



QUARTERLY STATEMENT

As of March 31, 2002
of the Condition and Affairs of the

COVENTRY INSURANCE COMPANY

NAIC Group Code..... 0084, 0084
(Current Period) (Prior Period)

NAIC Company Code..... 35211

Employer's ID Number..... 31-1277903

Organized under the Laws of Ohio

State of Domicile or Port of Entry Ohio

Country of Domicile

Incorporated..... September 5, 1989

Commenced Business..... February 1, 1990

Statutory Home Office

One East Fourth Street..... Cincinnati OH 45202-3717
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office

11700 Great Oaks Way..... Alpharetta GA 30022-2448
(Street and Number) (City or Town, State and Zip Code)

678-627-6000
(Area Code) (Telephone Number)

Mail Address

P.O. Box 105091..... Atlanta GA 30348-5091
(Street and Number or P. O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records

11700 Great Oaks Way..... Alpharetta GA 30022-2448
(Street and Number) (City or Town, State and Zip Code)

678-627-6000
(Area Code) (Telephone Number)

Internet Website Address

www.windsorgroup.com

Statement Contact

Robert James Schwartz
(Name)

BSchwartz@GAIC.com
(E-Mail Address)

513-369-5000
(Area Code) (Telephone Number) (Extension)

513-369-3873
(Fax Number)

Policyowner Relations Contact

11700 Great Oaks Way..... Alpharetta GA 30022
(Street and Number) (City or Town, State and Zip Code)

800-225-8930 (x72371)
(Area Code) (Telephone Number) (Extension)

OFFICERS

President James Randall Gober

Treasurer John Thomas Brooks

Secretary Thomas Sumner Neff

Michael David Krause

Maurice Franklin Washburne

Karen Holley Horrell

Eve Cutler Rosen

Ronald Charles Hayes

Thomas Edward Mischell

Patricia Anne Jensen

Robert James Schwartz

David John Witzgall

Robert Jude Zbacnik

Fred Joseph Runk

DIRECTORS OR TRUSTEES

James Randall Gober

Karen Holley Horrell

Keith Alan Jensen

Thomas Sumner Neff

Eve Cutler Rosen

David John Witzgall

Michael David Krause

State of..... Georgia

County of..... Fulton

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

(Signature)

James Randall Gober

(Printed Name)

President

(Signature)

Thomas Sumner Neff

(Printed Name)

Secretary

(Signature)

John Thomas Brooks

(Printed Name)

Treasurer

Subscribed and sworn to before me this

8th day of May, 2002

.....

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31, Prior Year Net Admitted Assets
1. Bonds.....	5,992,997	0	5,992,997	5,061,701
2. Stocks:				
2.1 Preferred stocks.....	0	0	0	0
2.2 Common stocks.....	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$.....0 encumbrances).....	0	0	0	0
5. Cash (\$....525) and short-term investments (\$....1,220,028).....	1,220,553	0	1,220,553	1,928,628
6. Other invested assets.....	0	0	0	0
7. Receivable for securities.....	0	0	0	0
8. Aggregate write-ins for invested assets.....	0	0	0	0
9. Subtotals, cash and invested assets (Lines 1 to 8).....	7,213,551	0	7,213,551	6,990,329
10. Agents' balances or uncollected premiums:				
10.1 Premiums and agents' balances in course of collection.....	0	0	0	0
10.2 Premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	0	0	0	0
10.3 Accrued retrospective premiums.....	0	0	0	0
11. Funds held by or deposited with reinsured companies.....	0	0	0	0
12. Bills receivable, taken for premiums.....	0	0	0	0
13. Amounts receivable under high deductible policies.....	0	0	0	0
14. Reinsurance recoverables on loss and loss adjustment expense payments.....	0	0	0	0
15. Federal and foreign income tax recoverable and interest thereon (including \$....75,954 net deferred tax asset) -	113,608	37,654	75,954	75,958
16. Guaranty funds receivable or on deposit.....	0	0	0	0
17. Electronic data processing equipment and software.....	0	0	0	0
18. Interest, dividends and real estate income due and accrued.....	114,320	8,250	106,070	80,619
19. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0	0	0
20. Receivable from parent, subsidiaries and affiliates.....	0	0	0	222,694
21. Amounts due from/to protected cells.....	0	0	0	0
22. Equities and deposits in pools and associations.....	0	0	0	0
23. Amounts receivable relating to uninsured accident and health plans.....	0	0	0	0
24. Other assets nonadmitted.....	0	0	0	0
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding protected cell assets (Lines 9 through 25).....	7,441,479	45,904	7,395,575	7,369,600
27. Protected cell assets.....	0	0	0	0
28. TOTALS (Lines 26 and 27).....	7,441,479	45,904	7,395,575	7,369,600

