ANNUAL STATEMENT OF THE **Liberty Insurance Underwriters Inc.** of_____New York in the state of ______ New York TO THE **Insurance Department** OF THE **STATE OF** FOR THE YEAR ENDED **December 31, 2007**



ANNUAL STATEMENT

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For the Year Ended December 31, 2007 OF THE CONDITION AND AFFAIRS OF THE

		<u>Liberty Insurance U</u>	nderwriters Inc		
NAIC Group Code 0111 (Current Pe	eriod) (Prior Period)	NAIC Company (Code 19917	Employer	's ID Number 13-4916020
Organized under the Laws	of New York		, State of Domi	cile or Port of Er	ntry New York
Country of Domicile	United States of America				
Incorporated/Organized: _	March 8, 1811		Commenced Bus	siness: March	8, 1811
Statutory Home Office:	55 Water Street, 18th Flo				
Main Administrative Office	(Street and Number) 55 Water Street, 18th (Street and Numb	n Floor New Yo	State and Zip Code) ork, NY 10041	212-208-2802 (Area Cada)/Tel	
Mail Address: 55 Water St	reet, 18th Floor	New York, NY 10041	City, State and Zip Code)	(Area Code)(Te	lephone Number)
(Street and N		State and Zip Code) Water Street 18th Floor	New York, N	Y 10041	212-208-8834
Internet Website Address:		(Street and Number)		State and Zip Code)	(Area Code)(Telephone Number)
Statutory Statement Contac					617-357-9500 44393
	(Name) Joanne.Connolly@Li	bertyMutual.com		(Area	Code)(Telephone Number)(Extension) 617-574-5955
	(E-Mail Address)	•			(Fax Number)
		OFFICE	ERS		
	Name			Title	
			President		
	exter Robert Legg		Secretary		
3. <u>La</u>	urance Henry Soyer Yahia		Treasurer		
		Vice-Presi	dents		
Name	•	Title	Na	ame	Title
Michael Joseph Abdallah Anthony Alexander Fontanes	<u>EVP</u> EVP & CIO		Anthony Scott Carrol Daniel Terence Niall		SVP & Director CEO & Director
Gordon James McBurney	EVP & Director		Gary Jay Ostrow	roisyttie	VP
George John Perrotta	SVP, CFO & Dire	ector	Thomas Andrew Rus	sh, II	VP & Chief Legal Counsel
		DIRECTORS OR	TRUSTEES		
Anthony Scott Carroll	David Alan Cohe	,	Ralph Tortorella, III		Daniel Terence Niall Forsythe
James Francis Kelleher Frank Harrison O'Connor	Dennis James La Thomas Crawfor		Christopher Charles George John Perrotta		Gordon James McBurney Christopher Locke Peirce
Daniel Vincent Vaughn #	Francis William F		George John Ferrolla		Christopher Locke Pelice
-		,			
		.			
	<u> </u>				
State of New York County of New York ss					
•		se and say that they are t	he described officers of	said reporting entity, a	and that on the reporting period stated
above, all of the herein described as	sets were the absolute proj	perty of the said reporting	entity, free and clear from	m any liens or claims	thereon, except as herein stated, and
that this statement, together with relational liabilities and of the condition and affi					ue statement of all the assets and ctions therefrom for the period ended,
and have been completed in accorda	ance with the NAIC Annual	Statement Instructions an	d Accounting Practices a	and Procedures manu	ual except to the extent that: (1) state
law may differ; or, (2) that state rules information, knowledge and belief, re					
with the NAIC, when required, that is requested by various regulators in lie			e to electronic filing) of the	ne enclosed statemen	t. The electronic filing may be
requested by various regulators in lie	id of of ill addition to the er	iciosed statement.			
(Signature) David Alan Cohen		(Signa	ature) obert Legg		(Signature) Laurance Henry Soyer Yahia
(Printed Name)		(Printed	d Name)		(Printed Name)
1. President		2 Seci	retary		3. Treasurer
(Title)		Section (Title		_	(Title)
Subscribed and sworn to before me to	this		a	a. Is this an original fili	ing? YES[X]NO[]
day of January	· 	, 2008		· ·	the amendment number
- · - 				2. Date t	
				3. Numb	per 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)	114,799,987		114,799,987	94,701,598
2.	Stocks (Schedule D):				
۷.	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate (Schedule B):		* * * * * * * * * * * * * * * * * * * *		
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (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 (\$ (59,591,896), Schedule E-Part 1), cash equivalents (\$ 45,581,239				
	Schedule E-Part 2) and short-term investments (\$ 21,577,140, Schedule DA)	7,566,483		7,566,483	(27,888,030
6.	Contract loans (including \$ 0 premium notes)				
7.	Other invested assets (Schedule BA)				
8.	Receivables for securities				
9.	Aggregate write-ins for invested assets				
10.		122,366,470		122,366,470	66,813,568
11.	Title plants less \$ 0 charged off (for Title insurers only)	* * * * * * * * * * * * * * * * * * * *			
12.	Investment income due and accrued	1,399,286		1,399,286	1,004,304
13.	Premiums and considerations:				
	13.1 Uncollected premiums and agents' balances in the course of collection	* * * * * * * * * * * * * * * * * * * *			
	13.2 Deferred premiums, agents' balances and installments booked but deferred and				
	not yet due (including \$0_earned but unbilled premiums)				
	13.3 Accrued retrospective premiums				
14.	Reinsurance:				
	14.1 Amounts recoverable from reinsurers	24,669,025		24,669,025	25,436,08
	14.2 Funds held by or deposited with reinsured companies				
15.	Amounts receivable relating to uninsured plans				
16.1	Current federal and foreign income tax recoverable and interest thereon				
16.2	Net deferred tax asset				
17.	Guaranty funds receivable or on deposit	400.004	400 004		
18.	Electronic data processing equipment and software	767.845	128,621 767,845		
19. 20	Furniture and equipment, including health care delivery assets (\$ 0)	/6/,845	767,845		
20. 21.	Net adjustment in assets and liabilities due to foreign exchange rates Receivables from parent, subsidiaries and affiliates	20,417		20,417	24,720,539
22.	Health care (\$ 0) and other amounts receivable	20,417		20,417	24,120,53
23.	Aggregate write-ins for other than invested assets				6,207
23. 24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell				0,207
	Accounts (Lines 10 to 23)	149,351,664	896,466	148,455,198	117,980,703
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	1-3,001,004		1,70,700,100	177,000,70
26.	Total (Lines 24 and 25)	149,351,664	896,466	148,455,198	117,980,70
		3,00 1,00 1	300,100	1	1,000,700
	DETAILS OF WRITE-INS				
2004					

DETAILS OF WRITE-INS		
0901.		
0902.	 	
0903.		
0998. Summary of remaining write-ins for Line 09 from overflow page		
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)		
2301. Other Assets	 	 6,207
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)		6,207

I I		Prior Year
1. Losses (Part 2A, Line 34, Column 8)		
Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	* * * * * * * * * * * * * * * * * * * *	
3. Loss adjustment expenses (Part 2A, Line 34, Column 9)	* * * * * * * * * * * * * * * * * * * *	
Commissions payable, contingent commissions and other similar charges	* * * * * * * * * * * * * * * * * * * *	
Other expenses (excluding taxes, licenses and fees)		7,901,686
O To a Property of the following in the control of		
	3,395,230	770,364
7.2 Net deferred tax liability	65,000	11,000
8. Borrowed money \$ 0 and interest thereon \$ 0		
9. Unearned premiums (Part 1A, Line 37, Column 5) (after deducting unearned premiums for ceded reinsurance of		
\$ 134,888,063 and including warranty reserves of \$ 0)		
Advance premium Dividends declared and unpaid:	* * * * * * * * * * * * * * * * * * * *	
'		
11.1 Stockholders 11.2 Policyholders	* * * * * * * * * * * * * * * * * * * *	
40 0 4 4 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	19,421,365	27,193,888
		193,289
	63,289	193,209
AC Desittance and them are allocated		
		5,806,468
Provision for reinsurance (Schedule F, Part 7) Net adjustments in assets and liabilities due to foreign exchange rates	0,210,002	
40 Deeffe systematics		
Payable to parent, subsidiaries and affiliates	27,951,135	
20. Payable for securities		12,000
21. Liability for amounts held under uninsured plans	* * * * * * * * * * * * * * * * * * * *	
22. Capital notes \$ 0 and interest thereon \$ 0	* * * * * * * * * * * * * * * * * * * *	
23. Aggregate write-ins for liabilities	7 004 000	
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23)	62,008,374	41,888,695
25. Protected cell liabilities		
26. Total liabilities (Lines 24 and 25)	62,008,374	41,888,695
27. Aggregate write-ins for special surplus funds		
28. Common capital stock	3,500,000	3,500,000
29. Preferred capital stock		
31. Surplus notes		
32. Gross paid in and contributed surplus	60,029,767	60,029,767
33. Unassigned funds (surplus)	22,917,057	12,562,241
34. Less treasury stock, at cost:		
34.1 0 shares common (value included in Line 28 \$ 0) 34.2 0 shares preferred (value included in Line 29 \$ 0)		
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)	86,446,824	76,092,008
36. TOTALS (Page 2, Line 26, Col. 3)	148,455,198	117,980,703
	, ,	, ,
DETAILS OF WRITE-INS		
2301. Other liabilities	7,901,693	
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)	7,901,693	
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page		
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)		
3001.		
3002.		
3003.		
3098. Summary of remaining write-ins for Line 30 from overflow page		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)		

	STATEMENT OF INCOME	1	2
	UNDERWRITING INCOME	Current Year	Prior Year
1.	Premiums earned (Part 1, Line 34, Column 4)		
	DEDUCTIONS		
	Losses incurred (Part 2, Line 34, Column 7)		
4.	Loss expenses incurred (Part 3, Line 25, Column 1) Other underwriting expenses incurred (Part 3, Line 25, Column 2)		
5.	Aggregate write-ins for underwriting deductions		
6.	Total underwriting deductions (Lines 2 through 5)		
7.	Net income of protected cells		
0.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) INVESTMENT INCOME		
١	Net investment income earned (Exhibit of Net Investment Income 1 ine 17)	10,771,007	6,780,554
10.	Net investment income earned (Exhibit of Net Investment Income, Line 17) Net realized capital gains (losses) less capital gains tax of \$ 7,147 (Exhibit of Capital Gains (Losses))	13,272	
11.	Net investment gain (loss) (Lines 9 + 10)	10,784,279	
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off		
	(amount recovered \$ 641,091 amount charged off \$ 66,932)	574,159	(44,467)
13.	Finance and service charges not included in premiums		
	Aggregate write-ins for miscellaneous income	0=4004	(44.467)
15. 16.	Total other income (Lines 12 through 14) Net income before dividends to policyholders, after capital gains tax	0/4,034	(44,467)
	and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	11,459,113	6,707,148
17.	Dividends to policyholders		
18.	Net income, after dividends to policyholders, after capital gains tax	14 450 440	0.707.440
	and before all other federal and foreign income taxes (Line 16 minus Line 17) Federal and foreign income taxes incurred		6,707,148
	Federal and foreign income taxes incurred Net income (Line 18 minus Line 19) (to Line 22)		2,338,807 4,368,341
	CAPITAL AND SURPLUS ACCOUNT	.,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
21	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	76,092,011	66,726,866
	Net income (from Line 20)	7 500 070	4,368,341
	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ 0		108,956
25.	Change in net unrealized foreign exchange capital gain (loss)	(F4.000)	(040,000)
	Change in net deferred income tax Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3)		(918,000) 1,611,912
	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3) Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	2,595,807	4,193,936
29.	Change in surplus notes		
	Surplus (contributed to) withdrawn from protected cells		
	Cumulative effect of changes in accounting principles Capital changes:		
	32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend)		
	32.3 Transferred to surplus		
1	Surplus adjustments:		
	33.1 Paid in		
	33.3 Transferred from capital		
	Net remittances from or (to) Home Office		
35.	Dividends to stockholders		
36.	Change in treasury stock (Page 3, Lines 34.1 and 34.2, Column 2 minus Column 1)		
	Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders for the year (Lines 22 through 37)	10,354,813	9,365,145
	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 35)	86,446,824	76,092,011
	DETAILS OF WRITE-INS		
0501. 0502.			
0502.		* * * * * * * * * * * * * * * * * * * *	
0598.	Summary of remaining write-ins for Line 5 from overflow page		
0599.	Totals (Lines 0501 through 0503 plus Line 0598) (Line 5 above)		
1401.	Other Income/(Expense)	100,675	
1402.			***************************************
1403.	C		
	Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 through 1403 plus Line 1498) (Line 14 above)	100,675	
		100,075	
3701.			
3702. 3703.			
	Summary of remaining write-ins for Line 37 from overflow page		
	Totals (Lines 3701 through 3703 plus Line 3798) (Line 37 above)		

