconsin insurance company; and Employers Insurance Company of Wausau ("EICOW" 3%), a Wisconsin insurance company. The ultimate parent of LMIC, LMFIC and EICOW is Liberty Mutual Holding Company Inc., a Massachusetts company.
- B. Transactions entered into by the Company with its affiliates are described on Schedule Y Part 2.
- C. Refer to Notes 10F, 22 and 25.
- D. At December 31, 2009, the Company reported \$5,980,622 due to affiliates. In general, the terms of the inter-company arrangements require settlement at least quarterly.
- E. The Company has made no guarantee or initiated an undertaking for the benefit of affiliates that result in a material contingent exposure of the Company's or affiliates' assets or liabilities.
- F. Refer to Note 25 for information regarding the Inter-Company 100% Quota Share Reinsurance Agreement.

The Company is a party to a services agreement (the "Agreement") with PIC and other affiliates. The Agreement allows PIC to provide services related to common management function including, but not limited to, coordinating marketing and advertising, information systems support, payroll and human resource services, actuarial support, accounting and other financial services, as well as consulting and other services as the parties may request.

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

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

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

The Company is a party to a revolving credit agreement under which the Company may borrow up to \$50,000,000 from LMIC. The purpose of the extension of credit is for operating liquidity to accommodate fluctuations in daily cash flow and to promote efficient management of investments. As of December 31, 2009, there have been no drawings under this agreement.

The Company is a party to a memorandum of understanding with LMIC whereby LMIC provides information technology infrastructure, payroll, administrative and other ancillary services to the Company. The Company provides similar services to North Pacific Insurance Company and Oregon Automobile Insurance Company under separate, but identical, memoranda of understanding.

- G. The Company is part of a holding company structure as illustrated in Schedule Y Part 1.
- H. The Company does not own shares of any upstream intermediate or ultimate parent, either directly or indirectly via a downstream subsidiary, controlled or affiliated company.
- I. The Company has no investment in a subsidiary, controlled or affiliated companies which exceeded 10% of its admitted assets.

The Company did not change the valuation method of its subsidiaries, controlled and affiliated entities.

J. Impairment of subsidiaries

The Company did not recognize any impairment write down for its subsidiary, controlled, or affiliated companies during this statement period.

- K. The Company does not hold investments in foreign subsidiaries.
- L. The Company does not hold investments in downstream holding companies.

#### Note 11- Debt

A. Capital Notes

Not applicable

B. The Company has not entered into Federal Home Loan Bank Agreements.

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

The Company's eligible direct employees are included in the U.S. Liberty Mutual Retirement Benefit Plan, which is a defined benefit plan; the Supplemental Income at Retirement Plan, which has both a defined benefit component and a defined contribution component; and the Thrift Incentive Plan, which is a defined contribution plan. The Company's post retirement health and life insurance benefit obligations were transferred to the Liberty Mutual Group Inc ("LMGI") post retirement health and life insurance plan, effective January 1, 2006, the Company's eligible direct employees are included in the Liberty postretirement health and life insurance benefit plans. Each of these plans is sponsored by the holding company, LMGI. Accordingly, these plans' assets and obligations are not disclosed in this note. The costs for these plans are allocated by LMGI to LMIC pursuant to an Employee Benefit Plans Cost Sharing Agreement. The costs are allocated to the Company, pursuant to the management services agreement Described in Note 10 F.

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

1 Common Stock

The Company has 1,000,000 shares authorized, issued and outstanding as of December 31, 2009. All shares have a stated par value of \$3.

2. Preferred Stock

Not applicable

3. Dividend Restrictions

Not applicable

- 4. The Company did not pay a dividend to its parent during 2009.
- 5. The maximum amount of dividends that can be paid by Oregon-domiciled insurance companies to shareholders without prior approval of the Insurance Commissioner is 10% of surplus, subject to the availability of accumulated undistributed earnings. The maximum dividend payout that may be made without prior approval in 2010 is \$8,871,007.
- 6. The Company does not have restricted unassigned surplus.
- 7. The Company had no advances to surplus.
- 8. The Company did not hold stock for special purposes.
- 9. At December 31, 2009, the Company recorded special surplus funds of \$42,102 resulting from the increase in admitted adjusted gross Deferred Tax Assets, due to applying the revised guidance in SSAP No. 10R, Income Taxes.
- 10. The portion of unassigned funds (surplus) represented by cumulative unrealized gains is \$5,800,093 after applicable deferred taxes of (\$1,901,714).
- 11. Surplus Notes

Not applicable

12. Quasi re-organization (dollar impact)

Not applicable

13. Quasi re-organization (effective date)

Not applicable

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

A. Contingent Commitments

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

#### B. Assessments

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

As a result of an inter-company reinsurance arrangement (see Note 25), all guaranty fund and other assessments liabilities are ceded to Peerless Insurance Company.

#### C. Gain Contingencies

Not applicable

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

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

	Direct
Claims related ECO and bad faith losses paid during the reporting period	\$118,353

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

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

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

(f) Per Claim [x]

(g) Per Claimant []

#### E. All other Contingencies

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

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

#### Note 15- Leases

As a result of the Inter-Company 100% Quota Share Reinsurance Agreement with PIC (see Note 25), the Company has no net lease obligations.

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

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

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

#### A. Transfers of Receivables reported as sales

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

#### B. Transfers and servicing of financial assets

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

At December 31, 2009 the total fair value of securities on loan was \$2,190,809 with corresponding collateral value of \$2,251,202 of which \$706,717 represents cash collateral.

C. Wash Sales

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

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

A. Administrative Services Only (ASO) Plans

Not applicable

B. Administrative Services Contract (ASC) Plans

Not applicable

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contracts

Not applicable

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

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

#### Note 20- Other Items

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

Not applicable

- C. Other Disclosures
  - 1) Assets in the amount of \$31,413,506 and \$18,288,426 as of December 31, 2009 and 2008, respectively, were on deposit with government authorities or trustees as required by law.
  - 2) Interrogatory 6.1

In 2009, the Company ceded 100% of its business to Peerless Insurance Company and had the benefit of Workers' Compensation Catastrophe reinsurance with limits of \$1,038,000 part of \$1,175,000 xs \$25,000,000 purchased by Peerless Insurance Company individually or with affiliates within the Liberty Mutual Group covering workers' compensation business ceded to Peerless Insurance Company.

Interrogatory 6.3

As a member of the inter-company pooling arrangement in which Peerless Insurance Company is the lead company, the Company has the benefit of \$825,000,000 xs \$500,000,000 of traditional XOL reinsurance covering its business ceded to the pool. In December 2008, Peerless Insurance Company purchased a 31.725% QS treaty for its direct and assumed from affiliates US Homeowners portfolio, which includes business assumed from the Company.

- D. As a result of the Inter-Company 100% Quota Share Reinsurance Agreement with PIC (see Note 25), the Company has no net exposure to uncollectible premium receivable balances.
- E. Business Interruption Insurance Recoveries

The Company does not purchase business interruption coverage.

F. State Transferable Tax Credits

The Company does not hold state transferable tax credits.

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

## Note 21- Events Subsequent

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

There were no events subsequent to December 31, 2009 that would require disclosure.