DETAILS OF WRITE-INS

0801.	0	0	0	0
0802.	0	0	0	0
0803.	0	0	0	0
0898. Summary of remaining write-ins for Line 8 from overflow page.....	0	0	0	0
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above).....	0	0	0	0
2501.	0	0	0	0
2502.	0	0	0	0
2503.	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$.....169,451).....	1,328,828	1,355,897
2. Reinsurance payable on paid losses and loss adjustment expenses.....	0	0
3. Loss adjustment expenses.....	309,232	308,816
4. Commissions payable, contingent commissions and other similar charges.....	0	0
5. Other expenses (excluding taxes, licenses and fees).....	3,662	3,429
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	12,118	12,934
7. Federal and foreign income taxes (including \$.....0 on realized capital gains (losses) (including \$.....0 net deferred tax liability).....	16,166	57,782
8. Borrowed money \$.....0 and interest thereon \$.....0.....	0	0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$....2,046,205 and including warranty reserves of \$.....0).....	583,193	581,733
10. Advance premium.....	0	0
11. Dividends declared and unpaid:		
11.1 Stockholders.....	0	0
11.2 Policyholders.....	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions).....	0	0
13. Funds held by company under reinsurance treaties.....	0	0
14. Amounts withheld or retained by company for account of others.....	0	0
15. Remittances and items not allocated.....	0	0
16. Provision for reinsurance.....	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0
18. Drafts outstanding.....	0	0
19. Payable to parent, subsidiaries and affiliates.....	22,927	0
20. Payable for securities.....	0	0
21. Liability for amounts held under uninsured accident and health plans.....	0	0
22. Capital notes \$.....0 and interest thereon \$.....0.....	0	0
23. Aggregate write-ins for liabilities.....	14,384	14,384
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23).....	2,290,511	2,334,976
25. Protected cell liabilities.....	0	0
26. Total liabilities (Lines 24 and 25).....	2,290,511	2,334,976
27. Aggregate write-ins for special surplus funds.....	0	0
28. Common capital stock.....	1,500,000	1,500,000
29. Preferred capital stock.....	0	0
30. Aggregate write-ins for other than special surplus funds.....	0	0
31. Surplus notes.....	0	0
32. Gross paid in and contributed surplus.....	2,500,000	2,500,000
33. Unassigned funds (surplus).....	1,105,064	1,034,624
34. Less treasury stock, at cost:		
34.10.000 shares common (value included in Line 28 \$.....0).....	0	0
34.20.000 shares preferred (value included in Line 29 \$.....0).....	0	0
35. Surplus as regards policyholders (Lines 27 to 33, less 34).....	5,105,064	5,034,624
36. TOTALS.....	7,395,575	7,369,600

DETAILS OF WRITE-INS

2301. Other liabilities.....	14,384	14,384
2302.	0	0
2303.	0	0
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	14,384	14,384
2701.	0	0
2702.	0	0
2703.	0	0
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above).....	0	0
3001.	0	0
3002.	0	0
3003.	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page.....	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	0	0

STATEMENT OF INCOME

	1 Current Year to Date	2 Previous Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.....1,890,679).....	1,433,701	1,210,342	5,346,075
1.2 Assumed..... (written \$.....425,645).....	424,185	619,816	2,173,711
1.3 Ceded..... (written \$.....1,890,679).....	1,433,701	1,210,342	5,346,075
1.4 Net..... (written \$.....425,645).....	424,185	619,816	2,173,711
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....258,162):			
2.1 Direct.....	1,053,062	861,009	3,331,582
2.2 Assumed.....	271,138	452,137	1,412,304
2.3 Ceded.....	1,053,062	861,009	3,331,582
2.4 Net.....	271,138	452,137	1,412,304
3. Loss expenses incurred.....	90,031	93,543	372,610
4. Other underwriting expenses incurred.....	83,515	169,681	458,571
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	444,684	715,361	2,243,484
7. Net income of protected cells.....	0	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(20,499)	(95,545)	(69,774)
INVESTMENT INCOME			
9. Net investment income earned.....	93,293	98,354	392,572
10. Net realized capital gains (losses).....	(669)	0	110,521
11. Net investment gain (loss) (Lines 9 + 10).....	92,624	98,354	503,093
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....4,351).....	(4,351)	(5,855)	(13,094)
13. Finance and service charges not included in premiums.....	0	0	0
14. Aggregate write-ins for miscellaneous income.....	0	(6,094)	(9,112)
15. Total other income (Lines 12 through 14).....	(4,351)	(11,949)	(22,206)
16. Net income before dividends to policyholders and before federal and foreign income taxes (Lines 8 + 11 + 15).....	67,774	(9,140)	411,113
17. Dividends to policyholders.....	0	0	0
18. Net income after dividends to policyholders but before federal and foreign income taxes (Line 16 minus Line 17).....	67,774	(9,140)	411,113
19. Federal and foreign income taxes incurred.....	23,384	(1,000)	112,107
20. Net income (Line 18 minus Line 19) (to Line 22).....	44,390	(8,140)	299,007
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 previous year.....	5,034,624	3,754,746	3,754,746
GAINS AND (LOSSES) IN SURPLUS			
22. Net income (from Line 20).....	44,390	(8,140)	299,007
23. Net unrealized capital gains or losses.....	22,052	5,105	(48,554)
24. Change in net unrealized foreign exchange capital gain (loss).....	0	(3,488)	(19,931)
25. Change in net deferred income taxes.....	(439)	(275)	(31,079)
26. Change in nonadmitted assets.....	4,435	1,991	(26,590)
27. Change in provision for reinsurance.....	0	0	0
28. Change in surplus notes.....	0	0	0
29. Surplus (contributed to) withdrawn from protected cells.....	0	0	0
30. Cumulative effect of changes in accounting principles.....	0	107,027	107,027
31. Capital changes:			
31.1 Paid in.....	0	0	0
31.2 Transferred from surplus (Stock Dividend).....	0	0	0
31.3 Transferred to surplus.....	0	0	0
32. Surplus adjustments:			
32.1 Paid in.....	0	0	1,000,000
32.2 Transferred to capital (Stock Dividend).....	0	0	0
32.3 Transferred from capital.....	0	0	0
33. Net remittances from or (to) Home Office.....	0	0	0
34. Dividends to stockholders.....	0	0	0
35. Change in treasury stock.....	0	0	0
36. Aggregate write-ins for gains and losses in surplus.....	0	0	0
37. Change in surplus as regards policyholders (Lines 22 through 36).....	70,439	102,220	1,279,879
38. Surplus as regards policyholders, as of statement date (Lines 21 plus 37).....	5,105,064	3,856,966	5,034,624
DETAILS OF WRITE-INS			
0501.	0	0	0
0502.	0	0	0
0503.	0	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401. Miscellaneous expense.....	0	(6,150)	(9,112)
1402. Net foreign currency exchange adjustment.....	0	56	0
1403.	0	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0	(6,094)	(9,112)
3601.	0	0	0
3602.	0	0	0
3603.	0	0	0
3698. Summary of remaining write-ins for Line 36 from overflow page.....	0	0	0
3699. Totals (Lines 3601 thru 3603 plus 3698) (Line 36 above).....	0	0	0