CASH FLOW

	1	2
Cook from Operations		
Cash from Operations	Current Year	Prior Year
Premiums collected net of reinsurance	(7,772,523)	4,246,304
2. Net investment income	40 540 000	7,038,215
3. Miscellaneous income	517,738	(44,467)
4. Total (Lines 1 through 3)	3,255,444	11,240,052
5. Benefit and loss related payments	732,940	14,646,286
Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	l	
7. Commissions, expenses paid and aggregate write-ins for deductions		
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)		371,116
10. Total (Lines 5 through 9)		15,017,402
11. Net cash from operations (Line 4 minus Line 10)	1,187,480	(3,777,350)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		04 000 =00
12.1 Bonds	28,785,800	21,602,728
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		1,056,200
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	22,949	216,321
12.7 Miscellaneous proceeds	28,808,749	22,875,249
12.8 Total investment proceeds (Lines 12.1 to 12.7) 13. Cost of investments acquired (long-term only):	20,000,749	22,013,249
· · · · · · · · · · · · · · · · · · ·	48,993,824	25,903,363
13.1 Bonds 13.2 Stocks		25,305,305

13.3 Mortgage loans 13.4 Real estate	I I	
12.5. Other invested agests		
13.6 Miscellaneous applications		436,093
13.7 Total investments acquired (Lines 13.1 to 13.6)	48.993.824	26,339,456
14. Net increase (decrease) in contract loans and premium notes	1	
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(20,185,075)	(3,464,207)
	(=0,:00,0:0)	(5, 15 1,=51)
Cash from Financing and Miscellaneous Sources 16. Cash provided (applied):		
16.1 Surplus notes, capital notes 16.2 Capital and paid in surplus, less treasury stock		
16.3 Rorrowed funds		
40.4 Not do 1975 and do 1975 a		
ACE District to the Health of		
16.6. Other each provided (applied)	54,452,108	(52,264,188)
 Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) 	54,452,108	(52,264,188)
· · · · · · · · · · · · · · · · · · ·	. , . ,	(*) *) * *)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	25 454 512	(50 505 745)
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)19. Cash, cash equivalents and short-term investments:	35,454,513	(59,505,745)
10.1 Reginning of year	(27,888,030)	31,617,715
19.2 End of year (Line 18 plus Line 19.1)	7,566,483	(27,888,030)
	1,000,700	(21,000,000)
Note: Supplemental disclosures of cash flow information for non-cash transactions:		1
20.0001.		
20.0002. 20.0003.		
20.0000.		

NONE **Underwriting and Investment Exhibit - Part 1**

NONE **Underwriting and Investment Exhibit - Part 1A**

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

nce Assumed	Reinsuran	Reinsurance Ceded	
3	4	5	Nat Day of the
From Non- Affiliates	To Affiliates	To Non- Affiliates	Net Premiums Written Cols. 1 + 2 + 3 - 4 - 5
314,477	13,536,378	7,100,098	
	964,627	564,129	
	(41,686)	73,701	
	61,822,733	72,367,475	
	70,543,107		
	* * * * * * * * * * * * * * * * * * * *		
	* * * * * * * * * * * * * * * * * * * *		
	* * * * * * * * * * * * * * * * * * * *		
	* * * * * * * * * * * * * * * * * * * *		
	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *
		6,856,642	
314,477	146,825,159	123,314,985	
	314,477	314,477 146,825,159	314,477 146,825,159 123,314,985

DETAILS OF WRITE-INS			
3301.			
3302.			
3303.			
3398. Summary of remaining write-ins for Line 33 from overflow page 3399. Totals (Lines 3301 through 3303 plus 3398) (Line 33 above)			
3399. Totals (Lines 3301 through 3303 plus 3398) (Line 33 above)			

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

Annual Statement for the ve	ear 2007 of the	Liberty	ty Insurance Underwriters Inc

UNDERWRITING AND INVESTMENT EXHIBIT PART 2 - LOSSES PAID AND INCURRED

		Losses Paid I	_ess Salvage		5	6	7	8
	1	2	3	4	Net Losses Unpaid	Net Losses	Losses Incurred	Percentage of Losses Incurred (Col. 7, Part 2)
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Current Year (Part 2A, Col. 8)	Unpaid Prior Year	Current Year (Cols. 4 + 5 - 6)	to Premiums Earned (Col. 4, Part 1)
1. Fire								
2. Allied lines	30,000		30,000		. [l	I	
Farmowners multiple peril								
Homeowners multiple peril								
Commercial multiple peril	27,827,032		27,827,032					
Mortgage guaranty								
8. Ocean marine	8,490,796		8,490,796					
9. Inland marine	(3,588,958)		(3,588,958)					
10. Financial guaranty					. [[
11.1 Medical malpractice - occurrence					. [
11.2 Medical malpractice - claims - made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation								
17.1 Other liability - occurrence	20,753,379		20,753,379	*********				
17.2 Other liability - claims - made	30,440,862		30,440,862	*********				
18.1 Products liability - occurrence			00,,,,,0,2					
18.2 Products liability - claims - made								
19.1, 19.2 Private passenger auto liability				* * * * * * * * * * * * * * * * * * * *				
19.3, 19.4 Commercial auto liability								
21. Auto physical damage								
22. Aircraft (all perils)				* * * * * * * * * * * * * * * * * * * *				
23. Fidelity				* * * * * * * * * * * * * * * * * * * *				
24. Surety				* * * * * * * * * * * * * * * * * * * *				
26. Burglary and theft								
27. Boiler and machinery				* * * * * * * * * * * * * * * * * * * *				
28. Credit				* * * * * * * * * * * * * * * * * * * *				
29. International				* * * * * * * * * * * * * * * * * * * *				
	·····							
Reinsurance-Nonproportional Assumed Property Reinsurance-Nonproportional Assumed Liability	XXX XXX							
31. Reinsurance-Nonproportional Assumed Liability								
32. Reinsurance-Nonproportional Assumed Financial Lines	XXX							
Aggregate write-ins for other lines of business TOTALS	00.050.444		02.052.444					
34. TOTALS	83,953,111		83,953,111					
DETAILS OF WRITE-INS								
3301.								
3302.				* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *		
3303.				* * * * * * * * * * * * * * * * * * * *				
3398. Summary of remaining write-ins for Line 33 from overflow page							 	
3399. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)	1		l		1	I	1	1

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

		Repor	ted Losses		Ir	ncurred But Not Reported		8	9
Line of Business	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable from Authorized and Unauthorized Companies	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Unpaid Loss Adjustment Expenses
Fire Allied lines Farmowners multiple peril									
Homeowners multiple peril Commercial multiple peril Mortgage guaranty	14,382,953		14,382,953		13,729,178	1,351,452	15,080,630		
8. Ocean marine 9. Inland marine	6,757,841 3,593,861		6,757,841 3,593,861		(216,417) (1,697,010)	(27,965)	(244,382) (1,697,010)		
10. Financial guaranty 11.1 Medical malpractice - occurrence 11.2 Medical malpractice - claims - made 12. Earthquake									
Croup accident and health Credit accident and health (group and individual) Other accident and health								(a)	
16. Workers' compensation 17.1 Other liability - occurrence 17.2 Other liability - claims - made	31,691,456 31,706,877		31,691,456 31,706,877		278,256,410 126,300,222		278,256,410 126,300,222		
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									
21. Auto physical damage 22. Aircraft (all perils) 23. Fidelity									
24. Surety 26. Burglary and theft 27. Boiler and machinery 28. Credit					6,671,647		6,671,647		
International Reinsurance-Nonproportional Assumed Property Reinsurance-Nonproportional Assumed Liability	XXX				XXX XXX				
Reinsurance-Nonproportional Assumed Financial Lines Aggregate write-ins for other lines of business TOTALS	X X X		88,132,988		423,044,030	1,323,487	424,367,517		
DETAILS OF WRITE-INS									
3301. 3302. 3303.									
3398. Summary of remaining write-ins for Line 33 from overflow page 3399. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)									

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

UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		·	Other	Ü	'
		Loss Adjustment	Underwriting	Investment	
		Expenses	Expenses	Expenses	Total
1.	Claim adjustment services:				
	1.1 Direct				
	1.2 Reinsurance assumed				(90,969)
	1.3 Reinsurance ceded				38,557,591
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent		38,459,632		38,459,632
	2.2 Reinsurance assumed, excluding contingent		15,724		
	2.3 Reinsurance ceded, excluding contingent		38,475,356		38,475,356
	2.4 Contingent-direct		204,000		204,000
	2.5 Contingent-reinsurance assumed				
	2.6 Contingent-reinsurance ceded		204,000		204,000
	2.7 Policy and membership fees				
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)				
3.	Allowances to manager and agents				
4.	Advertising				
5.	Boards, bureaus and associations		*****		
6.	Surveys and underwriting reports				
7.	Audit of assureds' records				
ı	Salary and related items:				
	8.1 Salaries				
	8.2 Payroll taxes				
9.	Employee relations and welfare				
l .	Insurance				
l .	Directors' fees				
	Travel and travel items				
	Rent and rent items				
l	Equipment				
l	Cost or depreciation of EDP equipment and software				
	Printing and stationery				
	Postage, telephone and telegraph, exchange and express				
l	Legal and auditing				
1	Totals (Lines 3 to 18)				
	Taxes, licenses and fees:				
20.	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$ 0				
	20.2 Insurance department licenses and fees				
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)				
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
1	Real estate expenses				
22.	Real estate taxes				
23.	Reimbursements by uninsured plans				
24.	Aggregate write-ins for miscellaneous expenses				
25.	Total expenses incurred				
	Less unpaid expenses-current year				
	Add unpaid expenses-prior year				
	Amounts receivable relating to uninsured plans, prior year				
29.	Amounts receivable relating to uninsured plans, current year				
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)				
	DETAILS OF WRITE-INS				
2401.					
2403.					
	Summary of remaining write-ins for Line 24 from overflow page				
l	Fotals (Lines 2401 through 2403 plus 2498) (Line 24 above)				
∠+33.	101010 (E1100 270) (1110ugii 2700 piuo 2700) (E1110 27 abuve)	l		I .	I .