#### Note 22- Reinsurance

A. Excluding amounts arising pursuant to the Inter-Company 100% Quota Share Reinsurance Agreement, as described in Note 25, the unsecured reinsurance recoverables with an individual reinsurer that exceed 3% of policyholder's surplus are listed below

<u>Reinsurer</u>	NAIC Co.	Fed ID#	Recoverable Amount
National Workers Comp Assigned	00000	AA-1127400	\$102,359,199
Risk Pool			
National Union Fire Ins Company	19445	25-0687550	20,680,312
Federal Insurance Company	20281	13-1963496	21,176,886
Everest Reinsurance Company	26921	22-2005057	18,108,426
Insurance Company of North America	22713	23-0723970	5,233,314

- B. There are no reinsurance recoverables in dispute from an individual reinsurer which exceed 5% of the Company's surplus. In addition, the aggregate reinsurance recoverables in dispute do not exceed 10% of the Company's surplus.
- C. Reinsurance Assumed & Ceded
  - 1. The following table sets forth the maximum return premium and commission equity due the reinsurer or the Company if all of the Company's assumed and ceded reinsurance were canceled as of December 31, 2009.

	<b>Assumed Reinsurance</b>		<b>Ceded Reinsurance</b>		Net Rein	Net Reinsurance	
	UEP	Commission Equity	UEP	Commission Equity	UEP	Commission Equity	
Affiliates	1,740,026	471,547	41,252,038	5,775,285	(39,512,012)	(5,303,738)	
All Other	1,284,416	553,206	1,636,784	485,380	(352,368)	67,826	
Total	3,024,442	1,024,753	42,888,822	6,260,665	(39,864,380)	(5,235,912)	

Direct Unearned Premium Reserve of \$39,864,380

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

Direct	\$1,809,424
Assumed	0
Ceded	(1,809,424)
Net	\$0

- 3. The Company does not use protected cells as an alternative to traditional reinsurance.
- D. The Company did not write off any uncollectible balances in 2009.
- E. The Company did not commute any reinsurance treaties in the current year.
- F. The Company does not have any retroactive reinsurance agreements.
- G. The Company has not entered into any deposit type agreements as of December 31, 2009.

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

The Company does not have net accrued retrospective premiums.

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

As a result of the Inter-Company 100% Quota Share Reinsurance Agreement with PIC (see Note 25), the Company has no net exposure to changes in incurred losses and loss adjustment expenses.

#### Note 25- Intercompany Pooling Arrangements

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

### **Note 26- Structured Settlements**

- A. As a result of the Inter-Company 100% Quota Share Reinsurance Agreement with PIC (see Note 25), the Company has no net exposure to contingent liabilities from the purchase of annuities.
- B. Not applicable

#### Note 27 - Health Care Receivables

Not applicable

#### **Note 28 - Participating Policies**

Not applicable

#### <u>Note 29 – Premium Deficiency Reserves</u>

As of December 31, 2009, the Company had no liabilities related to premium deficiency reserves.

#### Note 30- High Dollar Deductible Policies

Not applicable.

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

As a result of the Inter-Company 100% Quota Share Reinsurance Agreement with PIC (see Note 25), the Company has no net loss and loss adjustment expense reserves.

#### Note 32 - Asbestos/Environmental Reserves

As a result of the Inter-Company 100% Quota Share Reinsurance Agreement with PIC (See Note 25), the Company has no net exposure to asbestos and environmental claims.

### Note 33- Subscriber Savings Accounts

The Company is not a reciprocal insurance company.

#### Note 34 - Multiple Peril Crop Insurance

Not applicable

### Note 35 - Financial Guarantee Insurance Contracts

Not applicable

## PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

	Is the reporting entity a member of an Insurance Holding Company System consistin persons, one or more of which is an insurer?	g of two or more affiliated	Yes [X]	No [ ]
	If yes, did the reporting entity register and file with its domiciliary State Insurance Cor Superintendent or with such regulatory official of the state of domicile of the principal System, a registration statement providing disclosure substantially similar to the stan Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Com and model regulations pertaining thereto, or is the reporting entity subject to standard substantially similar to those required by such Act and regulations?	insurer in the Holding Company dards adopted by the National apany System Regulatory Act	Yes [X]	No[] N/A[]
1.3	State Regulating?			Oregon
	Has any change been made during the year of this statement in the charter, by-laws, settlement of the reporting entity?	Yes[] <b>!</b>	No [X]	
2.2	If yes, date of change:			
3.1	State as of what date the latest financial examination of the reporting entity was mad	e or is being made.		12/31/2007
	State the as of date that the latest financial examination report became available from the reporting entity. This date should be the date of the examined balance sheet and completed or released.			12/31/2007
	State as of what date the latest financial examination report became available to other the state of domicile or the reporting entity. This is the release date or completion day not the date of the examination (balance sheet date).			02/09/2009
3.4	By what department or departments?  Oregon Department of Insurance			
	Have all financial statement adjustments within the latest financial examination repor	t been accounted for in a		
	subsequent financial statement filed with departments?			No[] N/A [X]
3.6	Have all of the recommendations within the latest financial examination report been of	complied with?	Yes [X]	No[] N/A []
	During the period covered by this statement, did any agent, broker, sales represental sales/service organization or any combination thereof under common control (other to reporting entity) receive credit or commissions for or control a substantial part (more of business measured on direct premiums) of:  4.11 sales of new 4.12 renewals?	than salaried employees of the than 20 percent of any major line ew business?	Yes[]	
	During the period covered by this statement, did any sales/service organization owner porting entity or an affiliate, receive credit or commissions for or control a substantial any major line of business measured on direct premiums) of:			
	4.21 sales of ne 4.22 renewals?		Yes[]1 Yes[]1	
5.1	Has the reporting entity been a party to a merger or consolidation during the period of	covered by this statement?	Yes[]1	No [X]
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (us any entity that has ceased to exist as a result of the merger or consolidation.	•	.,	
	1	2	3	
	Name of Entity	NAIC Company Code	State of Domicile	-
		00000 00000 00000		

Yes[]No[X]

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

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

1 Doe:	o, givo iun nino	rmation:						
1 Does								
	s any foreign (r	non-United States) person or entity directly or indi	rectly control 10% or more of the report	rting entity?		Yes	[ ] No[X]	l
2 If ye	s, 7.21 7.22	State the percentage of foreign control.  State the nationality(s) of the foreign persor reciprocal, the nationality of its manager or (e.g., individual, corporation, government, n	attorney-in-fact and identify the type of					
		1 Nationality		2 of Entity				
1 Is th	e company a s	ubsidiary of a bank holding company regulated b	y the Federal Reserve Board?			Yes	[ ] No[X]	I
If res	sponse to 8.1 is	s yes, please identify the name of the bank holdin	g company.					
3 Is th	e company affi	iliated with one or more banks, thrifts or securities	firms?			Yes	[ ] No[X]	
		1 Affiliate	2 Location	3	4	5	6	7
		Name	(City, State)	FRB	OCC	OTS	FDIC	SEC
cond Erns 200	at is the name a duct the annual of & Young, LLI Clarendon Stre ton, MA 02116	p eet	ecountant or accounting firm retained to					
	ociated with an ion/certification	AS, MAAA						
opin Willia 62 M	Naple Avenue l	Keene, NH 03431 hief Actuary of Liberty Mutual Agency Markets						
opin Willia 62 M Vice	Maple Avenue h President & C		company or otherwise hold real estate	indirectly?		Yes	[ ] No[X]	I
opin Willia 62 M Vice	Maple Avenue h President & C	hief Actuary of Liberty Mutual Agency Markets entity own any securities of a real estate holding	company or otherwise hold real estate	-		Yes	[ ] No[X]	l
opin Willia 62 M Vice	Maple Avenue h President & C	hief Actuary of Liberty Mutual Agency Markets entity own any securities of a real estate holding	11.11 Name of real estate holding com	npany		Yes	[ ] No[X]	l
asso opin Willia 62 M Vice	Maple Avenue & C	hief Actuary of Liberty Mutual Agency Markets entity own any securities of a real estate holding	11.11 Name of real estate holding com	npany		Yes	[ ] No[X]	l
asso opin Willia 62 M Vice	Maple Avenue h President & C	hief Actuary of Liberty Mutual Agency Markets entity own any securities of a real estate holding	11.11 Name of real estate holding com	npany		Yes	[ ] No[X]	l 