CASH FLOW

	1 Current Year to Date	2 Prior Year Ended December 31
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	425,645	2,496,579
2. Loss and loss adjustment expenses paid (net of salvage and subrogation).....	387,823	1,944,352
3. Underwriting expenses paid.....	84,331	455,413
4. Other underwriting income (expenses).....	0	0
5. Cash from underwriting (Line 1 minus Line 2 minus Line 3 plus Line 4).....	(46,509)	96,814
6. Net investment income.....	60,973	397,327
7. Other income (expenses):		
7.1 Agents' balances charged off.....	(4,351)	(13,094)
7.2 Net funds held under reinsurance treaties.....	0	0
7.3 Net amount withheld or retained for account of others.....	0	0
7.4 Aggregate write-ins for miscellaneous items.....	0	(8,622)
7.5 Total other income (Lines 7.1 to 7.4).....	(4,351)	(21,716)
8. Dividends to policyholders on direct business, less \$.....0 dividends on reinsurance assumed or ceded (net).....	0	0
9. Federal and foreign income taxes (paid) recovered.....	(65,000)	(50,000)
10. Net cash from operations (Line 5 plus Line 6 plus Line 7.5 minus Line 8 plus Line 9).....	(54,886)	422,425
CASH FROM INVESTMENTS		
11. Proceeds from investments sold, matured or repaid:		
11.1 Bonds.....	14,818	1,935,380
11.2 Stocks.....	0	0
11.3 Mortgage loans.....	0	0
11.4 Real estate.....	0	0
11.5 Other invested assets.....	0	0
11.6 Net gains or (losses) on cash and short-term investments.....	0	0
11.7 Miscellaneous proceeds.....	0	0
11.8 Total investment proceeds (Lines 11.1 to 11.7).....	14,818	1,935,380
12. Cost of investments acquired (long-term only):		
12.1 Bonds.....	913,629	2,117,056
12.2 Stocks.....	0	0
12.3 Mortgage loans.....	0	0
12.4 Real estate.....	0	0
12.5 Other invested assets.....	0	0
12.6 Miscellaneous applications.....	0	0
12.7 Total investments acquired (Lines 12.1 to 12.6).....	913,629	2,117,056
13. Net cash from investments (Line 11.8 minus Line 12.7).....	(898,810)	(181,676)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
14. Cash provided:		
14.1 Surplus notes, capital and surplus paid in.....	0	1,000,000
14.2 Capital notes \$.....0 less amounts repaid \$.....0.....	0	0
14.3 Net transfers from affiliates.....	245,621	0
14.4 Borrowed funds received.....	0	0
14.5 Other cash provided.....	0	0
14.6 Total (Lines 14.1 to 14.5).....	245,621	1,000,000
15. Cash applied:		
15.1 Dividends to stockholders paid.....	0	0
15.2 Net transfers to affiliates.....	0	251,360
15.3 Borrowed funds repaid.....	0	0
15.4 Other applications.....	0	0
15.5 Total (Lines 15.1 to 15.4).....	0	251,360
16. Net cash from financing and miscellaneous sources (Line 14.6 minus Line 15.5).....	245,621	748,640
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
17. Net change in cash and short-term investments (Line 10, plus Line 13, plus Line 16).....	(708,075)	989,389
18. Cash and short-term investments:		
18.1 Beginning of year.....	1,928,628	939,239
18.2 End of period (Line 17 plus Line 18.1).....	1,220,553	1,928,628
DETAILS OF WRITE-INS		
07.401 Miscellaneous expense.....	0	(8,622)
07.402	0	0
07.403	0	0
07.498 Summary of remaining write-ins for Line 7.4 from overflow page.....	0	0
07.499 Total (Lines 7.401 to 7.403 plus 7.498) (Line 7.4 above).....	0	(8,622)