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

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
	(a) 1,975,525	2,049,022
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (unaffiliated)	[(a) 2,891,029	2,991,703
1.3 Bonds of affiliates		
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)		
2.21 Common stocks of affiliates		
Mortgage loans	(C)	
4. Real estate	(d)	
5. Contract loans	(-)	
6. Cash, cash equivalents and short-term investments	(e) 5,537,534	5,758,347
0 00 :	(f)	
Other invested assets Aggregate write-ins for investment income	(28,065)	(28,065)
Total gross investment income	10,376,023	10,771,007
11 Investment synance	· · · · ·	
11. Investment expenses	ma tayaa	(g)
40 Liferent en en en		(g)
13. Interest expense		(h)
		(1)
		10 771 007
17. Net investment income (Line 10 minus Line 16)		10,771,007
DETAILS OF WRITE-INS		
0901. Miscellaneous Income / (Expense)	(28,065)	(28,065
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow pa	ge	
0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9, above)	(28,065)	(28,065)
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow p	age	
1599. Totals (Lines 1501 through 1503) plus 1598 (Line 15, above		
(c) Includes \$ 0 accrual of discount less \$ (d) Includes \$ 0 for company's occupancy of its ov (e) Includes \$ 3,060,586 accrual of discount less \$ (f) Includes \$ 0 accrual of discount less \$	0 amortization of premium and less \$ 0 paid for accrued in	lividends on purchases. nterest on purchases. nterest on purchases.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds			(33,470)		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	30,939		30,939		
1.3	Bonds of affiliates	* * * * * * * * * * * * * * * * * * * *				
2.1	Preferred stocks (unaffiliated)	* * * * * * * * * * * * * * * * * * * *				
2.11	Preferred stocks of affiliates	* * * * * * * * * * * * * * * * * * * *				
2.2	Common stocks (unaffiliated)	* * * * * * * * * * * * * * * * * * * *				
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.		22,949		22,949		
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	20,418		20,418		

DETAILS OF WRITE-INS			
0901.			
0902.			
0903.	 	 	
0998. Summary of remaining write-ins for Line 9 from overflow page			
0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9, above)			

EXHIBIT OF NONADMITTED ASSETS

		1	2	3
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1	Ponds (Schodulo D)			
1. 2.	Bonds (Schedule D) Stocks (Schedule D):			
۷.	O.A. District desired			
	2.1 Preferred stocks			
2	2.2 Common stocks			
3.	Mortgage loans on real estate (Schedule B): 3.1 First liens			
4	3.2 Other than first liens			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
_	4.3 Properties held for sale			
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term			
^	investments (Schedule DA)			
6.	Contract loans			
7.	Other invested assets (Schedule BA)			
8.	Receivables for securities			
9.	Aggregate write-ins for invested assets			
10.	Subtotals, cash and invested assets (Lines 1 to 9)			
11.	litle plants (for litle insurers only)			
12.	Investment income due and accrued			
13.	Premiums and considerations:			
	13.1 Uncollected premiums and agents' balances in the course of collection			
	13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
	13.3 Accrued retrospective premiums			
14.	Reinsurance:			
	14.1 Amounts recoverable from reinsurers			
	14.2 Funds held by or deposited with reinsured companies			
	14.3 Other amounts receivable under reinsurance contracts			
15.	Amounts receivable relating to uninsured plans			
16.1	Current federal and foreign income tax recoverable and interest thereon			
16.2	Net deferred tax asset			
17.	Guaranty funds receivable or on deposit			
18.	Electronic data processing equipment and software	128,621	276,945	148,32
19.	Furniture and equipment, including health care delivery assets	707.045	48,487	(719,35
20.	Net adjustment in assets and liabilities due to foreign exchange rates			
21.	Receivables from parent, subsidiaries and affiliates			
22.	Health care and other amounts receivable			
23.	Aggregate write-ins for other than invested assets		877,670	877,67
24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell			
	Accounts (Lines 10 to 23)	896,466	1,203,102	306,63
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
26.	Total (Lines 24 and 25)	896,466	1,203,102	306,63
_				. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	DETAILS OF WRITE-INS			
0901.				
0902.				
0903.				
)998.	Summary of remaining write-ins for Line 09 from overflow page			
იიიი	Totals /Lines 0001 through 0003 plus 0008) /Line 00 above)			

DETAILS OF WRITE-INS		
0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 09 from overflow page		
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)		
2301. Leasehold improvements	877,670	877,670
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)	877,670	877,670

Note 1- Summary of Significant Accounting Policies

A. Accounting Practices

The accompanying financial statements of Liberty Insurance Underwriters Inc. (the "Company") have been prepared on the basis of accounting practices prescribed or permitted by the Division of Insurance of the Department of Regulatory Agencies of the State of New York ("New York Division of Insurance").

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

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

C. Accounting Policies

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

In addition, the Company uses the following accounting policies:

- Short term investments are carried at cost, adjusted where appropriate for amortization of premium or discount, or market as specified by the Purposes and Procedures Manual of the NAIC Securities Valuation Office (SVO Manual).
- 2. Bonds are carried at cost, adjusted where appropriate for amortization of premium or discount, or market as specified by the Purposes and Procedures Manual of the NAIC Securities Valuation Office (SVO Manual).
- The Company does not own common stocks.
- 4. The Company does not own preferred stocks
- 5. The Company does not own mortgage loans.
- 6. Mortgage backed/asset backed securities are stated at amortized cost or market based on guidance in the Purposes and Procedures Manual of the NAIC Securities Valuation Office (SVO Manual). Prepayment assumptions for mortgage backed/asset backed securities are updated monthly using the Bloomberg data service. The retrospective adjustment method is used to value all mortgage backed/asset backed securities.
- 7. The Company does not own any subsidiaries, controlled, or affiliated entities.
- 8. The Company does not own any joint ventures, partnerships, or limited liability companies.
- 9. Derivative securities refer to Note 8.
- 10. Refer to Note 29.
- 11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates, and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and follow current standards of practice. Any adjustments to the liability are reflected in the period that they are determined.
- 12. The Company did not change its capitalization policy in 2007.
- 13. The Company has no pharmaceutical rebate receivables.

Note 2- Accounting Changes and Correction of Errors

A. There were no material changes in accounting principle or correction or errors during the year.

Note 3- Business Combinations and Goodwill

A. Statutory Purchase Method

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

B. Statutory Mergers

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

C. Impairment Loss

Not applicable

Note 4- Discontinued Operations

The Company has no discontinued operations to report.

Note 5- Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company has no mortgage loans.

B. Troubled Debt Restructuring for Creditors

Not applicable

C. Reverse Mortgages

The Company has no reverse mortgages.

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

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

F. Real Estate

The Company does not own real estate.

G. Investments in Low-Income Housing Tax Credits

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

Note 6- Joint Ventures, Partnerships & Limited Liability Companies

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

Not applicable

Note 7- Investment Income

A. Accrued Investment Income

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

B. Amounts Nonadmitted

No amounts were excluded as of December 31, 2007.

Note 8- Derivative Instruments

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

Note 9 - Income Taxes

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

	December 31, 2007	December 31, 2006	Change
Total of gross deferred tax assets	7,000	19,000	(12,000)
Total of deferred tax liabilities	(72,000)	(30,000)	(42,000)
Net deferred tax (liability) asset	(65,000)	(11,000)	(54,000)
Net deferred tax asset non-admitted	0	0	0
Net admitted deferred tax (liability) asset	(65,000)	(11,000)	(54,000)

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

	2007	2006
Federal tax on operations	3,952,743	2,338,807
Net operating loss benefit	0	0
Foreign tax on operations	0	0
Income tax incurred on operations	3,952,743	2,338,807
Tax on capital gains	7,147	0
Total income tax incurred	3,959,890	2,338,807

The Company's deferred tax assets and liabilities result primarily from the reversal of discount accretion on bonds and wash sales.

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

	2007
Change in net deferred income tax (without unrealized gain or loss)	(54,000)
Tax effect of unrealized (gains) losses	0
Total change in net deferred income tax	(54,000)

- D. Effective tax rates approximate the current statutory rate of 35%.
- E. The amount of Federal income taxes paid and available for recoupment in the event of future losses is \$3,754,000 from the current year and \$2,188,000 from the preceding year.

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

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

Access Insurance Services, Co.
Ambco Capital Corporation
America First Insurance Company
America First Lloyds Insurance Company
American Ambassador Casualty Company
American Fire & Casualty Insurance Company *

Avomark Insurance Company *
Berkeley Holding Company Associates, Inc.
Berkeley Management Corporation
Bridgefield Casualty Insurance Company
Bridgefield Employers Insurance Company
Capitol Agency, Inc. (Arizona corporation)
Capitol Agency, Inc. (Ohio corporation)
Capitol Agency, Inc. (Tennessee corporation)
Cascade Disability Management, Inc.

Colorado Casualty Insurance Company

Companies Agency Insurance Services of California

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

Employers Insurance Company of Wausau

Employers Insurance Company of Was Excelsior Insurance Company Florida State Agency, Inc. Globe American Casualty Company Golden Eagle Insurance Corporation

Gulf States AIF, Inc.

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

Indiana Insurance Company

LEXCO Limited

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

Liberty Insurance Underwriters, Inc.

Liberty Mutual Group Inc.

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

Liberty RE (Bermuda) Limited Liberty Real Estate Corporation

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

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

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

LM Property & Casualty Insurance Company

LMHC Massachusetts Holding, Inc.

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

Mid-American Fire and Casualty Company

Missouri Agency, Inc.

North Pacific Insurance Company Oregon Automobile Insurance Company

OCASCO Budget, Inc *
OCI Printing, Inc.*
Ohio Casualty Corporation *
Ohio Casualty Insurance Com

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

Peerless Insurance Company San Diego Insurance Company

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

St. James Insurance Company Summit Consulting, Inc.

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

The National Corporation

The Netherlands Insurance Company Wausau Service Corporation

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

Wausau Signature Agency, Inc. Wausau Business Insurance Company Wausau General Insurance Company Wausau Underwriters Insurance Company West American Insurance Company *

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

Note 10- Information concerning Parent, Subsidiaries and Affiliates

- All of the outstanding shares of capital stock of the Company are held by Liberty Mutual Insurance Company ("LMIC") an insurance company incorporated in Massachusetts. The ultimate parent of LMIC is Liberty Mutual Holding Company, Inc., a Massachusetts company.
- B. Transactions entered into by the Company with its affiliates are described on Schedule Y Part 2.
- C. There have been no material transactions with the Company's affiliates during 2007.
- At December 31, 2007 the company reported \$27,930,718 due to affiliates. In general the terms of the intercompany arrangements require settlement at least quarterly.
- The Company did not have any material contingent exposures of assets to liabilities as a result of guarantees or undertakings for the benefits of an affiliate.
- F. See Note 25 for information regarding intercompany pooling arrangement.

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

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

The Company entered into an agreement for a loan or extension of credit effective May 22, 2006; namely 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, 2007, there have been no drawings under this agreement.

- G. The Company is part of a holding company structure as illustrated in Schedule Y part 1.
- 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.
- The Company has no investments in subsidiary, controlled or affiliated companies. L
- Impairment of subsidiaries J.

Refer to 10 I

K. Investment in foreign insurance subsidiaries.

Refer to 10 I

Investment in downstream noninsurance holding companies.

Refer to 10 I

Note 11- Debt

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

Note 12- Retirement Plans, Deferred Compensation, Post employment Benefits and Compensated Absences and Other **Postretirement Benefit Plans**

The Company does not have any direct employees and therefore, does not have any direct obligations for a defined benefit plan, deferred compensation arrangements, compensated absences or other post retirement benefit plans. Services for the operation of the Company are provided under provisions of the Management Services Agreement as described in Note 10 F.

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

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

1. Common Stock

The Company has 50,000 shares authorized, issued and outstanding as of December 31, 2007. All shares have a stated par value of \$70. The company has no preferred stock authorized, issued or outstanding.

Preferred Stock

Not applicable

3. Dividend Restrictions

There are no dividend restrictions.

- 4. Dividends on common stock are paid as declared by the Board of Directors of the Company. Under the insurance regulations of the State of New York, the maximum amount of dividends, which the company may pay to shareholders, is limited to the lesser of 10% of the most recent year-end policyholders surplus or the net investment income earned for the year. Accordingly, the maximum dividend payout to shareholders that may be made without prior approval is \$8,644,682.
- 5. The Company does not have restricted unassigned surplus.
- 6. The Company had no advances to surplus.
- The Company does not hold stock for special purposes.
- 8. The Company does not hold special surplus funds.
- 9. The portion of unassigned funds (surplus) represented by cumulative unrealized gains and (losses) is \$0.
- 10. Surplus Notes

Not applicable

11. Quasi re-organization (dollar impact)

Not applicable

12. Quasi re-organization (effective date)

Not applicable

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

Note 14- Contingencies

A. Contingent Commitments

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

B. Assessments

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

As a result of the Inter-company 100% Quota Share Reinsurance Agreement (see Note 25), all guaranty fund and other assessments liabilities are ceded to LMIC.