12.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:	
	What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?	
12.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on	
	risks wherever located?	Yes [ ] No [X]
12.3	Have there been any changes made to any of the trust indentures during the year?	Yes[] No[X]
12.4	If answer to (12.3) is yes, has the domiciliary or entry state approved the changes?	Yes[] No[] N/A [X]
13.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	
	<ul> <li>Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;</li> </ul>	
	<ul> <li>Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;</li> </ul>	
	c. Compliance with applicable governmental laws, rules, and regulations;	
	d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and	
	e. Accountability for adherence to the code.	Yes[X] No[]
3 11	If the response to 13.1 is no, please explain:	
0.11		
12.0	Lies the ends of athics for anxier managers have amended?	Ves [ ] Ne [ V ]
13.2	Has the code of ethics for senior managers been amended?	Yes[] No[X]
3.21	If the response to 13.2 is yes, provide information related to amendment(s).	
13.3	Have any provisions of the code of ethics been waived for any of the specified officers?	Yes[] No[X]
3 31	If the response to 13.3 is yes, provide the nature of any waiver(s).	
0.01	in the responde to 16.0 to yee, provide the nature of they waven(g).	
	BOARD OF DIRECTORS	
14.	Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a	
	subordinate committee thereof?	Yes[X] No[]
15.	Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all	VertVI Net 1
	subordinate committees thereof?	Yes [X] No []
16.	Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material	
	interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or	
	is likely to conflict with the official duties of such person?	Yes[X] No[]
	FINANCIAL	
17	Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g.,	
11.	Generally Accepted Accounting Principles)?	Yes[] No[X]
18.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):	
	18.11 To directors or other officers	\$
	18.12 To stockholders not officers 18.13 Trustees, supreme or grand (Fraternal only)	\$ \$
	10.10 Trustees, supreme or grand (Fraterial Only)	¥

18.2	Total amount of loans outstanding at the end of year (inclusive of Se	eparate Accounts, exclusive of policy loans):	
		18.21 To directors or other officers	\$0
		18.22 To stockholders not officers	\$0 \$0
		18.23 Trustees, supreme or grand (Fraternal only)	\$0
19.1	Were any assets reported in this statement subject to a contractual liability for such obligation being reported in the statement?	obligation to transfer to another party without the	Yes[] No[X]
19.2	If yes, state the amount thereof at December 31 of the current year:		
		19.21 Rented from others	\$0
		19.22 Borrowed from others	\$0
		19.23 Leased from others	\$0
		19.24 Other	\$0
20.1	Does this statement include payments for assessments as describe	d in the Annual Statement Instructions other than	
	guaranty fund or guaranty association assessments?		Yes[] No[X]
20.2	If answer is yes:		
		20.21 Amount paid as losses or risk adjustment	\$0
		20.22 Amount paid as expenses	\$0
	:	20.23 Other amounts paid	\$0
21.1	Does the reporting entity report any amounts due from parent, subsistatement?	idiaries or affiliates on Page 2 of this	Yes[X] No[]
04.0			
21.2	If yes, indicate any amounts receivable from parent included in the F	Page 2 amount:	\$0
		INVESTMENT	
22.1	Were all the stocks, bonds and other securities owned December 3 exclusive control, in the actual possession of the reporting entity on addressed in 22.3)		Yes[X] No[]
22.2	If no, give full and complete information relating thereto:		
22.3	For security lending programs, provide a description of the program securities, and whether collateral is carried on or off-balance sheet. information is also provided) Please reference Note 17B.	(an alternative is to reference Note 16 where this	
22.4	Does the company's security lending program meet the requirement Risk-Based Capital Instructions?	ts for a conforming program as outlined in the	Yes[X] No[] N/A[]
22.5	If answer to 22.4 is yes, report amount of collateral.		\$
22.6	If answer to 22.4 is no, report amount of collateral.		\$0
23.1	Were any of the stocks, bonds or other assets of the reporting entity exclusively under the control of the reporting entity or has the report a put option contract that is currently in force? (Exclude securities s	ing entity sold or transferred any assets subject to	Yes[X] No[]
23.2	If yes, state the amount thereof at December 31 of the current year:		
	23.2	1 Subject to repurchase agreements	\$0
	23.2		\$0
	23.2		\$0
	23.2		\$0
	23.2		\$0
	23.2		\$0
	23.2	7 Letter stock or securities restricted as to sale	\$0
	23.2	8 On deposit with state or other regulatory body	\$ 31,413,506
	23.2	9 Other	\$ 0

23.3 For category (23.27) provide the following:

1	2	3
Nature of Restriction	Description	Amount
		0
		0
		0

24.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes[]No[X]

24.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

Yes[] No[] N/A [X]

25.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes[]No[X]

25.2 If yes, state the amount thereof at December 31 of the current year.

0

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

Yes[X] No[]

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

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

26.02 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)

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

Yes[]No[X]

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

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

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

1	2	3
Central Registration Depository Number(s)	Name(s)	Address
N/A	Liberty Mutual Insurance Company	175 Berkeley St., Boston, MA 02116
N/A	Liberty Mutual Investment Advisors, LL	175 Berkeley St., Boston, MA 02116

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

Yes [ ] No [X]

27.2 If yes, complete the following schedule:

1	2	3
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value
		0
		0
		0
27.2999 TOTAL		0

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

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

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

	1	2	3
			Excess of Statement
			over Fair Value (-),
	Statement (Admitted)		or Fair Value over
	Value	Fair Value	Statement (+)
28.1 Bonds	70,293,992	73,187,013	2,893,021
28.2 Preferred stocks	0	0	0
28.3 Totals	70,293,992	73,187,013	2,893,021

	28.3 TOTAIS	70,293,992	73,187,013	2,893,021		
28.4	The primary source is published unteractive Data Corporation, fol	utilized in determining the fair values: unit prices from the NAIC Securities Valuation O owed by backfill from Bloomberg. Lastly, mar instruments or by using industry recognized v	agement determines fair valu			
29.1	Was the rate used to calculate fai	value determined by a broker or custodian for a	ny of the securities in Schedul	le D?	Yes[]No[X]	
29.2	If yes, does the reporting entity ha	ve a copy of the broker's or custodian's pricing p	oolicy (hard copy or electronic	сору)		
	for all brokers or custodians used	as a pricing source?			Yes[]No[X]	
29.3	If no, describe the reporting entity	s process for determining a reliable pricing source	ce for purposes of disclosure of	of		
	fair value for Schedule D:					
	price change and tolerance guide	methodology of its vendors on an annual basi elines. Vendor prices falling outside the guideli ined internally by the insurer are reviewed and	nes are furthered reviewed b	y management on a		
30 1	Have all the filing requirements of	the Purposes and Procedures Manual of the NA	JC Securities Valuation Office	been		
00.1	followed?	the range coo and recoodards mandares the ra-	no cocumico valdaton cinco	20011	Yes[X] No[]	
30.2	If no, list exceptions:					
		07	THER			
31.1	Amount of payments to Trade ass	ociations, service organizations and statistical or	Rating Bureaus, if any?		\$	0