17.) SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

C. The Company was not involved in any wash sale transactions during the year to date.

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1 Did the reporting entity implement any significant accounting policy changes which would require disclosure in the Notes to the Financial Statements? Yes [] No [X]

1.2 If yes, explain:.....

2.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]

2.2 If yes, has the report been filed with the domiciliary state? Yes [] No []

3.1 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]

3.2 If yes, date of change:
If not previously filed, furnish herewith a certified copy of the instrument as amended.

4. Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
If yes, attach an organizational chart.

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 name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

6. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []

If yes, attach an explanation.
Not applicable.

7.1 State as of what date the latest financial examination of the reporting entity was made or is being made.12/31/1995.....

7.2 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.12/31/1995.....

7.3 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).05/15/1997.....

7.4 By what department or departments?..... Ohio

8.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? (You need not report an action, either formal or informal, if a confidentiality clause is part of the agreement.) Yes [] No [X]

8.2 If yes, give full information:
Not applicable.

GENERAL INTERROGATORIES (continued)
INVESTMENT

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

9.1 Has there been any change in the reporting entity's own preferred or common stock? Yes [] No [X]

9.2 If yes, explain:..... Not applicable.

10.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]

10.2 If yes, give full and complete information relating thereto:
Not applicable.

11. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$.0

12. Amount of real estate and mortgages held in short-term investments: \$.0

13.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]

13.2 If yes, please complete the following:

	1 Prior Year-End Statement Value	2 Current Quarter Statement Value
13.21 Bonds.....	\$.....0	\$.....0
13.22 Preferred Stock.....	\$.....0	\$.....0
13.23 Common Stock.....	\$.....0	\$.....0
13.24 Short-Term Investments.....	\$.....0	\$.....0
13.25 Mortgages, Loans or Real Estate.....	\$.....0	\$.....0
13.26 All Other.....	\$.....0	\$.....0
13.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 13.21 to 13.26).....	\$.....0	\$.....0
13.28 Total Investment in Parent included in Lines 13.21 to 13.26 above	\$.....0	\$.....0
13.29 Receivable from Parent not included in Lines 13.21 to 13.26 above.....	\$.....0	\$.....0

14.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

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

15. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1-General, Section IV.H-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

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

1 Name of Custodian(s)	2 Custodian Address
The Bank of New York	New York, New York

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

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

15.3 Have there been any changes, including name changes, in the custodian(s) identified in 15.1 during the current year? Yes [] No [X]

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

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

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

1 Central Registration Depository	2 Name(s)	3 Address
American Money Management Corporation	Not applicable.	1 East Fourth Street, Cinti, OH 45202

COVENTRY INSURANCE COMPANY

GENERAL INTERROGATORIES (continued)

PART 2

PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?
If yes, attach an explanation.

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

2. Has the 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 the risk, or portion thereof, reinsured?
If yes, attach an explanation.

Yes [] No [X]

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled?

Yes [] No [X]

3.2 If yes, give full and complete information thereto:

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation liabilities tabular reserves (see annual statement instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero?

Yes [] No [X]

4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Disc. Rate	Total Discount				Discount Taken During Period			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
.....0.0	0.0	0.0	0	0	0	0	0	0	0	0
Total.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0

Statement as of March 31, 2002 of the

COVENTRY INSURANCE COMPANY

SCHEDULE A - VERIFICATION

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/adjusted carrying value, beginning of period.....	0	0	0	0
2. Increase (decrease) by adjustment.....	0	0	0	0
3. Cost of acquired.....	0	0	0	0
4. Cost of additions to and permanent improvements.....	0	0	0	0
5. Total profit (loss) on sales.....	0	0	0	0
6. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0
7. Amount received on sales.....	0	0	0	0
8. Book/adjusted carrying value at end of current period.....	0	0	0	0
9. Total valuation allowance.....	0	0	0	0
10. Subtotal (Lines 8 plus 9).....	0	0	0	0
11. Total nonadmitted amounts.....	0	0	0	0
12. Statement value, current period (Page 2, real estate lines, current period).....	0	0	0	0