C. Gain Contingencies

Not applicable

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

The company did not have claims related extra contractual obligation losses and bad faith losses stemming from lawsuits in the current period.

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 Agreements (see Note 25), the Company has no 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 concentrations of credit risk.

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

A. Transfers of Receivables reported as sales:

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

B. Transfers and servicing of financial assets:

This Company did not have any transfers and servicing of financial assets closing the year.

C. Wash Sales

The company did not claims related extras contractual obligation losses and bad faith losses stemming from lawsuits in the current period.

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

Full Name and Address of MGA or TPA	FEIN#	Exclusive Contract	Type of Business Written	Type of Authority Granted	Total Direct Written Premiums
Professional Indemnity Agency Inc.		N	Kidnap & Ransom	U,B, CA,	\$6,856,642

U - Underwriting

B – Binding Authority

C – Claims Payments

CA - Claims Adjusting

Note 20- Other Items

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

Not applicable

C. Other Disclosures

Assets in the amount of \$5,432,614 and \$5,535,301 as of December 31, 2007 and 2006, respectively, were on deposit with government authorities or trustees as required by law.

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

The Company does not purchase Business Interruption coverage.

F. State Transferable Tax Credits

The Company does not hold state transferable tax credits.

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

The Company does not hold hybrid securities.

I. Sub-Prime Lending

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

Note 21- Events Subsequent

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

Note 22- Reinsurance

A. Excluding amounts arising pursuant to the Liberty Mutual Inter-Company 100% Quota Share Reinsurance Agreement, as described in Note 25, the Company's unsecured aggregate recoverable for losses paid and unpaid including IBNR, loss adjustment expenses, unearned premium with any individual reinsurers in excess of 3% of surplus, are displayed below.

<u>Reinsurer</u>	Naic No.	Federal ID No.	Recoverable Amount
Swiss Re America Corp	25384	13-1675535	\$113,825,955
Everest Reinsurance Company	26921	22-2005057	71,439,746
Berkley Insurance Company	32603	47-0574325	47,823,829
Munich Reins America Inc	10227	13-4924125	38,642,091
Transatlantic Reinsurance Company	19453	13-5616275	22,956,115
Employers Reinsurance Company	39845	48-0921045	16,439,447
XL Reinsurance America	20583	13-1290712	14,064,962
Toa Re Insurance Company of America	42439	13-2918573	8,827,746
Axis Reinsurance Company	20370	51-0434766	5,941,459
Lloyds SPL Syndicate #5000		AA-1126003	4,204,887

B. Reinsurance Recoverables in Dispute

There are no reinsurance recoverables in dispute from an individual reinsurer which exceeds 5% of the Company's surplus. In addition, the aggregate reinsurance recoverables in dispute do not exceed 10% of the Company's surplus.

C. Reinsurance Assumed and Ceded

1. The following table summarizes ceded and assumed unearned premiums and the related commission equity at December 31, 2007.

	Assumed Reinsurance		Ceded Reinsurance		Net Reinsurance	
	Commission		Commission			Commission
_	UEP	Equity	UEP	Equity	UEP	Equity
					'	
Affiliates	\$0	\$0	\$65,913,032	\$3,552,415	\$(65,913,032)	\$(3,552,415)
All Other	157,613	7,881	68,975,031	19,385,770	(68,817,418)	(19,377,889)
Total	\$157,613	\$7,881	\$134,888,063	\$22,938,185	\$(134,730,450)	\$(22,930,304)

Direct unearned premium reserve of \$134,730,450

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

 Direct
 \$(4,354,151)

 Assumed
 0

 Ceded
 4,354,151

 Net
 \$0

- D. The Company did not write off any uncollectible balances in 2007.
- E. The Company does not have ceded commutations.
- F. The Company does not have any retroactive reinsurance agreements.
- G. The Company has not entered into any deposit type reinsurance agreements as of December 31, 2007.

Note 23 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

The Company does not have net accrued retrospective premiums.

Note 24 - Changes in Incurred Losses and Loss Adjustment Expenses

As a result of the Inter-company 100% Quota Share Reinsurance Agreement with LMIC (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 an affiliate, LMIC Pursuant to the Agreement, after external reinsurance, the Company cedes its net underwriting activity to LMIC.

Note 26- Structured Settlements

- A. As a result of the Inter-company 100% Quota Share Reinsurance Agreement with LMIC (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

Note 29 - Premium Deficiency Reserves

As of December 31, 2007, the Company had no liabilities related to premium deficiency reserves. The Company considers anticipated investment income when calculating its premium deficiency reserves.

Note 30- High Dollar Deductible Policies

As a result of the Inter-company 100% Quota Share Reinsurance Agreement with LMIC (see Note 25), the Company does not have any net high dollar deductible policy liabilities.

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

Not applicable

Note 32 - Asbestos/Environmental Reserves

As a result of the Inter-company 100% Quota Share Reinsurance Agreement with LMIC (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

SUMMARY INVESTMENT SCHEDULE

		Gros		Admitted A	d in the
		Investment		Annual St	
	Investment Outrosides	1	2	3	4
	Investment Categories	Amount	Percentage	Amount	Percentage
 1. Bo	onds:				
	1 U.S. treasury securities	28,872,503	23.595	28,872,503	23.595
	2 U.S. government agency obligations (excluding mortgage-backed securities):				
	1.21 Issued by U.S. government agencies	14,319,926	11.702	14,319,926	11.702
	1.22 Issued by U.S. government sponsored agencies	4,132,676	3.377	4,132,676	3.377
1.3	3 Foreign government (including Canada, excluding mortgage-backed securities)				
1.	4 Securities issued by states, territories, and possessions				
	and political subdivisions in the U.S.:				
	1.41 States, territories and possessions general obligations				
	1.42 Political subdivisions of states, territories and possessions and political				
	subdivisions general obligations				
	1.43 Revenue and assessment obligations	1,000,000	0.817	1,000,000	0.817
1	1.44 Industrial development and similar obligations				
1.3	5 Mortgage-backed securities (includes residential and commercial MBS): 1.51 Pass-through securities:				
	1 511 Issued or guarantood by CNMA				
	1.512 Issued or guaranteed by FNMA and FHLMC	29,329,903	23.969	29,329,903	23.969
	1.513 All other				
	1.52 CMOs and REMICs:		*******		
	1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA	6,471,518	5.289	6,471,518	5.289
	1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-				
	backed securities issued or guaranteed by agencies shown in Line 1.521	1,001,307	0.818	1,001,307	0.818
	1.523 All other	6,449,712	5.271	6,449,712	5.271
2. Of	her debt and other fixed income securities (excluding short term):				
2.	, , , , , , , , , , , , , , , , , , , ,	21,722,837	17.752	21,722,837	17.752
	2 Unaffiliated foreign securities	1,499,605	1.226	1,499,605	1.226
l	3 Affiliated securities				
	uity interests: 1 Investments in mutual funds	0.564.000	7.817	0 564 000	7 017
	Preferred stocks:	9,564,998	7.017	9,564,998	7.817
] "	3.21 Affiliated				
	3.22 Unaffiliated				
3.	Publicly traded equity securities (excluding preferred stocks):		*******		
	3.31 Affiliated				
	3.32 Unaffiliated				
3.4	4 Other equity securities:				
	3.41 Affiliated				
	3.42 Unaffiliated				
3.	5 Other equity interests including tangible personal property under lease:				
	3.51 Affiliated				
 4. M	3.52 Unaffiliated prtgage loans:				
l	1. Construction and land development				
l	2 Agricultural				
	3 Single family residential properties				
4.					
4.					
4.					
l	pal estate investments:				
	1 Property occupied by company				
5.1	2 Property held for production of income				
	(including \$ 0 of property acquired in satisfaction of debt)				
5.	3 Property held for sale (including \$ 0 property				
6 0	acquired in satisfaction of debt) ontract loans				
	ontract loans eceivables for securities				
	ish, cash equivalents and short-term investments	(1,998,515)	(1.633)	(1,998,515)	(1.633)
	her invested assets	[(1,000,010)]	(1.000)	(1,550,515)	(1.009)
l	tal invested assets	122,366,470	100.000	122,366,470	100.000
1U. IC	ital ilivesteu assets	122,366,470	100.000	122,366,470	100.000

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?	Yes [>	(]	No []	
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?	Yes [X	(]	No[] N	/A [
1.3	State Regulating?			New York	
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes []	No [X]	
2.2	If yes, date of change:				
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made.		1	2/31/2005	
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.		12	2/31/2001	
3.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).		0:	3/11/2005	
3.4	By what department or departments? Property & Casualty Bureau of the New York State Insurance Department				
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:				
	4.11 sales of new business? 4.12 renewals?	Yes [Yes [•	No [X] No [X]	
4.2	During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:				
	4.21 sales of new business? 4.22 renewals?	Yes [Yes [•	No [X] No [X]	
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	Yes []	No [X]	
5.2	If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.				
	1 2 3				
	Name of Entity NAIC Company Code State of Domicile				
6 1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable)				
0.1	suspended or revoked by any governmental entity during the reporting period?	Yes []	No [X]	
6.2	If yes, give full information				
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?	Yes []	No [X]	
7.2	If yes,			00/	
	 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact 	 ct).		0%	
	1 2				
	Nationality Type of Entity				
	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?	Yes []	No [X]	
0.2	If response to 8.1 is yes, please identify the name of the bank holding company.				

PART 1 - COMMON INTERROGATORIES

	financial regulatory services agency [i.e.	ore banks, thrifts or securities firms? e the names and locations (city and state of s. the Federal Reserve Board (FRB), the Offi Deposit Insurance Corporation (FDIC) and the	ice of the Comptroll	er of the Currenc	y (OCC), the Office	ce of	;[] No[X]	
	1	2	3	4	5	6	7	
	Affiliate Name	Location (City, State)	FRB	000	OTS	FDIC	SEC	
9.	What is the name and address of the ir Ernst & Young, LLP 200 Clarendon Street, Boston, MA 021	ndependent certified public accountant or acc	counting firm retaine	ed to conduct the	annual audit?			
10.	What is the name, address and affiliatic consulting firm) of the individual providi 55 Water Street, New York, NY 10041	on (officer/employee of the reporting entity or ng the statement of actuarial opinion/certifica	r actuary/consultant ation? Kevin Cawle	associated with a	an actuarial			
11.1	Does the reporting entity own any secu	rities of a real estate holding company or oth		-		Yes	[] No[X]	
		11.11 Name of rea 11.12 Number of p	parcels involved			_		0
11.2	If yes, provide explanation	11.13 Total book/a	adjusted carrying va	llue		\$		0
		F ALIEN REPORTING ENTITIES ONLY: the year in the United States manager or the	a United States true	toos of the report	ting optity?			
12.1								
12.2		ss transacted for the reporting entity through					[] No[X]	
		any of the trust indentures during the year?					[] No[X]	
12.4	.4 If answer to (12.3) is yes, has the domiciliary or entry state approved the changes?						[] No[]	N/A [X]
13.1	.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? a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships:						[X] No[]	
3.11	b. Full, fair, accurate, timely and unders c. Compliance with applicable governmd. The prompt internal reporting of viola e. Accountability for adherence to the country of the response to 13.1 is No, please ex	ations to an appropriate person or persons id	entified in the code	; and				
13.2 3.21	Has the code of ethics for senior mana If the response to 13.2 is Yes, provide	gers been amended? information related to amendment(s).				Yes	[] No[X]	
13.3	Have any provisions of the code of ethi	ics been waived for any of the specified offic the nature of any waiver(s).	ers?				[] No[X]	
0.01								
		BOARD OF	DIRECTORS	* * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * * *			
14.	Is the purchase or sale of all investmer	its of the reporting entity passed upon either		ectors or a suborc	dinate			
	committee thereof?		·			Yes	[X] No[]	
15.	committees thereof?	ete permanent record of the proceedings of i	ts board of director	s and all subordin	nate	Yes	[X] No[]	
16.		procedure for disclosure to its board of directs, directors, trustees or responsible employed.				Yes	;[X] No[]	
		FINA	NCIAL					
17.		g a basis of accounting other than Statutory	Accounting Principl	es (e.g., Generall	ly Accepted			
18.1	Accounting Principles)? Total amount loaned during the year (ir	nclusive of Separate Accounts, exclusive of p	policy loans):			Yes	[] No[X]	
	Ţ, ,	18.11 To directors				\$		0
		18.12 To stockhol 18.13 Trustees, su		aternal only)		\$ \$		0
18.2	Total amount of loans outstanding at th	e end of year (inclusive of Separate Accoun	ts, exclusive of poli	cy loans):				
		18.21 To directors 18.22 To stockholo				\$.s		0
		18.23 Trustees, su				<u>~</u>		0