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

1	2
Name	Amount Paid
	0
	0
	0

\$ 0

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

1	2
Name	Amount Paid
	0
	0
	0

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

		0
		U

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

1	2
Name	Amount Paid
	0
	0
	0

### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medical	re Supp	plement Insurance in force?	Yes[]No[X]
1.2	If yes, indicate premium earned on U.S. business	s only.		\$0
1.3	What portion of Item (1.2) is not reported on the I 1.31 Reason for excluding	Medica	re Supplement Insurance Experience Exhibit?	\$0
1.5	Indicate amount of earned premium attributable t Indicate total incurred claims on all Medicare Sup Individual policies:		dian and/or Other Alien not included in Item (1.2) above. nt insurance.	\$0 \$
		Most o	current three years:	
		1.61	Total premium earned	\$0 \$
		1.62 1.63	Total incurred claims  Number of covered lives	\$0
		1.00	Trainsor of octored five	
		All yea	ars prior to most current three years:	
		1.64	Total premium earned	\$0
		1.65 1.66	Total incurred claims  Number of covered lives	\$0
1.7	Group policies:	1.00	Number of covered lives	
		Most o	current three years:	
		1.71	Total premium earned	\$0
		1.72 1.73	Total incurred claims  Number of covered lives	\$0
		1.73	Number of covered lives	
		All yea	ars prior to most current three years:	
		1.74	Total premium earned	\$0
		1.75 1.76	Total incurred claims  Number of covered lives	\$0
2.	Health Test:	1.70	1 2	
			Current Year Prior Year	
		2.1	Premium Numerator \$ 0 \$ 0	
		2.2	Premium Denominator \$ 0 \$ 0	
		2.3 2.4	Premium Ratio (2.1/2.2)         0.00         0.00           Reserve Numerator         \$         0         \$	
		2.5	Reserve Denominator \$ 1,260,000 \$ 1,890,000	
		2.6	Reserve Ratio (2.4/2.5) 0.00 0.00	
	Does the reporting entity issue both participating			Yes [X] No []
3.2	If yes, state the amount of calendar year premiur	ns writt	en on:	
		3.21	Participating policies	\$40,232,457_
		3.22	Non-participating policies	\$ 238,396,522
4.	For Mutual reporting entities and Reciprocal Excl	nanges	only:	
4.1	Does the reporting entity issue assessable policies	es?		Yes[]No[X]
4.2	Does the reporting entity issue non-assessable p	olicies		Yes[]No[X]
4.3	If assessable policies are issued, what is the exte	ent of th	ne contingent liability of the policyholders?	0_
4.4	Total amount of assessments paid or ordered to	be paid	during the year on deposit notes or contingent premiums.	\$0
5.	For Reciprocal Exchanges Only:			
5.1	Does the exchange appoint local agents?			Yes [ ] No [ X ]
5.2	If yes, is the commission paid:			
		5.21	Out of Attorney's-in-fact compensation	Yes [ ] No [ ] N/A [ X ]
		5.22	As a direct expense of the exchange	Yes[]No[]N/A[X]
			•	
5.3	What expenses of the Exchange are not paid out	of the	compensation of the Attorney-in-fact?	
5.4	Has any Attorney-in-fact compensation, continge	nt on fu	Iffillment of certain conditions, been deferred?	Yes[]No[X]
5.5	If yes, give full information			
	What provision has this reporting entity made to proper compensation contract issued without limit loss: See Note 20C	protect	itself from an excessive loss in the event of a catastrophe under a workers'	

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:  The Company employs industry recognized catastrophe modeling software to estimate the Probable Maximum Loss. For property exposures, we employ RiskLink v9.0 from RMS and AIR Clasic/2 v11.0. For WC, Liberty Mutual utilizes RiskLink v9.0 from RMS.		
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  See Note 20C		
6.4	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?	Yes [	X ] No [ ]
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss		
7 1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would		
7.1	limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes [	] No [ X ]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions.		0
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes [	] No [ X ]
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes [	] No [ X ]
8.2	If yes, give full information	103 [	140[X]
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;  (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;  (c) Aggregate stop loss reinsurance coverage;  (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;  (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or  (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement		
	to the ceding entity.	Yes [	] No [ X ]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:  (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or  (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes [	] No [ X ]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.		
9.4	Except for transactions meeting the requirements of paragraph 32 of SSAP No. 62, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes [	] No [ X ]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.		
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:		
	<ul><li>(a) The entity does not utilize reinsurance; or,</li><li>(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation</li></ul>	Yes [	] No [ X ]
	supplement; or	Yes [	] No [ X ]
	(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.	Yes [	] No [ X ]

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

10.	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?	Yes [ X ] No [ ] N/A [ ]
	Has the reporting entity guaranteed policies issued by any other entity and now in force: If yes, give full information	Yes[]No[X]
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 13.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:  12.11 Unpaid losses	\$ 0
	12.12 Unpaid underwriting expenses (including loss adjustment expenses)	\$
12.2	Of the amount on Line 13.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	\$0
12.3	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	Yes[]No[]N/A[X]
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement:  12.41 From  12.42 To	0.00
12.5	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?	Yes[]No[X]
12.6	If yes, state the amount thereof at December 31 of current year:  12.61 Letters of Credit  12.62 Collateral and other funds	\$0 \$
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	\$0
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?	Yes[]No[X]
13.3	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.	1
14.1	Is the company a cedant in a multiple cedant reinsurance contract?	Yes [X] No []
	If yes, please describe the method of allocating and recording reinsurance among the cedants:  Premiums and recoverables were allocated pursuant to the multiple cedant contract  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?	Yes[]No[X]
14.4	If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?	
		Yes [X] No []
14.5	If the answer to 14.4 is no, please explain:	
15.1	Has the reporting entity guaranteed any financed premium accounts?	Yes[]No[X]
15.2	If yes, give full information	
16.1	Does the reporting entity write any warranty business?  If yes, disclose the following information for each of the following types of warranty coverage:	Yes[]No[X]
	Direct Losses Direct Written Direct Premium Direct Premium Incurred Unpaid Premium Unearned Earned	
	16.11 Home       \$       0       \$	
	* Disclose type of coverage:	