SCHEDULE B - VERIFICATION

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/recorded investment excluding accrued interest on mortgages owned, beginning of period.....	0	0	0	0
2. Amount loaned during period:				
2.1 Actual cost at time of acquisitions.....	0	0	0	0
2.2 Additional investment made after acquisitions.....	0	0	0	0
3. Accrual of discount and mortgage interest points and commitment fees.....	0	0	0	0
4. Increase (decrease) by adjustment.....	0	0	0	0
5. Total profit (loss) on sale.....	0	0	0	0
6. Amounts paid on account or in full during the period.....	0	0	0	0
7. Amortization of premium.....	0	0	0	0
8. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period.....	0	0	0	0
10. Total valuation allowance.....	0	0	0	0
11. Subtotal (Lines 9 plus 10).....	0	0	0	0
12. Total nonadmitted amounts.....	0	0	0	0
13. Statement value of mortgages owned at end of current period.....	0	0	0	0

SCHEDULE BA - VERIFICATION

Other Invested Assets Included in Schedule BA

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/adjusted carrying value of long-term invested assets owned, beginning of period.....	0	0	0	0
2. Cost of acquisitions during period:				
2.1 Actual cost at time of acquisitions.....	0	0	0	0
2.2 Additional investment made after acquisitions.....	0	0	0	0
3. Accrual of discount.....	0	0	0	0
4. Increase (decrease) by adjustment.....	0	0	0	0
5. Total profit (loss) on sale.....	0	0	0	0
6. Amounts paid on account or in full during the period.....	0	0	0	0
7. Amortization of premium.....	0	0	0	0
8. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0
9. Book/adjusted carrying value of long-term invested assets at end of current period.....	0	0	0	0
10. Total valuation allowance.....	0	0	0	0
11. Subtotal (Lines 9 plus 10).....	0	0	0	0
12. Total nonadmitted amounts.....	0	0	0	0
13. Statement value of long-term invested assets at end of current period.....	0	0	0	0

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Statement Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Statement Value End of First Quarter	6 Statement Value End of Second Quarter	7 Statement Value End of Third Quarter	8 Statement Value December 31 Prior Year
BONDS								
1. Class 1.....	4,982,907	1,192,969	987,350	(300,129)	4,888,397	.0	.0	4,982,907
2. Class 2.....	1,542,685	.0	15,487	299,084	1,826,282	.0	.0	1,542,685
3. Class 3.....	464,147	.0	.0	34,199	498,346	.0	.0	464,147
4. Class 4.....	.0	.0	.0	.0	.0	.0	.0	.0
5. Class 5.....	.0	.0	.0	.0	.0	.0	.0	.0
6. Class 6.....	.0	.0	.0	.0	.0	.0	.0	.0
7. Total Bonds.....	6,989,739	1,192,969	1,002,837	33,154	7,213,025	.0	.0	6,989,739
PREFERRED STOCK								
8. Class 1.....	.0	.0	.0	.0	.0	.0	.0	.0
9. Class 2.....	.0	.0	.0	.0	.0	.0	.0	.0
10. Class 3.....	.0	.0	.0	.0	.0	.0	.0	.0
11. Class 4.....	.0	.0	.0	.0	.0	.0	.0	.0
12. Class 5.....	.0	.0	.0	.0	.0	.0	.0	.0
13. Class 6.....	.0	.0	.0	.0	.0	.0	.0	.0
14. Total Preferred Stock.....	.0	.0	.0	.0	.0	.0	.0	.0
15. Total Bonds and Preferred Stock.....	6,989,739	1,192,969	1,002,837	33,154	7,213,025	.0	.0	6,989,739

SCHEDULE DA - PART 1

Short-Term Investments Owned End of Current Quarter

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Amount of Interest Received Current Quarter	5 Paid for Accrued Interest
8099999. Totals.....	1,220,028	XXX.....	1,220,028	8,797	0

SCHEDULE DA - PART 2 - Verification

Short-Term Investments Owned

	1 First Quarter Current Year	2 Second Quarter Current Year	3 Third Quarter Current Year	4 Prior Year Ended December 31
1. Book/adjusted carrying value, beginning of period.....	1,928,038	0	0	937,875
2. Cost of short-term investments acquired.....	279,340	0	0	3,420,130
3. Increase (decrease) by adjustment.....	0	0	0	0
4. Increase (decrease) by foreign exchange adjustment.....	0	0	0	0
5. Total profit (loss) on disposal of short-term investments.....	0	0	0	0
6. Consideration received on disposal of short-term investments.....	987,350	0	0	2,429,967
7. Book/adjusted carrying value, current period.....	1,220,028	0	0	1,928,038
8. Total valuation allowance.....	0	0	0	0
9. Subtotal (Lines 7 plus 8).....	1,220,028	0	0	1,928,038
10. Total nonadmitted amounts.....	0	0	0	0
11. Statement value (Lines 9 minus 10).....	1,220,028	0	0	1,928,038
12. Income collected during period.....	8,797	0	0	42,984
13. Income earned during period.....	8,797	0	0	42,984