PART 1 - COMMON INTERROGATORIES

19.1	Were any assets reported in this statement subject obligation being reported in the statement?	to a contractual obligation to transfe	er to another party without th	ne liability for such	Yes [] No [X]
19.2	If yes, state the amount thereof at December 31 of	the current year:			
		19.21 Rented from ot			\$ 0
		19.22 Borrowed from 19.23 Leased from ot			\$ <u>0</u>
		19.24 Other	1615		\$ 0
20.1	Does this statement include payments for assessm association assessments?	ents as described in the Annual Sta	tement Instructions other that	an guaranty fund or guaranty	Yes [] No [X]
20.2	If answer is yes:	20.21 Amount paid as	losses or risk adjustment		\$ 0
		20.22 Amount paid as	expenses		\$ 0
21.1	Does the reporting entity report any amounts due fr	20.23 Other amounts		2	\$0 Yes[X] No[]
	Does the reporting entity report any amounts due fresh fryes, indicate any amounts receivable from parent		on rage 2 of this statement	ŗ	\$ 0
21.2	in yes, indicate any amounts receivable from parent	i included in the rage 2 amount.			<u>v</u>
		INVEST	MENT		
22.1	Were all the stocks, bonds and other securities owr in the actual possession of the reporting entity on s	•			Yes[X] No[]
22.2	If no, give full and complete information, relating the	ereto			
23.1	Were any of the stocks, bonds or other assets of th control of the reporting entity, or has the reporting e is currently in force? (Exclude securities subject to	entity sold or transferred any assets	· · · · · · · · · · · · · · · · · · ·	•	Yes [X] No []
23.2	If yes, state the amount thereof at December 31 of				
20.2	in yes, state the amount thereof at December 51 of	•	Loaned to others		\$ 0
			Subject to repurchase agree	ements	\$ 0
		23.23	Subject to reverse repurcha	se agreements	\$ 0
			Subject to dollar repurchase		\$0
			Subject to reverse dollar rep	ourchase agreements	\$0
			Pledged as collateral	do	\$ 0
			Placed under option agreen Letter stock or securities re-		\$ <u> </u>
			On deposit with state or oth		\$ 5,432,614
			Other	or regulatory wear	\$ 0
23.3	For category (23.28) provide the following:				
	1)	3	\neg
	Nature of Restriction	Desci	iption	Amount	
					\exists
24.1	Does the reporting entity have any hedging transac	tions reported on Schedule DB?			Yes[] No[X]
24.2	If yes, has a comprehensive description of the hedge		o the demiciliary state?		
24.2		ging program been made available t	o the domiciliary state?		Yes [] No [] N/A [X]
	If no, attach a description with this statement.				
25.1	Were any preferred stocks or bonds owned as of D issuer, convertible into equity?	ecember 31 of the current year mar	ndatorily convertible into equ	ity, or, at the option of the	Yes [] No [X]
25.2	If yes, state the amount thereof at December 31 of	the current year.			\$0
26.	Excluding items in Schedule E, real estate, mortgage	ge loans and investments held phys	ically in the reporting entity's	s offices, vaults or	
	safety deposit boxes, were all stocks, bonds and ot with a qualified bank or trust company in accordance agreements of the NAIC Financial Condition Examination of the NAIC Financial Condition of the NAIC Financial Condition Examination of the NAIC Financial Condition of the NAIC Financ	ther securities owned throughout the ce with Section 3, III Conducting Exa	current year held pursuant	to a custodial agreement	Yes[X] No[]
26.01	For agreements that comply with the requirements	of the NAIC Financial Condition Exa	aminers Handbook, complete	e the following:	
	1			2	
	Name of Custodi	an(s)		an's Address	
	JP Morgan Chase		3 Chase Metro Tech Center	r Brooklyn, NY 11245	-
					\exists
	1				_
26.02	Programme Progra	uirements of the NAIC Financial Cor	ndition Examiners Handbook	, provide the	
	1	2		3	
	Name(s)	Location(s)	Com	plete Explanation(s)	$\overline{}$
					\Box
	1		I		1

Yes [] No [X]

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

PART 1 - COMMON INTERROGATORIES

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

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

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

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

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

Yes [] No [X]

27.2 If yes, complete the following schedule:

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

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

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

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

	1	2	3
			Excess of Statement
			over Fair Value
	Statement (Admitted)		(-), or Fair Value
	Value	Fair Value	over Statement (+)
28.1 Bonds	181,958,366	181,379,999	(578,367)
28.2 Preferred stocks			
28.3 Totals	181 958 366	181 370 000	(578 367)

20.4	Describe the sources of	methods utilized in determin	ing the fair values	5. 3VU FIID COID,	Bloomberd Broker	Quotes, and Analy	/lically Determined
			o .		.		

29.1 Have all the filing requirements of the Purposes and Procedures manual of the NAIC Securities Valuation Office been followed?

Yes [X] No []

29.2 If no, list exceptions:

OTHER

30.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

\$ 208,899

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

1	2
Name	Amount Paid
ISO	\$ 206,530
	\$
	\$

31.1 Amount of payments for legal expenses, if any?

0

PART 1 - COMMON INTERROGATORIES

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

1	2
Name	Amount Paid
	\$
	\$
	\$

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

\$	0

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

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

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force?						
1.2 If yes, indicate premium earned on U. S. business only.							0
1.3	What portion of Item (1.2) is not reported on the Medicare Supplem	ent Insurance Experience Exhibit?			\$		0
	1.31 Reason for excluding	************					
1 /	Indicate amount of earned premium attributable to Canadian and/or	r Other Alien not included in Item (1	2) above		¢		Λ
	•	,	.2) above.		\$ \$		0
	Indicate total incurred claims on all Medicare Supplement insurance	<i>‡</i> .			Φ		
1.6	Individual policies:	rrant three years:					
	1.61	rrent three years:			¢		٥
	1.62	Total premium earned			ф		
		Total incurred claims			ф		0
	1.63	Number of covered lives			\$		0
	•	s prior to most current three years:			¢.		0
	1.64	Total premium earned			<u>\$</u>		0
	1.65	Total incurred claims			\$		0
4 -	1.66	Number of covered lives			\$		0
1.7	Group policies:						
		rrent three years:			•		•
	1.71	Total premium earned			\$		0
	1.72	Total incurred claims			\$		0
	1.73	Number of covered lives			\$		0
	•	s prior to most current three years:					
	1.74	Total premium earned			\$		0
	1.75	Total incurred claims			\$		0
	1.76	Number of covered lives			\$		0
2.	Health Test:			_			
			1	2			
			Current Year	Prior Year			
		emium Numerator	\$	\$ 0			
	2.2 Pre	emium Denominator	\$ 0	\$ 0			
	2.3 Pre	emium Ratio (2.1/2.2)	0.00	0.00			
		serve Numerator	\$	\$ 0			
		serve Denominator	\$ 0	\$ 0			
	2.6 Res	serve Ratio (2.4/2.5)	0.00	0.00			
3.1	Does the reporting entity issue both participating and non-participat	ing policies?			YES [] NO [X]	
3.2	If yes, state the amount of calendar year premiums written on:						
	3.21	Participating policies			\$		0
	3.22	Non-participating policies			\$		0
4.	For Mutual Reporting Entities and Reciprocal Exchange only:						
4.1	Does the reporting entity issue assessable policies?				YES [] NO [X]	
4.2	Does the reporting entity issue non-assessable policies?				YES [] NO [X]	
4.3	If assessable policies are issued, what is the extent of the continge	nt liability of the policyholders?					0 %
4.4	Total amount of assessments paid or ordered to be paid during the	year on deposit notes or contingen	t 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 compensa	ation		YES [] NO [X] N/A []
	5.22	As a direct expense of the exchan	ige		YES [] NO [X] N/A []
5.3	What expenses of the Exchange are not paid out of the compensat	ion of the Attorney-in-fact?					
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of	certain conditions, been deferred?			YEST] NO [X]	
					-	1[1,1]	
•	***************************************						

6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers'

GENERAL INTERROGATORIES

(Continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	compensation contract issued without limit of loss: The Company does not write workers compensation insurance.	
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: All property locations are tracked by the Company. The World cat software is used to analyze exposure concentrations and model wind and earthquake scenarios and to calculate terrorism aggregations and clash event scenarios. Open Energy Software models are used for offshore energy business to track platform aggregations and perform windstorm analysis.	· ·
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss? The Company has purchased proportional and risk catastrophe excess of loss reinsurance to protect from concentrations of insured exposures. The catastrophe reinsurance purchased protects the Company for at least a 1-in-100 year return period for wind exposures and 1-in-250 year return period for earthquake exposures.	
6.4		V=0.1V1.10.1
6.5	probable maximum loss attributable to a single loss event or occurrence? If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss	YES[X]NO[]
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 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[X]NO[]
	If yes, indicate the number of reinsurance contracts containing such provisions. If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	YES[]NO[X]
	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? If yes, give full information	YES[]NO[X]
8.2	ir yes, give full information	
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	
	(d) A unlateral 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	
0.0	(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	YEST INOTAT
9.3	or its affiliates in a separate reinsurance contract. If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	YES[]NO[X]
9.4	Except for transactions meeting the requirements of paragraph 30 of SSAP No. 62, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the	
	period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or	
	(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	YES[]NO[X]

(Continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

9.5	If yes to 9.4, explain in the Reinsurance	e Summary Supplement	al Filing for General In	terrogatory 9 (Section I	D) why the contract(s)			
	is treated differently for GAAP and SAF	P.						
9.6	The reporting entity is exempt from the	Reinsurance Attestation	n Supplement under o	ne or more of the follow	ing criteria:			
	(a) The entity does not utilize reinsur	ance; or,					YES[]NO[X]
	(b) The entity only engages in a 100°	% quota share contract w	vith an affiliate and the	affiliated or lead comp	any has filed an			
	attestation supplement; or,						YES[]NO[X]
	(c) The entity has no external cessio	ns and only participates	in an intercompany po	ool and the affiliated or I	ead company has			
	filed an attestation supplement.						YES[]NO[X]
10.	If the reporting entity has assumed risk	•	-		insurances a reserve eq	ual to that		
	which the original entity would have be	en required to charge ha	ad it retained the risks.	Has this been done?			YES[X]NO[
	Has the reporting entity guaranteed po	licies issued by any other	er entity and now in for	ce:			YES[]NO[X]
11.2	If yes, give full information							
12.1	If the reporting entity recorded accrued	I retrospective premiums	s on insurance contrac	ts on Line 13.3 of the a	sset schedule. Page 2.	state the		
	amount of corresponding liabilities reco				550t 5511544.5, 1 4g5 <u>-</u> , 1	, and and		
	amount of confederating habitates reco	12.11	Unpaid losses				\$	0
		12.12	•	a expenses (including l	oss adjustment expense	·e)	\$	0
		12.12	onpaid underwhilm	g expenses (moldaling i	ooo aajaotinoni expense	0)	<u> </u>	
12.2	Of the amount on Line 13.3, Page 2, s	tate the amount that is s	ecured by letters of cre	edit, collateral and othe	r funds?		\$	0
12.3	If the reporting entity underwrites comm	mercial insurance risks, s	such as workers' comp	pensation, are premium	notes or promissory no	tes accepted		
	from its insureds covering unpaid prem	niums and/or unpaid loss	es?				YES[]NO[X] N/A []
12 /	If yes, provide the range of interest rate	os chargod undor such n	actos during the period	Loovarad by this statem	ont:			
12.4	if yes, provide the range of interest rate	es charged under such h 12.41		i covered by this statem	ient.			0.000 %
		12.42						0.000 %
12.5	Are letters of gradit or colleteral and of			Lby the reporting entity	to cooure promium note	or or		0.000 /0
12.5	Are letters of credit or collateral and ot		-					
	promissory notes taken by a reporting		or the reporting entity s	reported direct unpaid	loss reserves, including	unpaid	VECT INOTA	1
40 C	losses under loss deductible features of	•					YES[]NO[X	1
12.0	If yes, state the amount thereof at Dec	•					Φ.	0
		12.61		£ d -			\$	0
10.1		12.62					\$	0
13.1	0 00 0	,	•	*		P	\$	48,000,000
13.2	Does any reinsurance contract consider	ered in the calculation of	this amount include a	n aggregate limit of reco	overy without also includ	ing a		_
40.0	reinstatement provision?	(. 7)	Les lises and sales are	and a ball of the first	N-C		YES[]NO[X]
13.3	State the number of reinsurance contra	, -		•	litative programs, autor	atic		40
	facilities or facultative obligatory contra	icts) considered in the ca	alculation of the amou	nt.				10
14.1	Is the company a cedant in a multiple of	cedant reinsurance contr	ract?				YES[X]NO[]
14.2	If yes, please describe the method of a	allocating and recording r	reinsurance among the	e cedants: Premiu	ms were allocated base	d on		
	exposures; recoverables were based of	n losses incurred.						
14.3	If the answer to 14.1 is yes, are the me	ethods described in item	14.2 entirely containe	d in the respective mult	iple cedant reinsurance			
	contracts?		· ··· orianory corrigance	a iii aio roopootiro iiiait	.p.o oouaoou.a		YES[]NO[X	1
14 4	If the answer to 14.3 is no, are all the r	methods described in 14	2 entirely contained in	written agreements?			YES[]NO[X	-
	If the answer to 14.4 is no, please expl		re allocated based on	_			120[]110[X	1
	exposures; recoverables were based of	n lacaca incurred						
		* * * * * * * * * * * * * * * * * * * *						
	Has the reporting entity guaranteed an	y financed premium acco	ounts?				YES[]NO[X]
15.2	If yes, give full information							
16.1	Does the reporting entity write any war	ranty business?					YES[]NO[X	()
	If yes, disclose the following information	n for each of the following	ng types of warranty co	overage:				
			•	-				
		1	2	3	4	5		
		Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premiun	n	
		Incurred	Unpaid	Premium	Unearned	Earned		
			·					
	16.11 Home	\$	\$ 0	\$ 0	\$		0	
	16.12 Products	\$	\$ 0	\$	\$	\$	0	
	16.13 Automobile	\$	\$ 0	\$ 0	\$ 0	\$	0	
	16.14 Other*	\$	\$ 0	\$ 0	\$ 0	\$	0	
	* Disclose type of coverage:							

(Continued)

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1	Does the reporting entity include amounts recoverable on una	uthorized reinsurance in Schedule F - Part 3 that it excludes from				
	Schedule F - Part 5.		YES [] NO [X]		
	Incurred but not reported losses on contracts not in force prior	ported losses on contracts not in force prior to July 1, 1984 and not subsequently renewed are exempt from inclusion in Sche				
	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 include	d in Schedule F - Part 3 and excluded from Schedule F - Part 5, not included above.				
	17.18	Gross amount of unauthorized reinsurance in Schedule F - Part 3				
		excluded from Schedule F - Part 5	\$	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

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
		2007	2006	2005	2004	2003
\vdash	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,					
"	19.1, 19.2 & 19.3, 19.4)	241,086,255	245,695,484	232,710,758	229,788,950	184,245,479
2	Property lines (Lines 1, 2, 9, 12, 21 & 26)	6,888,657	65,713,918	(326,947)	4,005,059	13,742,509
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	22,165,232	23,095,094	31,671,417	45,165,503	72,719,580
4.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)		(53,239,055)	10,125,693	9,697,172	11,157,355
5.	Nonproportional reinsurance lines (Lines 30, 31 & 32)		(55,255,055)	10,123,033	3,037,172	11,107,000
1 -	Total (Line 34)	270,140,144	281,265,441	274,180,921	288,656,684	281,864,923
"	Net Premiums Written (Page 8, Part 1B, Col. 6)	270,140,144	201,200,441	214,100,321	200,000,004	201,004,323
7	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,					
′ ·	40.4.40.0.40.0.40.40					
۱۵	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
1 '	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)					
1	N					
11.	Nonproportional reinsurance lines (Lines 30, 31 & 32)					
12.	Total (Line 34)					
1,0	Statement of Income (Page 4)					
1	Net underwriting gain (loss) (Line 8)		0.754.045		0.404.004	4 000 575
14.	Net investment gain (loss) (Line 11)		6,751,615	5,558,585	8,104,331	1,200,575
1	Total other income (Line 15)	674,834	(44,467)			
	Dividends to policyholders (Line 17)					************
	Federal and foreign income taxes incurred (Line 19)	3,952,743	2,338,807	2,320,657	4,290,263	264,127
18.	Net income (Line 20)	7,506,370	4,368,341	3,237,928	3,814,068	936,448
	Balance Sheet Lines (Pages 2 and 3)					
19.	Total admitted assets excluding protected cell business					
	(Page 2, Line 24, Col. 3)	148,455,198	117,980,703	135,118,739	115,988,754	91,515,601
20.	Premiums and considerations (Page 2, Col. 3)					
	20.1 In course of collection (Line 13.1)					
	20.2 Deferred and not yet due (Line 13.2)					
	20.3 Accrued retrospective premiums (Line 13.3)					
21.	Total liabilities excluding protected cell business (Page 3, Line 24)	62,008,374	41,888,695	68,391,875	54,095,683	30,755,312
22.	Losses (Page 3, Line 1)					
23.	Loss adjustment expenses (Page 3, Line 3)					
24.	Unearned premiums (Page 3, Line 9)					
25.	Capital paid up (Page 3, Lines 28 & 29)	3,500,000	3,500,000	3,500,000	3,500,000	3,500,000
26.	Surplus as regards policyholders (Page 3, Line 35)	86,446,824	76,092,008	66,726,864	61,893,071	60,760,289
	Cash Flow (Page 5)					
27.	Net cash from operations (Line 11)	1,187,480	(3,777,350)	7,555,870	(4,067,402)	13,258,203
İ	Risk-Based Capital Analysis					
28.	Total adjusted capital	86,446,824	76,092,008	66,726,864	61,893,071	60,760,289
	Authorized control level risk-based capital	22,204,229	22,592,168	18,702,949	14,165,123	9,277,477
	Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
	(Page 2, Col. 3)					
	(Item divided by Page 2, Line 10, Col. 3) x 100.0					
30.	Bonds (Line 1)	93.8	141.7	73.5	104.0	67.3
	Stocks (Lines 2.1 & 2.2)					
32.	Mortgage loans on real estate (Lines 3.1 and 3.2)					
33.	Real estate (Lines 4.1, 4.2 & 4.3)			* * * * * * * * * * * * * * * * * * * *		
34.	Real estate (Lines 4.1, 4.2 & 4.3) Cash, cash equivalents and short-term investments (Line 5)	6.2	(41.7)	25.7	(5.1)	31.3
1	Out to the control of the Co					
	Other invested assets (Line 7)			0.8	1.1	1.1
	5 1 11 6 11 (11 6)	_ I				0.3
38.		1 1				
1	One and anticological and invested assets (Line 10)	100.0	100.0	100.0	100.0	100.0
] 33.	Investments in Parent, Subsidiaries and Affiliates		100.0	100.0	100.0	100.0
40	A(C) + 11 - 1 (O D O 1) OF O 4)					
1	Affiliated bonds, (Sch. D, Summary, Line 25, Col. 1)					
41.	Affiliated preferred stocks (Sch. D, Summary, Line 39, Col. 1)					
42.	Affiliated common stocks (Sch. D, Summary, Line 53, Col. 1)					
43.	Affiliated short-term investments (subtotals included in Schedule DA,					1
 	Part 2, Col. 5, Line 7)					
	Affiliated mortgage loans on real estate					
45.	All other affiliated					ļ
1	Total of above Lines 40 to 45					
	Percentage of investments in parent, subsidiaries and affiliates	1 1				1
47.		l			1	
47.	to surplus as regards policyholders (Line 46 above divided by Page 3, Col. 1, Line 35 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

		1 2007	2 2006	3 2005	4 2004	5 2003
	Capital and Surplus Accounts (Page 4)					
48. 49.	Net unrealized capital gains (losses) (Line 24) Dividends to stockholders (Line 35)		108,956	(108,956)		
	Change in surplus as regards policyholders for the year (Line 38)	10,354,813	9,365,145	4,833,795	1,132,782	54,268,652
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
51.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	51,194,241	23,235,001	17,087,667	7,831,048	733,619
52	Property lines (Lines 1, 2, 9, 12, 21 & 26)	(3,558,958)		1,869,714	17,381,322	4,137,554
53.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	36,317,828		39,985,221	49,254,706	35,814,719
1	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)					
55. 56	Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34)	83,953,111	63,197,037	58,942,602	74,467,076	40,685,892
30.	Total (Line 04)	00,000,111	00,107,007	30,342,002	74,407,070	40,003,032
	Net Losses Paid (Page 9, Part 2, Col. 4)					
57.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
59.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
60.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)					
	Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34)					
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
63.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
	Losses incurred (Line 2)					
65.	Loss expenses incurred (Line 3)					
66. 67.	Other underwriting expenses incurred (Line 4) Net underwriting gain (loss) (Line 8)					
	Other Percentages					
68.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 34 x 100.0)					
69.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
70.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 34 divided by Page 3, Line 35, Col. 1 x 100.0)					
	One Year Loss Development (000 omitted)					
71.	Development in estimated losses and loss expenses incurred prior					
72	to current year (Schedule P, Part 2 - Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred					
12.	to policyholders' surplus of prior year end (Line 71 above divided by Page 4, Line 21, Col. 1 x 100.0)					
	Two Year Loss Development (000 omitted)					
73	Development in estimated losses and loss expenses incurred					
	2 years before the current year and prior year (Schedule P,					
]_,	Part 2 - Summary, Line 12, Col. 12)					
/4.	Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 73 above divided by Page 4, Line 21, Col. 2 x 100.0)					