## PART 2 – PROPERTY & CASUALTY INTERROGATORIES

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

# FIVE - YEAR HISTORICAL DATA

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

		1	2	3	4	5
		2009	2008	2007	2006	2005
2. 3. 4.	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	239,471,884 19,900,912 30,355,673	290,157,961 18,694,404 29,528,911	290,786,012 12,866,546 26,132,185	251,894,654 (6,603,698) (16,739,275) (3,145)	347,286,242 41,224,765 87,072,284 18,143
5. 6.	Nonproportional reinsurance lines (Lines 31, 32 & 33)  Total (Line 35)	289,728,469	338,381,276	329,784,743	228,548,536	475,601,434
8. 9.	Net Premiums Written (Page 8, Part 1B, Col. 6) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) Nonproportional reinsurance lines (Lines 31, 32 & 33)				(33,907,801) (15,087,418) (43,224,621) (3,417)	291,570,481 39,203,286 83,815,034 (74,384)
1	Total (Line 35)  Statement of Income (Page 4)				(92,223,257)	414,514,417
14. 15. 16.	Net underwriting gain (loss) (Line 8)  Net investment gain (loss) (Line 11)  Total other income (Line 15)  Dividends to policyholders (Line 17)	4,807,655 (20,752)	4,941,647 13,572	(164) 4,011,525 (235,913)	9,165,097	(20,353,818) 55,252,260 1,693,183 5,929,247
	Federal and foreign income taxes incurred (Line 19)	437,629	1,697,045	6,756,615	(56,139,703)	8,677,569
18.	Net income (Line 20)  Balance Sheet Lines (Pages 2 and 3)	4,349,274	3,258,174	(2,981,167)	65,304,800	21,984,809
1	Total admitted assets excluding protected cell business (Page 2, Line 24, Col. 3) Premiums and considerations (Page 2, Col. 3)	149,277,473	141,989,567	127,652,851	203,014,321	1,120,771,569
	<ul><li>20.1 In course of collection (Line 13.1)</li><li>20.2 Deferred and not yet due (Line 13.2)</li></ul>	1,278,000	1,917,958	2,001,115	4,296,878	48,038,163 10,039,803
21. 22.	20.3 Accrued retrospective premiums (Line 13.3)  Total liabilities excluding protected cell business (Page 3, Line 24)  Losses (Page 3, Line 1)	60,567,407	57,152,113	37,558,633	113,072,131	8,817,741 889,014,175 635,143,547
23.	Loss adjustment expenses (Page 3, Line 3)					81,402,284
24.	Unearned premiums (Page 3, Line 9)					92,223,257
25. 26.	Capital paid up (Page 3, Lines 28 & 29) Surplus as regards policyholders (Page 3, Line 35) Cash Flow (Page 5)	3,000,000 88,710,066	3,000,000 84,837,454	3,000,000 90,094,218	3,000,000 89,942,190	3,000,000 231,757,394
27.	Net cash from operations (Line 11)  Risk-Based Capital Analysis	1,388,150	(4,958,097)	(8,104,112)	(699,583,840)	107,824,087
28. 29.	Total adjusted capital Authorized control level risk-based capital  Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 10, Col. 3) x 100.0	88,710,066 5,716,152	84,837,454 4,635,806	90,094,218 4,633,777	89,942,190 6,725,204	231,757,394 42,300,699
30. 31.	Bonds (Line 1) Stocks (Lines 2.1 & 2.2)	73.7 16.9	78.6 16.2	82.1 18.4	50.5	92.2 4.9
32.	Mortgage loans on real estate (Lines 3.1 and 3.2)  Real estate (Lines 4.1, 4.2 & 4.3)					
34.	Cash, cash equivalents and short-term investments (Line 5)	3.5	(0.5)	(4.4)	33.6	0.7
35.	Contract loans (Line 6)					
36.	Other invested assets (Line 7)		5.8	3.8	4.2	2.2
37.	Receivables for securities (Line 8) Aggregate write-ins for invested assets (Line 9)			0.1	0.4	
•		100.0	100.0	100.0	100.0	100.0
40.	Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1)					
41. 42. 43.	Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)  Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)  Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)	15,878,339	15,911,385	17,050,712	15,738,368	15,840,000
44.						
45.	All other affiliated			47.050.710	45 700 000	45.040.000
46. 47.		15,878,339	15,911,385	17,050,712	15,738,368	15,840,000
Ь	regards policyholders (Line 46 above divided by Page 3, Col. 1, Line 35 x 100.0)	17.9	18.8	18.9	17.5	6.8

# FIVE - YEAR HISTORICAL DATA

(Continued)

		1	2	3	4	5
		2009	2008	2007	2006	2005
	Capital and Surplus Accounts (Page 4)					
48.	Net unrealized capital gains (losses) (Line 24)	(41,811)	370,777	517,282	(2,834,483)	(1,326,523
49. 50		2 070 640	(9,009,421)	150,000	(180,000,000)	06 722 02
50.	Change in surplus as regards policyholders for the year (Line 38)	3,872,612	(5,256,764)	152,028	(141,815,204)	26,733,03
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3,	173,543,496	165,939,859	164,384,259	217,032,131	188,634,52
52. 53.	Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	10,301,821 15,778,793	8,800,286 14,626,145	6,893,279 10,330,545	9,246,101 55,202,120	13,946,49 29,275,34
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)				964	
55. 56	Nonproportional reinsurance lines (Lines 31, 32 & 33)  Total (Line 35)	199,624,110	189.366.290	181,608,083	281,481,316	231,856,37
	Net Losses Paid (Page 9, Part 2, Col. 4)					
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3,				582,086,284	158,921,59
58. 59.	Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)				3,342,833 46,147,336	14,072,61 26,261,67
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)				1,202	
	Nonproportional reinsurance lines (Lines 31, 32 & 33) Total (Line 35)				631,577,655	199,255,88
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	
64. 65.	· · · · · · · · · · · · · · · · · · ·					70. 10.
66.	Other underwriting expenses incurred (Line 4)					23.
67.	Net underwriting gain (loss) (Line 8)					(5.
	Other Percentages					
68.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15					
69.	divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0  Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3					23.
	divided by Page 4, Line 1 x 100.0)					
70.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 35, Col. 1 x 100.0)				(102.5)	178.
	One Year Loss Development (000 omitted)				(102.0)	
74						
1.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)					31,39
72.	Percent of development of losses and loss expenses incurred to policyholders'					
	surplus of prior year end (Line 71 above divided by Page 4, Line 21, Col. 1 x 100.0)					15.
	Two Year Loss Development (000 omitted)					
73.	Development in estimated losses and loss expenses incurred 2 years before					
	the current year and prior year (Schedule P, Part 2-Summary, Line 12,					50.00
74.	Col. 12) Percent of development of losses and loss expenses incurred to reported					56,03
••	policyholders' surplus of second prior year end (Line 73 above divided					
	by Page 4, Line 21, Col. 2 x 100.0)					29.

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

# SCHEDULE P – ANALYSIS OF LOSSES AND LOSS EXPENSES SCHEDULE P – PART 1 – SUMMARY

(\$000 omitted)

	Pr	emiums Earne	d			Lo	oss and Loss E	xpense Payme	ents			12
Years in	1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	ayments	Containmer	t Payments	and Other	Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported -
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1-2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX	11,541	11,541	654	654					XXX
2. 2000	147,158	147,158		130,678	130,678	5,511	5,511	12,766	12,766			XXX
3. 2001	161,792	161,792		132,897	132,897	6,804	6,804	13,084	13,084			XXX
4. 2002	311,672	311,672		212,834	212,834	10,500	10,500	19,345	19,345			XXX
5. 2003	411,722	411,722		223,234	223,234	12,218	12,218	18,195	18,195			XXX
6. 2004	462,491	462,491		244,787	244,787	11,851	11,851	18,570	18,570			XXX
7. 2005	469,394	469,394		241,691	241,691	14,359	14,359	15,745	15,745			XXX
8. 2006	298,205	298,205		139,492	139,492	9,199	9,199	15,770	15,770			XXX
9. 2007	322,738	322,738		140,563	140,563	7,318	7,318	(3,025)	(3,025)			XXX
10. 2008	331,073	331,073		125,697	125,697	5,977	5,977	(1,002)	(1,002)			XXX
11. 2009	287,880	287,880		64,584	64,584	2,593	2,593	442	442			XXX
12. Totals	XXX	XXX	XXX	1,667,998	1,667,998	86,984	86,984	109,890	109,890			XXX