Sch. DB-Part F-Section 1
NONE

Sch. DB-Part F-Section 2
NONE

Sch. F
NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, Etc.		1 Is Insurer Licensed? (Yes or No)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2 Current Year to Date	3 Prior Year to Date	4 Current Year to Date	5 Prior Year to Date	6 Current Year to Date	7 Prior Year to Date
1.	Alabama.....AL	..No.....	0	0	0	0	0	0
2.	Alaska.....AK	..No.....	0	0	0	0	0	0
3.	Arizona.....AZ	..No.....	0	0	0	0	0	0
4.	Arkansas.....AR	..No.....	0	0	0	0	0	0
5.	California.....CA	..No.....	0	0	0	0	0	0
6.	Colorado.....CO	..No.....	0	0	0	0	0	0
7.	Connecticut.....CT	..No.....	0	0	0	0	0	0
8.	Delaware.....DE	..No.....	0	0	0	0	0	0
9.	District of Columbia.....DC	..No.....	0	0	0	0	0	0
10.	Florida.....FL	..No.....	0	0	0	0	0	0
11.	Georgia.....GA	..Yes.....	1,830,605	2,266,145	838,197	393,263	1,505,249	716,251
12.	Hawaii.....HI	..No.....	0	0	0	0	0	0
13.	Idaho.....ID	..No.....	0	0	0	0	0	0
14.	Illinois.....IL	..No.....	0	0	0	0	0	0
15.	Indiana.....IN	..No.....	0	0	0	0	0	0
16.	Iowa.....IA	..No.....	0	0	0	0	0	0
17.	Kansas.....KS	..No.....	0	0	0	0	0	0
18.	Kentucky.....KY	..No.....	0	0	0	0	0	0
19.	Louisiana.....LA	..No.....	0	0	0	0	0	0
20.	Maine.....ME	..No.....	0	0	0	0	0	0
21.	Maryland.....MD	..No.....	0	0	0	0	0	0
22.	Massachusetts.....MA	..No.....	0	0	0	0	0	0
23.	Michigan.....MI	..No.....	0	0	0	0	0	0
24.	Minnesota.....MN	..No.....	0	0	0	0	0	0
25.	Mississippi.....MS	..No.....	0	0	0	0	0	0
26.	Missouri.....MO	..No.....	0	0	0	0	0	0
27.	Montana.....MT	..No.....	0	0	0	0	0	0
28.	Nebraska.....NE	..No.....	0	0	0	0	0	0
29.	Nevada.....NV	..No.....	0	0	0	0	0	0
30.	New Hampshire.....NH	..No.....	0	0	0	0	0	0
31.	New Jersey.....NJ	..No.....	0	0	0	0	0	0
32.	New Mexico.....NM	..No.....	0	0	0	0	0	0
33.	New York.....NY	..No.....	0	0	0	0	0	0
34.	North Carolina.....NC	..No.....	0	0	0	0	0	0
35.	North Dakota.....ND	..No.....	0	0	0	0	0	0
36.	Ohio.....OH	..Yes.....	60,074	96,543	34,598	159,941	226,517	255,111
37.	Oklahoma.....OK	..Yes.....	0	0	0	0	0	0
38.	Oregon.....OR	..No.....	0	0	0	0	0	0
39.	Pennsylvania.....PA	..No.....	0	0	0	0	0	0
40.	Rhode Island.....RI	..No.....	0	0	0	0	0	0
41.	South Carolina.....SC	..No.....	0	0	0	0	0	0
42.	South Dakota.....SD	..No.....	0	0	0	0	0	0
43.	Tennessee.....TN	..No.....	0	0	0	0	0	0
44.	Texas.....TX	..No.....	0	0	0	0	0	0
45.	Utah.....UT	..No.....	0	0	0	0	0	0
46.	Vermont.....VT	..No.....	0	0	0	0	0	0
47.	Virginia.....VA	..No.....	0	0	0	0	0	0
48.	Washington.....WA	..No.....	0	0	0	0	0	0
49.	West Virginia.....WV	..No.....	0	0	0	0	0	0
50.	Wisconsin.....WI	..No.....	0	0	0	0	0	0
51.	Wyoming.....WY	..No.....	0	0	0	0	0	0
52.	American Samoa.....AS	..No.....	0	0	0	0	0	0
53.	Guam.....GU	..No.....	0	0	0	0	0	0
54.	Puerto Rico.....PR	..No.....	0	0	0	0	0	0
55.	US Virgin Islands.....VI	..No.....	0	0	0	0	0	0
56.	Canada.....CN	..No.....	0	0	0	0	0	0
57.	Aggregate Other Alien.....OT	XXX.....	0	0	0	0	0	0
58.	Totals.....	(a).....3	1,890,679	2,362,688	872,795	553,204	1,731,766	971,362

DETAILS OF WRITE-INS							
5701.		XXX.....	0	0	0	0	0
5702.		XXX.....	0	0	0	0	0
5703.		XXX.....	0	0	0	0	0
5798.	Summary of remaining write-ins for Line 57 from overflow page...	XXX.....	0	0	0	0	0
5799.	Totals (Lines 5701 thru 5703 + Line 5798) (Line 57 above).....	XXX.....	0	0	0	0	0