SCHEDULE D - SUMMARY BY COUNTRY

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

		1	2	3	4
Description		Book/Adjusted Carrying Value	Fair Value	Actual Cost	Par Value of Bonds
BONDS Governments (Including all obligations guaranteed	1. United States 2. Canada 3. Other Countries	47,325,108	47,592,009	47,766,303	46,842,48
by governments)	4. Totals	47,325,108	47,592,009	47,766,303	46,842,48
States, Territories and Possessions (Direct and guaranteed)	5. United States 6. Canada 7. Other Countries				
Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	8. Totals 9. United States 10. Canada 11. Other Countries 12. Totals				
Special revenue and special assessment obligations and all non-guaranteed obligations of agencies and authorities of	13. United States 14. Canada 15. Other Countries		38,751,956	38,817,327	38,945,69
governments and their political subdivisions	16. Totals	38,812,859	38,751,956	38,817,327	38,945,69
Public Utilities (unaffiliated)	17. United States 18. Canada 19. Other Countries	5,011,083	4,873,270	5,043,070	5,000,000
	20. Totals	5,011,083	4,873,270	5,043,070	5,000,000
	21. United States 22. Canada	22,151,331	21,566,090	22,284,373	21,803,19
Industrial and Miscellaneous and Credit Tenant Loans (unaffiliated)	23. Other Countries	1,499,606	1,438,295	1,499,460	1,500,00
, ,	24. Totals	23,650,937	23,004,385	23,783,833	23,303,19
Parent, Subsidiaries and Affiliates	25. Totals	444 700 00-	444.004.000	445 440 500	444.004.00
	26. Total Bonds	114,799,987	114,221,620	115,410,533	114,091,37
PREFERRED STOCKS Public Utilities (unaffiliated)	27. United States 28. Canada 29. Other Countries				
Banks, Trust and Insurance Companies (unaffiliated)	30. Totals 31. United States 32. Canada 33. Other Countries 34. Totals				
Industrial and Miscellaneous (unaffiliated)	35. United States	I I			
Parent, Subsidiaries and Affiliates	39. Totals				
. s. s. s. goddoddanos ana / minatos	40. Total Preferred Stocks				
COMMON STOCKS Public Utilities (unaffiliated)	41. United States 42. Canada 43. Other Countries				
	44. Totals				
Banks, Trust and Insurance Companies (unaffiliated)	45. United States 46. Canada 47. Other Countries				
	48. Totals				
Industrial and Miscellaneous (unaffiliated)	49. United States 50. Canada 51. Other Countries				
Descrit Coheidining and Affiliate	52. Totals				
Parent, Subsidiaries and Affiliates	53. Totals 54. Total Common Stocks				
	54. Total Common Stocks 55. Total Stocks				
	OU. TOTAL OLUCKS				

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value of bonds and		7. Amortization of premium	180,691
	stocks, prior year	94,701,599	Foreign Exchange Adjustment:	
2.	Cost of bonds and stocks acquired, Column 7, Part 3	48,993,824	8.1 Column 15, Part 1	
3.	Accrual of discount	73,585	8.2 Column 19, Part 2 Section 1	
4.	Increase (decrease) by adjustment:		8.3 Column 16, Part 2, Section 2	
	4.1 Columns 12 - 14, Part 1		8.4 Column 15, Part 4	
	4.2 Column 15 - 17, Part 2, Section 1		Book/adjusted carrying value at end of current period	114,799,987
	4.3 Column 15, Part 2, Section 2		10. Total valuation allowance	
	4.4 Column 11 - 13, Part 4		11. Subtotal (Lines 9 plus 10)	114,799,987
5.	Total gain (loss), Column 19, Part 4	(2,530)	12. Total nonadmitted amounts	
6.	Deduct consideration for bonds and stocks		13. Statement value of bonds and stocks, current period	114,799,987
	disposed of Column 7, Part 4	28,785,800		
	-			

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

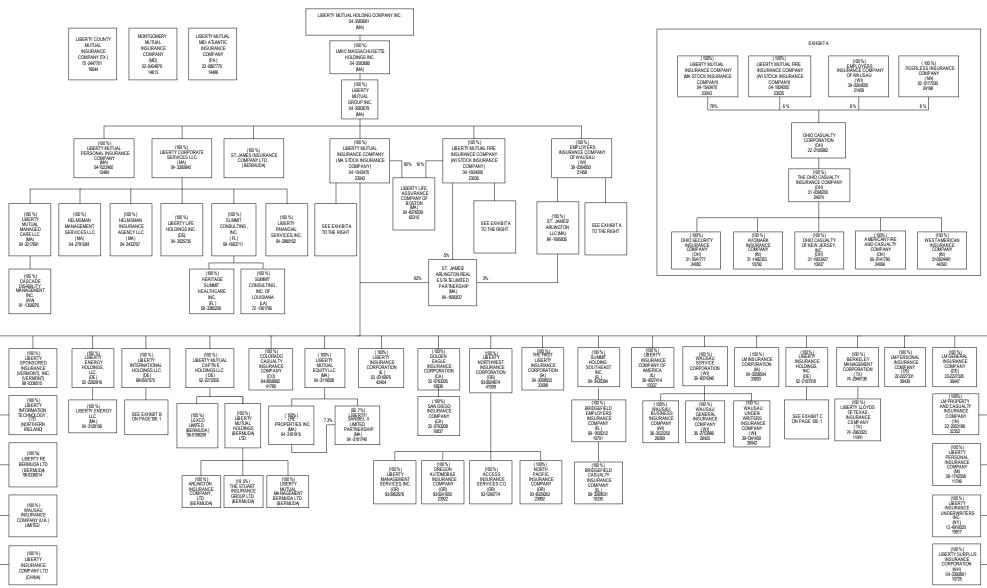
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

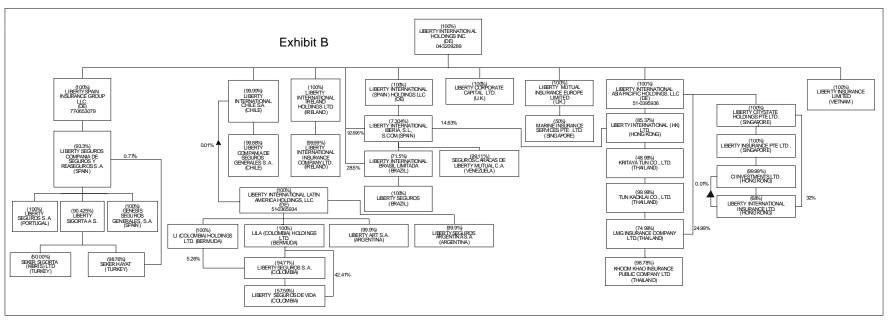
		1	Gross Premiums,	, Including Policy	4	5	6	7	8	9
		ls	and Membersh		Dividends				Finance	Direct Premium
		Insurer	Return Premiums		Paid or	Direct			and	Written for
		Licen-	on Policies		Credited to	Losses			Service	Federal
		sed?	2	3	Policyholders	Paid	Direct	Direct	Charges Not	Purchasing
		(Yes or	Direct Premiums	Direct Premiums	on Direct	(Deducting	Losses	Losses	Included in	Groups (Included
States, Etc.		No)	Written	Earned	Business	Salvage)	Incurred	Unpaid	Premiums	in Col. 2)
1. Alabama	AL	YES	1,203,678	1,173,826		120,636	263,894	2,888,458		
2. Alaska 3. Arizona	AK AZ	YES YES	699,330 3,382,438	819,856 3,539,102		499,218 165,504	458,453 807,777	2,465,426 7,886,064		
4. Arkansas	AR	YES	1,146,870	1,088,313		611,626	742,283	3,764,988		* * * * * * * * * * * * * * * * * * * *
5. California	CA	YES	41,857,319	40,731,342		11,004,991	17,980,133	74,155,538		
6. Colorado	CO	YES	3,478,197	3,425,256		(3,257,651)	(804,957)	7,848,374		
7. Connecticut	CT	YES	4,204,747	4,301,636		2,301,087	2,509,917	7,408,539		
8. Delaware	DE	YES	(73,996)	(69,002)			(101,261)	166,751		
9. Dist. Columbia	DC	YES	697,632	596,294			155,220	950,852		
10. Florida		YES	7,115,416	6,006,388		1,310,925	690,772	6,663,894		
11. Georgia 12. Hawaii	GA HI	YES YES	4,911,939 2,840,427	4,938,580 2,596,303		2,221,860 447,762	5,098,014 337,225	10,534,182 3,714,913		
13. Idaho	ID	YES	889,686	2,390,303 813,441		15,000	214,795	1,070,954		
14. Illinois	IL	YES	16,991,237	17,433,278		1,983,193	4,281,203	33,128,004		* * * * * * * * * * * * * * * * * * * *
15. Indiana	IN	YES	3,140,239	3,202,364		595,584	7,579	5,663,826		
16. lowa	ΙA	YES	1,423,994	1,384,929		258,550	359,006	1,799,861		
17. Kansas	KS	YES	1,678,260	1,732,345		1,139,248	(1,321,992)	2,812,108		
18. Kentucky	KY	YES	1,392,346	1,448,279		317,850	181,818	2,371,417		
19. Louisiana	LA	YES	1,367,235	1,529,140		6,249,066	2,671,886	7,367,805		
20. Maine	ME	YES	689,756	722,015		25,000	1,508,093	2,172,774		
21. Maryland 22. Massachusetts	MD MA	YES YES	1,668,471 9,860,891	2,036,141 10,061,705		65,000 1,297,156	629,941 6,446,358	3,770,361 16,166,236		
23. Michigan	MI	YES	2,429,099	2,791,559		7,081,815	1,639,479	6,848,461		* * * * * * * * * * * * * * * * * * * *
24. Minnesota	MN	YES	4,148,748	4,089,607		74,898	2,561,450	9,097,889		
25. Mississippi	MS	YES	1,182,994	867,696		4,500	472,077	2,186,020		
26. Missouri	MO	YES	4,352,348	4,432,516		387,672	566,035	8,762,499		
27. Montana	MT	YES	122,667	168,892		99,000	(165,109)	388,964		
28. Nebraska	NE	YES	712,817	911,526		, ,	869,001	2,465,087		
29. Nevada	NV	YES	2,021,630	1,762,420		148,564	461,950	3,503,964		
30. New Hampshire	NH	YES	1,112,961	1,186,453		286,649	356,321	1,522,554		
31. New Jersey 32. New Mexico	NJ NM	YES YES	9,042,524 343,816	9,572,699 311,675		4,772,563 379,503	16,055,386 (259,767)	35,893,398 397,049		
33. New York	NY	YES	67,782,695	66,862,051		10,082,842	30,803,331	119,397,886		
34. No. Carolina	NC	YES	3,342,238	3,068,080		115,429	247,886	5,227,926		
35. No. Dakota	ND	YES	238,050	243,157		7,500	55,415	356,326	I	
36. Ohio	ОН	YES	5,293,558	5,239,123		86,731	139,111	9,632,629		
37. Oklahoma	OK	YES	1,214,407	1,427,438			38,984	2,056,177		
38. Oregon	OR	YES	2,392,068	2,070,688		313,287	913,953	4,015,339		
39. Pennsylvania	PA	YES	7,041,497	7,018,229		671,006	2,885,518	13,281,275		
40. Rhode Island	RI	YES	3,398,153	3,410,422		596,272	1,100,827	4,048,952		
41. So. Carolina	SC SD	YES YES	630,839 263,886	650,035 179,087		77,500	(29,929) 531,861	930,799 716,192		
43. Tennessee	TN	YES	3,655,527	3,349,818		134,387	655,846	4,346,679		* * * * * * * * * * * * * * * * * * * *
44. Texas	TX	YES	13,422,185	13,672,004		16,747,803	1,677,748	36,551,301		
45. Utah	UT	YES	2,326,715	2,425,847		608,928	1,704,746	3,606,295		* * * * * * * * * * * * * * * * * * * *
46. Vermont	VT	YES	277,032	235,654			45,321	276,194		
47. Virginia	VA	YES	4,674,674	4,156,855		9,974,347	11,306,580	4,265,783		
48. Washington	WA	YES	10,433,647	10,396,143		1,982,335	3,749,526	16,765,923		
49. West Virginia	WV	YES	2,624,989	2,698,184		1,497,015	2,382,732	4,383,792		
50. Wisconsin	WI	YES	4,605,148	4,697,242		54,830	(76,533)	6,821,804		
51. Wyoming 52. American Samoa	WY AS	YES NO	20,285	22,754			(31,220)	92,924		
53. Guam	GU	NO								
54. Puerto Rico	PR	NO					(1,161)	1,290		
55. U.S. Virgin Islands	VI	NO					2,908	4,498	l	
56. Northern Mariana Islands	MP	NO								
57. Canada	CN	NO					(4,494)	16,811		
58. Aggregate other										ĺ
alien	ОТ	XXX	152,356	162,582		396,133	(3,355,860)	(1,456,988)	-	
59. Totals		(a) 51	269,825,665	267,591,967		83,953,114	120,416,076	511,177,017		
DETAILS OF WRITE-INS										
5801. Other alien		XXX	152,356	162,582		396,133	(3,355,860)	(1,456,988)		
5802.		XXX					>:/:::://///////////////////////////		* * * * * * * * * * * * * * * * * * * *	
5803.		XXX					* * * * * * * * * * * * * * *			
5898. Summary of remaining			1			į l			l	1
write-ins for Line 58		V V V	1			į l			l	1
from overflow page		XXX	 			 				
5899. Totals (Lines 5801			1			į l			l	1
through 5803 + 5898)			1			i			ı	1
(Line 58 above)		XXX	152,356	162,582	1	396,133	(3,355,860)	(1,456,988)	1	