		Losses	Unpaid		Defen	se and Cost (	Containment U	Inpaid	Adjusting and		23	24	25
	Case E	Basis	Bulk +	IBNR	Case Basis E			Bulk + IBNR		Other Unpaid			Number of
	13	14	15	16	17	18	19	20	21	22		Total Net	Claims
											Salvage	Losses	Outstandin
	Direct		Direct		Direct		Direct		Direct		and	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	266,521	266,521	41,867	41,867	4,317	4,317	1,768	1,768	12,920	12,920			XXX
2. 2000	27,874	27,874	3,237	3,237	599	599	429	429	1,223	1,223			XXX
3. 2001	36,433	36,433	3,687	3,687	893	893	424	424	1,670	1,670			XXX
4. 2002	45,024	45,024	5,183	5,183	1,125	1,125	685	685	2,140	2,140			XXX
5. 2003	39,849	39,849	14,944	14,944	1,024	1,024	1,127	1,127	2,728	2,728			XXX
6. 2004	34,001	34,001	19,401	19,401	1,117	1,117	1,389	1,389	2,706	2,706			XXX
7. 2005	37,297	37,297	20,384	20,384	1,363	1,363	1,864	1,864	2,936	2,936			XXX
8. 2006	28,784	28,784	34,648	34,648	1,172	1,172	2,683	2,683	3,661	3,661			XXX
9. 2007	36,913	36,913	42,747	42,747	1,970	1,970	4,627	4,627	4,669	4,669	]		XXX
0. 2008	46,757	46,757	73,674	73,674	3,474	3,474	6,011	6,011	7,285	7,285			XXX
1. 2009	69,791	69,791	72,717	72,717	5,778	5,778	4,162	4,162	8,994	8,994			XXX
2. Totals	669,244	669,244	332,489	332,489	22,832	22,832	25,169	25,169	50,932	50,932			XXX

			otal Losses and Expenses Incu		Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabula	ar Discount	34 Inter-	Net Balance Sheet Reserves After Discount	
		26 Direct	27	28	29 Direct	30	31	32	33 Loss	Company Pooling Participation	35 Losses	36 Loss Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			xxx		
2.	2000	182,317	182,317		123.892	123.892						
3.	2001	195,892	195,892		121.076	121.076						
4.	2002	296,836	296,836		95.240	95.240						
5.	2003	313,319	313,319		76.100	76.100						
6.	2004	333,822	333,822		72.179	72.179						
7.	2005	335,639	335,639		71.505	71.505						
8.	2006	235,409	235,409		78.942	78.942						
9.	2007	235,782	235,782		73.057	73.057						
10.	2008	267,873	267,873		80.911	80.911						
11.	2009	229,061	229,061		79.568	79.568						
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** 

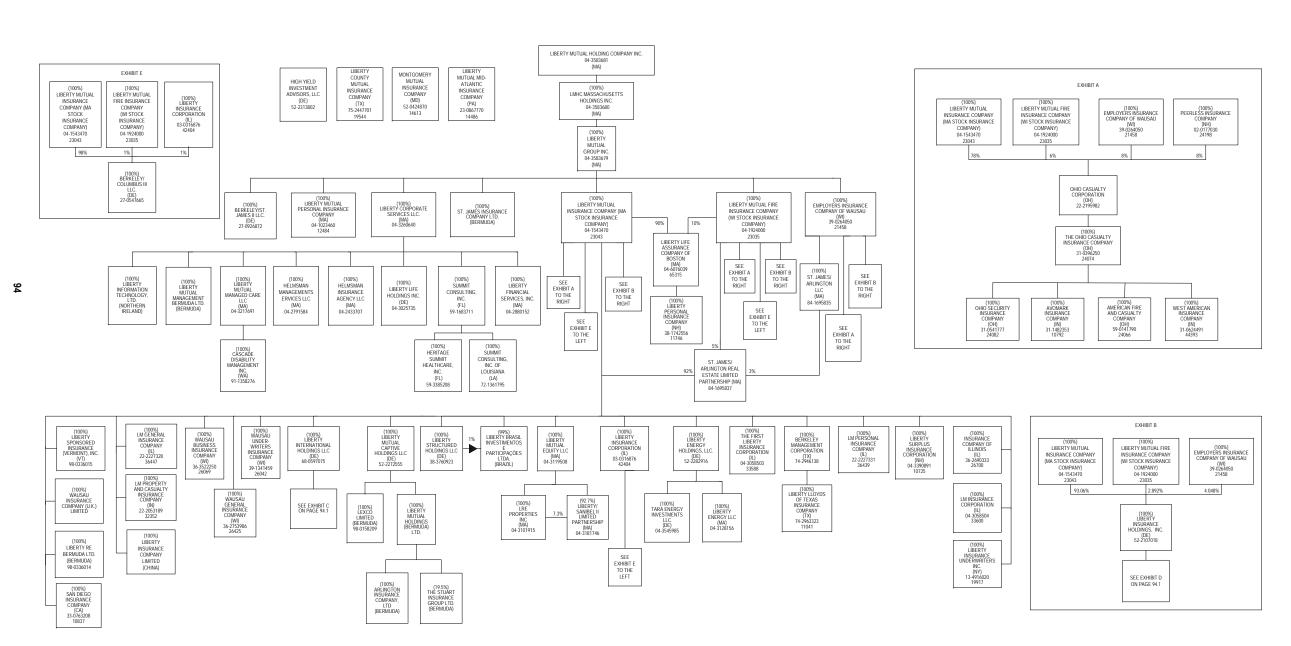
		1	Gross Premiums and Members Return Premium on Policies	hip Fees Less is and Premiums	4 Dividends Paid or Credited to	5 Direct Losses	6	7	8 Finance and Service	9 Direct Premium Written for Federal
	States, Etc.	Active Status	2 Direct Premiums Written	3 Direct Premiums Earned	Policyholders on Direct Business	Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Charges Not Included in Premiums	Purchasing Groups (Included in Col. 2)
	Alabama AL	. N								
2. 3.		L N	27,770,950	28,322,660		11,710,293	27,690,216	57,176,831		
4.	Arizona AZ Arkansas AR	<sup>IN</sup>								
5.		1:2:	9,638,037	9,417,774		6,109,564	4,049,938	15,646,235		
6.	Colorado CO	N								
7.	Connecticut CT	N	1							
8.	Delaware DE	. N								
9.	District of Columbia DC	. N								
10.		. N								
11. 12.	<u> </u>	N								
13.		'\\. 	45,424,899	45,610,429	2,232,025	31,412,662	52,335,589	120,423,710	1,656	
14.		N					92,000,000			
15.	Indiana IN	N	1					1	1	
16.	lowa IA	N	1							
17.		N	[							
18.		. N								
ı	Louisiana LA	. N								
20. 21.		. <u>N</u> .								
22.		<sup>N</sup>								
23.		N								
l	Minnesota MN	N								
25.	Mississippi MS	N						1::::::::::::::::::::::::::::::::::::::	1	1
26.		N							I	
27.		L L	35,114,152	32,266,138		23,430,192	64,436,013	167,559,281	242	
28.	Nebraska NE	. N								
29.	Nevada NV	N								
30. 31	New Hampshire NH New Jersey NJ	<sup>N</sup>								
32.		N N								
33.		N								
34.	North Carolina NC	N							I	
35.	North Dakota ND	. N								
36.	Ohio OH	N								
37.	Oklahoma OK Oregon OR	N	140.046.070	110 110 110	100.040	91,506,454	62 002 400	F06 706 907	7 424	
	Pennsylvania PA	Q	112,846,272	112,119,119	102,842	91,506,454	62,082,490	526,726,827	7,434	
40.		N N								
	South Carolina SC	N								
42.		N							1	
43.	Tennessee TN	N	1						I	
44.	Texas TX	N								
45.	Utah UT	L								
46.		. N								
	Virginia VA Washington WA	N	47,834,669	48,334,116		27,980,479	42,112,234	64,987,353	7,370	
	West Virginia WV	N	1,004,005	10,004,110		21,500,415	72,112,207	04,507,500	1	
l .	Wisconsin WI	N								
	Wyoming WY	L	1						1	1
52.	American Samoa AS	N	]							
	Guam GU	. N								
54.		. N								
•	U.S. Virgin Islands VI	N								
	Northern Mariana Islands MP Canada CN	N N								
	Aggregate Other Alien OT	XXX								
	Totals	(a) 9	278,628,979	276,070,236	2,334,867	192,149,644	252,706,480	952,520,237	16,702	
	:			, ,,,,,,	, , , , , , , , , , , , , , , , , , , ,				, .–	:
	DETAILS OF WRITE-INS									
		,,,,,,,	1							
5801.		XXX								