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

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

PART 1 – ORGANIZATIONAL CHART

NONE

PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....	0	0	0.0	0.0
2. Allied lines.....	0	0	0.0	0.0
3. Farnowners multiple peril.....	0	0	0.0	0.0
4. Homeowners multiple peril.....	0	0	0.0	0.0
5. Commercial multiple peril.....	0	0	0.0	0.0
6. Mortgage guaranty.....	0	0	0.0	0.0
8. Ocean marine.....	0	0	0.0	0.0
9. Inland marine.....	0	0	0.0	0.0
10. Financial guaranty.....	0	0	0.0	0.0
11.1. Medical malpractice-occurrence.....	0	0	0.0	0.0
11.2. Medical malpractice-claims made.....	0	0	0.0	0.0
12. Earthquake.....	0	0	0.0	0.0
13. Group accident and health.....	0	0	0.0	0.0
14. Credit accident and health.....	0	0	0.0	0.0
15. Other accident and health.....	0	0	0.0	0.0
16. Workers' compensation.....	0	0	0.0	0.0
17.1. Other liability-occurrence.....	0	0	0.0	0.0
17.2. Other liability-claims made.....	0	0	0.0	0.0
18.1. Products liability-occurrence.....	0	0	0.0	0.0
18.2. Products liability-claims made.....	0	0	0.0	0.0
19.1, 19.2 Private passenger auto liability.....	834,296	636,680	76.3	92.3
19.3, 19.4 Commercial auto liability.....	108,926	49,889	45.8	22.2
21. Auto physical damage.....	490,479	366,493	74.7	47.6
22. Aircraft (all perils).....	0	0	0.0	0.0
23. Fidelity.....	0	0	0.0	0.0
24. Surety.....	0	0	0.0	0.0
26. Burglary and theft.....	0	0	0.0	0.0
27. Boiler and machinery.....	0	0	0.0	0.0
28. Credit.....	0	0	0.0	0.0
29. International.....	0	0	0.0	0.0
30. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
31. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
33. Aggregate write-ins for other lines of business.....	0	0	0.0	0.0
34. Totals.....	1,433,701	1,053,062	73.5	71.1
DETAILS OF WRITE-INS				
3301.	0	0	0.0	0.0
3302.	0	0	0.0	0.0
3303.	0	0	0.0	0.0
3398. Sum. of remaining write-ins for Line 33 from overflow page.....	0	0	0.0	0.0
3399. Totals (Lines 3301 thru 3303 plus 3398) (Line 33).....	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....	0	0	0
2. Allied lines.....	0	0	0
3. Farnowners multiple peril.....	0	0	0
4. Homeowners multiple peril.....	0	0	0
5. Commercial multiple peril.....	0	0	0
6. Mortgage guaranty.....	0	0	0
8. Ocean marine.....	0	0	0
9. Inland marine.....	0	0	0
10. Financial guaranty.....	0	0	0
11.1. Medical malpractice-occurrence.....	0	0	0
11.2. Medical malpractice-claims made.....	0	0	0
12. Earthquake.....	0	0	0
13. Group accident and health.....	0	0	0
14. Credit accident and health.....	0	0	0
15. Other accident and health.....	0	0	0
16. Workers' compensation.....	0	0	0
17.1. Other liability-occurrence.....	0	0	0
17.2. Other liability-claims made.....	0	0	0
18.1. Products liability-occurrence.....	0	0	0
18.2. Products liability-claims made.....	0	0	0
19.1, 19.2 Private passenger auto liability.....	1,151,972	1,151,972	1,483,507
19.3, 19.4 Commercial auto liability.....	91,404	91,404	113,279
21. Auto physical damage.....	647,303	647,303	765,902
22. Aircraft (all perils).....	0	0	0
23. Fidelity.....	0	0	0
24. Surety.....	0	0	0
26. Burglary and theft.....	0	0	0
27. Boiler and machinery.....	0	0	0
28. Credit.....	0	0	0
29. International.....	0	0	0
30. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
31. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
33. Aggregate write-ins for other lines of business.....	0	0	0
34. Totals.....	1,890,679	1,890,679	2,362,688
DETAILS OF WRITE-INS			
3301.	0	0	0
3302.	0	0	0
3303.	0	0	0
3398. Sum. of remaining write-ins for Line 33 from overflow page.....	0	0	0
3399. Totals (Lines 3301 thru 3303 plus 3398) (Line 33).....	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

19

	1	2	3	4	5	6	7	8	9	10	11	12	13									
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (a) (Cols. 1 + 2)	2002 Loss and LAE Payments on Claims Reported as of Prior Year-End	2002 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2002 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (b) (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserves Developed (Savings)/Deficiency (c) (Cols. 11 + 12)									
1. 1999 + Prior	455	75	530	48	12	60	391	26	33	450	(16)	(4)	(20)									
2. 2000	340	26	366	37	9	46	298	9	43	350	(5)	35	30									
3. Subtotals 2000 + Prior	795	101	896	85	21	106	689	35	76	800	(21)	31	10									
4. 2001	538	231	769	132	40	172	395	68	145	608	(11)	22	11									
5. Subtotals 2001 + Prior	1,333	332	1,665	217	61	278	1,084	103	221	1,408	(32)	53	21									
6. 2002	XXX.....	XXX.....	XXX.....	XXX.....	109	109	XXX.....	149	81	230	XXX.....	XXX.....	XXX.....									
7. Totals	1,333	332	1,665	217	170	387	1,084	252	302	1,638	(32)	53	21									
8. Prior Year-End's Surplus As Regards Policyholders	5,035										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7									
																				1.(2.4)%	2.16.0 %	3.1.3 %
																				Col. 13, Line 7 Line 8		
																				4.0.4 %		