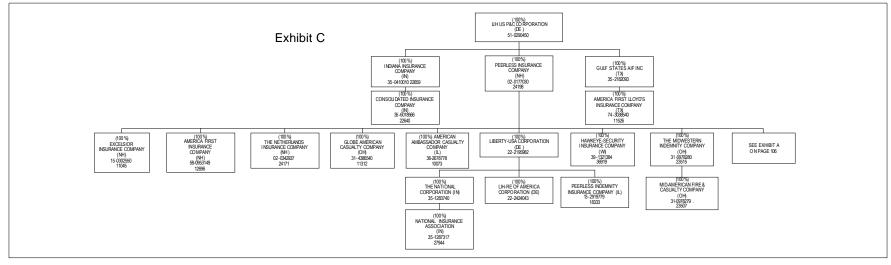
Explanation of basis of allocation of premiums by states, etc.							
*Location of coverage - Fire, Allied Lines, Homeowners Multi Peril, Commercial Multi Peril, Earthquake, Boiler and M	achinery						
*States of Jurisdiction under which payrolls and resulting premiums are developed - Worker's Compensation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

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



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





Annual Statement for the year 2007 of the	

OVERFLOW PAGE FOR WRITE-INS

ALPHABETICAL INDEX TO PROPERTY AND CASUALTY ANNUAL STATEMENT

Assets	2	Schedule DB - Part D - Section 3	E21
Cash Flow	5	Schedule DB - Part D - Verification Between Years	31
Exhibit of Capital Gains (Losses)		Schedule DB - Part E - Section 1	E22
Exhibit of Net Investment Income	10	Schedule DB - Part E - Verification	31
Exhibit of Nonadmitted Assets	13	Schedule DB - Part F - Section 1	32
Exhibit of Premiums and Losses (State Page)	20	Schedule DB - Part F - Section 2	33
Five-Year Historical Data	10	Schedule E - Part 1 - Cash	E23
General Interrogatories	16	Schedule E - Part 2 - Cash Equivalents	E24
Jurat Page	1	Schedule E - Part 3 - Special Deposits	E25
Liabilities, Surplus and Other Funds	2	Schedule F - Part 1	34
Notes To Financial Statements	1.4	Schedule F - Part 2	35
Overflow Page For Write-ins	100	Schedule F - Part 3	36
Schedule A - Part 1	⊏01	Schedule F - Part 4	37
Schedule A - Part 2	F02	Schedule F - Part 5	38
Schedule A - Part 3	E03	Schedule F - Part 6	39
Schedule A - Verification Between Years	21	Schedule F - Part 7	40
Schedule B - Part 1	EOA	Schedule F - Part 8	41
Schedule B - Part 2	E05	Schedule H - Accident and Health Exhibit - Part 1	42
Schedule B - Verification Between Years	21	Schedule H - Part 5 - Health Claims	44
Schedule BA - Part 1	Ε06	Schedule H - Parts - 2, 3, and 4	43
Schedule BA - Part 2	E07	Schedule P - Part 1 - Analysis of Losses and Loss Expenses	45
Schedule BA - Verification Between Years	21	Schedule P - Part 1A - Homeowners/Farmowners	47
Schedule D - Part 1	E08	Schedule P - Part 1B - Private Passenger Auto Liability/Medical	48
Schedule D - Part 1A - Section 1	23	Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical	49
Schedule D - Part 1A - Section 2	26	Schedule P - Part 1D - Workers' Compensation	50
Schedule D - Part 2 - Section 1	E09	Schedule P - Part 1E - Commercial Multiple Peril	51
Schedule D - Part 2 - Section 2	E10	Schedule P - Part 1F - Section 1 - Medical Malpractice - Occurrence	52
Schedule D - Part 3	E11	Schedule P - Part 1F - Section 2 - Medical Malpractice - Claims-Made	53
Schedule D - Part 4	E12	Schedule P - Part 1G - Spec. Liab. (Ocean, Marine, Aircr.(A.P.), Boiler & Mach.)	54
Schedule D - Part 5	⊏12	Schedule P - Part 1H - Section 1 - Other Liability - Occurrence	55
Schedule D - Part 6 - Section 1	E14	Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made	56
Schedule D - Part 6 - Section 2		Schedule P - Part 1I - Spec. Prop. (Fire, A.L., Inld. Ma., Earth., Burg. & Thft.)	57
Schedule D - Summary By Country	00	Schedule P - Part 1J - Auto Physical Damage	58
Schedule D - Verification Between Years		Schedule P - Part 1K - Fidelity/Surety	
Schedule DA - Part 1	E45	Schedule P - Part 1L - Other (Including Credit, Accident and Health)	
Schedule DA - Part 2 - Verification Between Years		Schedule P - Part 1M - International	04
Schedule DB - Part A - Section 1	E16	Schedule P - Part 1N - Reinsurance	
Schedule DB - Part A - Section 2	E16	Schedule P - Part 10 - Reinsurance	
Schedule DB - Part A - Section 3	⊏17	Schedule P - Part 1P - Reinsurance	C4
Schedule DB - Part A - Verification Between Years	30	Schedule P - Part 1R - Section 1 - Products Liability - Occurrence	65
Schedule DB - Part B - Section 1		Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made	66
Schedule DB - Part B - Section 2	= 4.0	Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty	67
Schedule DB - Part B - Section 3	Г10	Schedule P - Part 2A - Homeowners/Farmowners	60
Schedule DB - Part B - Verification Between Years		Schedule P - Part 2B - Private Passenger Auto Liability/Medical	
Schedule DB - Part C - Section 1	Г10	Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical	
Schedule DB - Part C - Section 2	Г10	Schedule P - Part 2D - Workers' Compensation	CO
Schedule DB - Part C - Section 3		Schedule P - Part 2E - Commercial Multiple Peril	60
Schedule DB - Part C - Verification Between Years		Schedule P - Part 2F - Section 1 - Medical Malpractice - Occurrence	
Schedule DB - Part D - Section 1	F20	Schedule P - Part 2F - Section 2 - Medical Malpractice - Claims-Made	69
Schedule DB - Part D - Section 2	E21	Schedule P - Part 2G - Spec. Liab. (Ocean, Marine, Aircr.(A.P.), Boiler & Mach.)	69

ALPHABETICAL INDEX (Continued)

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence	69	Schedule P - Part 40 - Reinsurance	81
Schedule P - Part 2H - Section 2 - Other Liability - Claims-Made	69	Schedule P - Part 4P - Reinsurance	81
Schedule P - Part 2I - Spec. Prop. (Fire, A.L., Inld. Ma., Earth., Burg. & Thft.)	70	Schedule P - Part 4R - Section 1 - Products Liability - Occurrence	82
Schedule P - Part 2J - Auto Physical Damage	70	Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made	82
Schedule P - Part 2K - Fidelity, Surety	70	Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty	82
Schedule P - Part 2L - Other (Including Credit, Accident and Health)	70	Schedule P - Part 5A - Homeowners/Farmowners	83
Schedule P - Part 2M - International	70	Schedule P - Part 5B - Private Passenger Auto Liability/Medical	84
Schedule P - Part 2N - Reinsurance	71	Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical	85
Schedule P - Part 20 - Reinsurance	71	Schedule P - Part 5D - Workers' Compensation	86
Schedule P - Part 2P - Reinsurance	71	Schedule P - Part 5E - Commercial Multiple Peril	87
Schedule P - Part 2R - Section 1 - Products Liability - Occurrence	72	Schedule P - Part 5F - Medical Malpractice - Claims-Made	89
Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made	72	Schedule P - Part 5F - Medical Malpractice - Occurrence	88
Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty	72	Schedule P - Part 5H - Other Liability - Claims-Made	91
Schedule P - Part 3A - Homeowners/Farmowners	73	Schedule P - Part 5H - Other Liability - Occurrence	90
Schedule P - Part 3B - Private Passenger Auto Liability/Medical	73	Schedule P - Part 5R - Products Liability - Claims-Made	93
Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical	73	Schedule P - Part 5R - Products Liability - Occurrence	92
Schedule P - Part 3D - Workers' Compensation	73	Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical	94
Schedule P - Part 3E - Commercial Multiple Peril	73	Schedule P - Part 6D - Workers' Compensation	94
Schedule P - Part 3F - Section 1 - Medical Malpractice - Occurrence	74	Schedule P - Part 6E - Commercial Multiple Peril	95
Schedule P - Part 3F - Section 2 - Medical Malpractice - Claims-Made	74	Schedule P - Part 6H - Other Liability - Claims-Made	96
Schedule P - Part 3G - Spec. Liab. (Ocean, Marine, Aircr.(A.P.), Boiler & Mach.)	74	Schedule P - Part 6H - Other Liability - Occurrence	95
Schedule P - Part 3H - Section 1 - Other Liability - Occurrence	74	Schedule P - Part 6M - International	96
Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made	74	Schedule P - Part 6N - Reinsurance	97
Schedule P - Part 3I - Spec. Prop. (Fire, A.L., Inld. Ma., Earth., Burg. & Thft.)	75	Schedule P - Part 60 - Reinsurance	97
Schedule P - Part 3J - Auto Physical Damage	75	Schedule P - Part 6R - Products Liability - Claims-Made	98
Schedule P - Part 3K - Fidelity/Surety	75	Schedule P - Part 6R - Products Liability - Occurrence	98
Schedule P - Part 3L - Other (Including Credit, Accident and Health)	75	Schedule P - Part 7A - Primary Loss Sensitive Contracts	99
Schedule P - Part 3M - International	75	Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts	101
Schedule P - Part 3N - Reinsurance		Schedule P - Parts 2, 3 and 4 - Summary	
Schedule P - Part 30 - Reinsurance		Schedule P Interrogatories	
Schedule P - Part 3P - Reinsurance	70	Schedule T - Exhibit of Premiums Written	104
Schedule P - Part 3R - Section 1 - Products Liability - Occurrence		Schedule T - Part 2 - Interstate Compact	105
Schedule P - Part 3R - Section 2 - Products Liability - Claims-Made		Schedule Y - Info. Concerning Activities of Insurer Mmbrs. of a Holding Co. Grp.	
Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty		Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	
Schedule P - Part 4A - Homeowners/Farmowners		Statement of Income	
Schedule P - Part 4B - Private Passenger Auto Liability/Medical		Summary Investment Schedule	
Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical		Underwriting and Investment Exhibit Part 1	
Schedule P - Part 4D - Workers' Compensation		Underwriting and Investment Exhibit Part 1A	
Schedule P - Part 4E - Commercial Multiple Peril		Underwriting and Investment Exhibit Part 1B	
Schedule P - Part 4F - Section 1 - Medical Malpractice - Occurrence		Underwriting and Investment Exhibit Part 2	_
Schedule P - Part 4F - Section 2 - Medical Malpractice - Claims-Made		Underwriting and Investment Exhibit Part 2A	
Schedule P - Part 4G - Spec. Liab. (Ocean, Marine, Aircr.(A.P.), Boiler & Mach.)		Underwriting and Investment Exhibit Part 3	
Schedule P - Part 4H - Section 1 - Other Liability - Occurrence			
Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made			
Schedule P - Part 4I - Spec. Prop. (Fire, A.L., Inld. Ma., Earth., Burg. & Thft.)			
Schedule P - Part 4J - Auto Physical Damage			
Schedule P - Part 4K - Fidelity/Surety			
Schedule P - Part 4L - Other (Including Credit, Accident and Health)			
Schedule P - Part 4M - International			
Schedule P - Part 4N - Reinsurance			