	DETAILS OF WRITE-INS						
5801. 5802.		XXX	 			 	 
5803.		XXX					
5898.			 		l	 	
	write-ins for Line 58						
	from overflow page	XXX					
5899.	Totals (Lines 5801						
	from overflow page Totals (Lines 5801 through 5803 plus 5898) (Line 58 above)						
	(Line 58 above)	XXX					

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

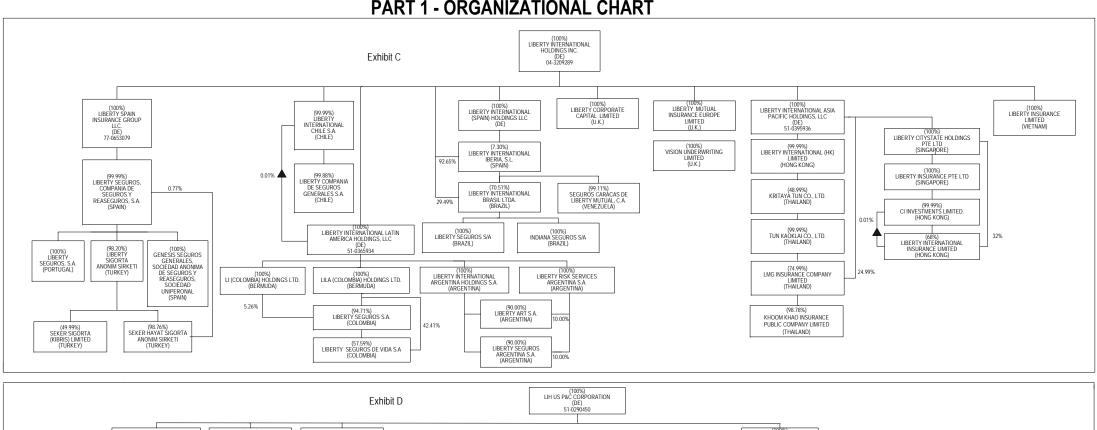
## SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

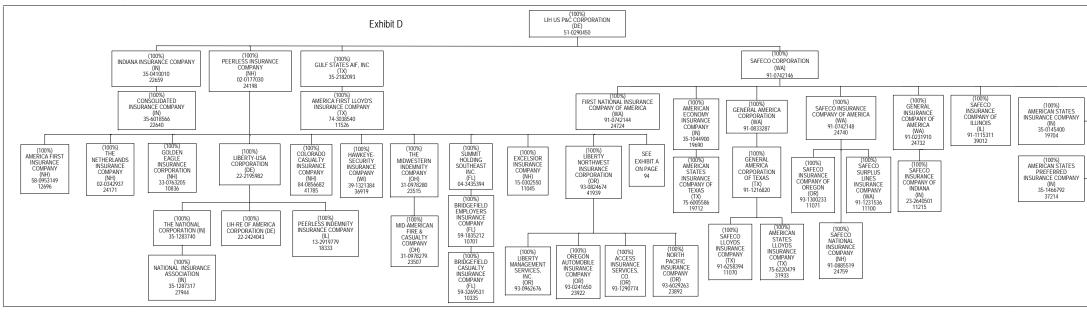
#### PART 1 - ORGANIZATIONAL CHART



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

#### PART 1 - ORGANIZATIONAL CHART





# **OVERFLOW PAGE FOR WRITE-INS**

# **ALPHABETICAL INDEX TO PROPERTY ANNUAL STATEMENT**

Assets	2	Schedule E – Part 2 – Cash Equivalents	E26
Cash Flow	5	Schedule E – Part 3 – Special Deposits	E27
Exhibit of Capital Gains (Losses)	12		SI16
Exhibit of Net Investment Income	12	Schedule F – Part 1	20
Exhibit of Nonadmitted Assets	13	Schedule F – Part 2	21
Exhibit of Premiums and Losses (State Page)	19	Schedule F – Part 3	22
Five-Year Historical Data	17	Schedule F – Part 4	23
General Interrogatories	15	O.b. J. D. J. F. D. J. F.	0.4
lund Dage	4	Cahadula E Dad C	25
Jurat Page Liabilities, Surplus and Other Funds		O.b. J. D. 17	26
	14	Cahadula F Dart 9	27
Notes To Financial Statements		Schedule F – Part 8	
Overflow Page For Write-ins	97	Schedule H – Accident and Health Exhibit – Part 1	28
	E01	Schedule H – Part 2, Part 3 and Part 4	29
	E02	Schedule H – Part 5 – Health Claims	30
	E03	Schedule P – Part 1 – Analysis of Losses and Loss Expenses	31
	SI02	Schedule P – Part 1A – Homeowners/Farmowners	33
Schedule B – Part 1	E04	Schedule P – Part 1B – Private Passenger Auto Liability/Medical	34
Schedule B – Part 2	E05	Schedule P – Part 1C – Commercial Auto/Truck Liability/Medical	35
	E06	Schedule P – Part 1D – Workers' Compensation	36
Schedule B – Verification Between Years	SI02	Schedule P – Part 1E – Commercial Multiple Peril	37
	E07	Schedule P – Part 1F – Section 1 – Medical Professional Liability	
	E08	- Occurrence	38
Schedule BA – Part 3	E09	Schedule P – Part 1F – Section 2 – Medical Professional Liability	
	SI03	- Claims-Made	39
	E10	Schedule P – Part 1G - Special Liability (Ocean, Marine, Aircraft (All	
	SI05	Perils), Boiler and Machinery)	40
	SI08	Schedule P – Part 1H – Section 1 – Other Liability – Occurrence	41
	E11	Schedule P – Part 1H – Section 2 – Other Liability – Claims-Made	42
	E12	Schedule P – Part 11 – Special Property (Fire, Allied Lines, Inland Marine,	
	E13	Forthquaka Durglan, 9 Thaff\	43
	E14	Schedule P – Part 1J – Auto Physical Damage	44
Oakadula D. Dad C	E15	Cabadula D. Dart 11/ Fidality/Curaty	45
Orbert to D. Dert C. Oration 4	E16	Schedule P – Part 1L – Other (Including Credit, Accident and Health)	46
Och ed le D. Ded C. Oceffee O		Oshad Ja D. Bad AM. Jaharatharat	
	E16	Schedule P – Part 1M – International	47
* * * * * * * * * * * * * * * * * * * *	SI04	Schedule P – Part 1N – Reinsurance	48
	SI03	Schedule P – Part 10 – Reinsurance	49
Schedule DA – Part 1		Schedule P – Part 1P – Reinsurance	
	SI11	Schedule P – Part 1R – Section 1 – Products Liability – Occurrence	
	E18	Schedule P – Part 1R – Section 2 – Products Liability – Claims – Made	
Schedule DB – Part A – Section 2		Schedule P – Part 1S – Financial Guaranty/Mortgage Guaranty	
Schedule DB – Part A – Section 3	E19	Schedule P – Part 1T – Warranty	
Schedule DB – Part A – Verification Between Years	SI12	Schedule P – Part 2, Part 3 and Part 4 - Summary	
Schedule DB – Part B – Section 1	E19	Schedule P – Part 2A – Homeowners/Farmowners	
Schedule DB – Part B – Section 2	E20	Schedule P – Part 2B – Private Passenger Auto Liability/Medical	55
Schedule DB – Part B – Section 3	E20	Schedule P – Part 2C – Commercial Auto/Truck Liability/Medical	55
	SI12	Schedule P – Part 2D – Workers' Compensation	55
	E21	Schedule P – Part 2E – Commercial Multiple Peril	55
Schedule DB – Part C – Section 2	E21	Schedule P – Part 2F – Section 1 – Medical Professional Liability	
	E22	- Occurrence	56
	SI13	Schedule P - Part 2F - Medical Professional Liability - Claims - Made	56
	E22	Schedule P – Part 2G – Special Liability (Ocean Marine, Aircraft (All Perils),	
	E23	Boiler and Machinery)	56
	E23	Schedule P – Part 2H – Section 1 – Other Liability – Occurrence	56
	SI13	Schedule P – Part 2H – Section 2 – Other Liability – Claims – Made	56
Schedule DB – Part E – Section 1		Schedule P – Part 2I – Special Property (Fire, Allied Lines, Inland Marine,	00
			57
Schedule DB – Part E – Verification Schodule DB – Part E – Section 1		Earthquake, Burglary, and Theft) Schoolule B. Port 21. Auto Physical Damage.	57
Schedule DB – Part F – Section 1		Schedule P – Part 2V – Fidelity Surety	
	SI15	Schedule P – Part 2K – Fidelity, Surety	
Schedule E – Part 1 – Cash	E25	Schedule P – Part 2L – Other (Including Credit, Accident and Health)	57