(a) Should equal prior year-end Annual Statement; Page 3, Col. 1, Lines 1 + 3.
(b) Should equal Q.S. Page 3, Col.1, Lines 1 and 3.
(c) Should also equal Cols. 6 + 10 less Col. 3 for Lines 1 through 5 only.

COVENTRY INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	RESPONSE
1. Will the SVO Compliance Certification be filed with this statement?	YES
2. Will the Trusteed Surplus Statement be filed with the State of Domicile and the NAIC with this statement?	NO
3. Will Supplement A to Schedule T (Medical Malpractice Supplement) be filed with this statement?	NO

EXPLANATIONS:

BAR CODE:



Overflow Page
NONE

Sch. A-Part 2
NONE

Sch. A-Part 3
NONE

Sch. B-Part 1
NONE

Sch. B-Part 2
NONE

Sch. BA-Part 1
NONE

Sch. BA-Part 2
NONE

SCHEDULE D - PART 3

Show all Long-Term Bonds and Stock Acquired by the Company During the Current Quarter

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation (a)
Bonds - Industrial and Miscellaneous								
United States								
134429-AN-9.....	CAMPBELL SOUP CO 5.875 10-01-08 NC.....	02/19/2002.....	BANK OF AMERICA NT&SA.....		306,276	300,000	7,099	1PE.....
724477-AR-5.....	PITNEY BOWES CREDIT 5.75 8-15-08 NC.....	02/25/2002.....	GOLDMAN SACHS & CO.....		304,353	300,000	623	1PE.....
761042-CM-0.....	RMT 2000-A A9 VADM 6.5 6-19-13.....	02/15/2002.....	GREENWICH CAPITAL MARKETS.....		303,000	300,000	1,083	1PE.....
	United States.....				913,629	900,000	8,805	XXX.....
4599999.	Total - Bonds - Industrial & Miscellaneous.....				913,629	900,000	8,805	XXX.....
6099997.	Total - Bonds - Part 3.....				913,629	900,000	8,805	XXX.....
6099999.	Total - Bonds.....				913,629	900,000	8,805	XXX.....
7299999.	Total - Bonds, Preferred and Common Stocks.....				913,629	XXX	8,805	XXX.....

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues:.....0.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarte

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Book/Adjusted Carrying Value At Disposal Date	Increase (Decrease) by Adjustment	Increase (Decrease) by Foreign Exchange Adjustment	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Interest on Bonds Received During Year	Dividends on Stocks Received During Year	NAIC Designation (a)
Bonds - Industrial and Miscellaneous																
United States																
843597-AF-2...	SOUTHERN PAC RR ETC 8.02 7-2-12 A07.....	01/02/2002	SINKING FUND PAYMENT.....		14,818	14,818	15,589	15,487	0	0	0	(669)	(669)	594		2PE.....
	United States.....				14,818	14,818	15,589	15,487	0	0	0	(669)	(669)	594	0	XXX...
4599999.	Total - Bonds - Industrial & Miscellaneous.....				14,818	14,818	15,589	15,487	0	0	0	(669)	(669)	594	0	XXX...
6099997.	Total - Bonds - Part 4.....				14,818	14,818	15,589	15,487	0	0	0	(669)	(669)	594	0	XXX...
6099999.	Total - Bonds.....				14,818	14,818	15,589	15,487	0	0	0	(669)	(669)	594	0	XXX...
7299999.	Total - Bonds, Preferred and Common Stocks.....				14,818	XXX.....	15,589	15,487	0	0	0	(669)	(669)	594	0	XXX...

(a) For all common stock bearing the NAIC designation "U" provide: the number of such issues:.....0.

Sch. DB-Part A-Section 1
NONE

Sch. DB-Part B-Section 1
NONE

Sch. DB-Part C-Section 1
NONE

Sch. DB-Part D-Section 1
NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Rate of Interest	3 Amount of Interest Received During Current Quarter	4 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			8 *
				5 First Month	6 Second Month	7 Third Month	
Open Depositories							
The Bank of New York..... New York, New York.....	0.600	4	0	589	495	525	
0199999. Total Open Depositories.....	XXX.....	4	0	589	495	525	XXX
0399999. Total Cash on Deposit.....	XXX.....	4	0	589	495	525	XXX
0599999. Total Cash.....	XXX.....	4	0	589	495	525	XXX

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE

Overflow Page
NONE