# **ALPHABETICAL INDEX TO PROPERTY ANNUAL STATEMENT**

Schedule P – Part 2M – International	57	Schedule P – Part 4K – Fidelity/Surety	67
Schedule P – Part 2N – Reinsurance	58	Schedule P – Part 4L – Other (Including Credit, Accident and Health)	67
Schedule P – Part 20 – Reinsurance	58	Schedule P – Part 4M – International	67
Schedule P – Part 2P – Reinsurance	58	Schedule P – Part 4N – Reinsurance	68
Schedule P – Part 2R – Section 1 – Products Liability – Occurrence	59	Schedule P – Part 40 – Reinsurance	68
Schedule P – Part 2R – Section 2 – Products Liability – Claims-Made	59	Schedule P – Part 4P – Reinsurance	68
Schedule P – Part 2S – Financial Guaranty/Mortgage Guaranty	59	Schedule P – Part 4R – Section 1 – Products Liability – Occurrence	69
Schedule P – Part 2T – Warranty	59	Schedule P – Part 4R – Section 2 – Products Liability – Claims-Made	69
Schedule P – Part 3A – Homeowners/Farmowners	60	Schedule P – Part 4S – Financial Guaranty/Mortgage Guaranty	69
Schedule P – Part 3B – Private Passenger Auto Liability/Medical	60	Schedule P – Part 4T – Warranty	69
Schedule P – Part 3C – Commercial Auto/Truck Liability/Medical	60	Schedule P – Part 5A – Homeowners/Farmowners	70
Schedule P – Part 3D – Workers' Compensation	60	Schedule P – Part 5B – Private Passenger Auto Liability/Medical	71
Schedule P – Part 3E – Commercial Multiple Peril	60	Schedule P – Part 5C – Commercial Auto/Truck Liability/Medical	72
Schedule P – Part 3F – Section 1 – Medical Professional Liability		Schedule P – Part 5D – Workers' Compensation	73
- Occurrence	61	Schedule P – Part 5E – Commercial Multiple Peril	74
Schedule P – Part 3F – Section 2 – Medical Professional Liability		Schedule P – Part 5F – Medical Professional Liability – Claims-Made	. 76
- Claims-Made	61	Schedule P – Part 5F – Medical Professional Liability – Occurrence	75
Schedule P – Part 3G – Special Liability (Ocean Marine, Aircraft (All Perils),		Schedule P – Part 5H – Other Liability – Claims-Made	78
Boiler and Machinery)	61	Schedule P – Part 5H – Other Liability – Occurrence	77
Schedule P – Part 3H – Section 1 – Other Liability – Occurrence	61	Schedule P – Part 5R – Products Liability – Claims-Made	80
Schedule P – Part 3H – Section 2 – Other Liability – Claims-Made	61	Schedule P – Part 5R – Products Liability – Occurrence	79
Schedule P – Part 3I – Special Property (Fire, Allied Lines, Inland Marine,		Schedule P – Part 5T – Warranty	81
Earthquake, Burglary, and Theft)	62	Schedule P – Part 6C – Commercial Auto/Truck Liability/Medical	82
Schedule P – Part 3J – Auto Physical Damage	62	Schedule P – Part 6D – Workers' Compensation	82
Schedule P – Part 3K – Fidelity/Surety	62	Schedule P – Part 6E – Commercial Multiple Peril	83
Schedule P – Part 3L – Other (Including Credit, Accident and Health)	62	Schedule P – Part 6H – Other Liability – Claims-Made	84
Schedule P – Part 3M – International	62	Schedule P – Part 6H – Other Liability – Occurrence	83
Schedule P – Part 3N – Reinsurance	63	Schedule P – Part 6M – International	84
Schedule P – Part 30 – Reinsurance	63	Schedule P – Part 6N – Reinsurance	85
Schedule P – Part 3P – Reinsurance	63	Schedule P – Part 60 – Reinsurance	85
Schedule P – Part 3R – Section 1 – Products Liability – Occurrence	64	Schedule P – Part 6R – Products Liability – Claims-Made	86
Schedule P – Part 3R – Section 2 – Products Liability – Claims-Made	64	Schedule P – Part 6R – Products Liability – Occurrence	
Schedule P – Part 3S – Financial Guaranty/Mortgage Guaranty	64	Schedule P – Part 7A – Primary Loss Sensitive Contracts	87
Schedule P – Part 3T – Warranty	64	Schedule P – Part 7B – Reinsurance Loss Sensitive Contracts	89
Schedule P – Part 4A – Homeowners/Farmowners	65	Schedule P Interrogatories	91
Schedule P – Part 4B – Private Passenger Auto Liability/Medical	65	Schedule T – Exhibit of Premiums Written	92
Schedule P – Part 4C – Commercial Auto/Truck Liability/Medical	65	Schedule T – Part 2 – Interstate Compact	
Schedule P – Part 4D – Workers' Compensation	65	Schedule Y – Information Concerning Activities of Insurer Members	
Schedule P – Part 4E – Commercial Multiple Peril	65	of a Holding Company Group	94
Schedule P – Part 4F – Section 1 – Medical Professional Liability		Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	
- Occurrence	66	Statement of Income	
Schedule P – Part 4F – Section 2 – Medical Professional Liability		Summary Investment Schedule	
– Claims-Made	66	Supplemental Exhibits and Schedules Interrogatories	
Schedule P – Part 4G – Special Liability (Ocean Marine, Aircraft (All Perils),		Underwriting and Investment Exhibit Part 1	
Boiler and Machinery)	66	Underwriting and Investment Exhibit Part 1A	
Schedule P – Part 4H – Section 1 – Other Liability – Occurrence	66	Underwriting and Investment Exhibit Part 1B	
Schedule P – Part 4H – Section 2 – Other Liability – Claims-Made	66	Underwriting and Investment Exhibit Part 2	
Schedule P – Part 4I – Special Property (Fire, Allied Lines, Inland Marine,		Underwriting and Investment Exhibit Part 2A	
Earthquake, Burglary and Theft)	67	Underwriting and Investment Exhibit Part 3	
Schedule P – Part 4J – Auto Physical Damage	67		