



QUARTERLY STATEMENT

As of March 31, 2011
of the Condition and Affairs of the

COLONY SPECIALTY INSURANCE COMPANY

NAIC Group Code.....457, 457 (Current Period) (Prior Period)	NAIC Company Code..... 36927	Employer's ID Number..... 34-1266871
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	Country of Domicile US
Incorporated/Organized..... December 20, 1978	Commenced Business..... April 16, 1979	
Statutory Home Office	52 East Gay Street..... Columbus OH 43215 (Street and Number) (City or Town, State and Zip Code)	
Main Administrative Office	8720 Stony Point Pkwy, Suite 300..... Richmond VA 23235 (Street and Number) (City or Town, State and Zip Code)	804-560-2000 (Area Code) (Telephone Number)
Mail Address	P.O. Box 85122..... Richmond VA 23285-5122 (Street and Number or P. O. Box) (City or Town, State and Zip Code)	
Primary Location of Books and Records	8720 Stony Point Pkwy, Suite 300..... Richmond VA 23235 (Street and Number) (City or Town, State and Zip Code)	804-560-2866 (Area Code) (Telephone Number)
Internet Web Site Address	www.colonyins.com	
Statutory Statement Contact	Deborah Pace Thorsvik (Name) colonyfinancialreporting@colonyins.com (E-Mail Address)	804-560-2866 (Area Code) (Telephone Number) (Extension) 804-560-4820 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. Louis David Levinson	President	2. Melinda Joy Thompson	Treasurer
3. Craig Stephen Comeaux	Secretary	4.	
OTHER			
Samuel Collins Anderson	Senior Vice President	Gail Theresa Kimpfler	Senior Vice President
Lynn Kelly Geurin	Vice President	Daniel Gerard Platt	Vice President
Mary Moczygemba Stulting	Vice President	Barbara Lou Sutherland	Vice President

DIRECTORS OR TRUSTEES

Michael Evin Arledge	Craig Stephen Comeaux	Samuel Collins Anderson	Louis David Levinson
Barbara Lou Sutherland			

State of..... Virginia
County of..... City of Richmond

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. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
Louis David Levinson	Melinda Joy Thompson	Craig Stephen Comeaux
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Treasurer	Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me This 6th day of May, 2011	a. Is this an original filing? b. If no: 1. State the amendment number 2. Date filed 3. Number of pages attached	Yes [X] No []

COLONY SPECIALTY INSURANCE COMPANY
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.....	65,762,439	0	65,762,439	64,287,727
2. Stocks:				
2.1 Preferred stocks.....	0	0	0	0
2.2 Common stocks.....	14,922,664	0	14,922,664	15,522,758
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 (\$.....2,734,879), cash equivalents (\$.....15,048,819) and short-term investments (\$.....15,716,971).....	33,500,669	0	33,500,669	41,328,844
6. Contract loans (including \$.....0 premium notes).....	0	0	0	0
7. Derivatives.....	0	0	0	0
8. Other invested assets.....	0	0	0	0
9. Receivables for securities.....	0	0	0	0
10. Securities lending reinvested collateral assets.....	0	0	0	0
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	114,185,772	0	114,185,772	121,139,329
13. Title plants less \$.....0 charged off (for Title insurers only).....	0	0	0	0
14. Investment income due and accrued.....	805,926	0	805,926	626,328
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	1,662,256	8,484	1,653,772	1,359,833
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	0	0	0	0
15.3 Accrued retrospective premiums.....	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	53,785	0	53,785	360,495
16.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	0	0	0	0
17. Amounts receivable relating to uninsured plans.....	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon.....	152,517	0	152,517	29,388
18.2 Net deferred tax asset.....	0	0	0	0
19. Guaranty funds receivable or on deposit.....	0	0	0	0
20. Electronic data processing equipment and software.....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$.....0).....	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	4,385,261	0	4,385,261	11,410
24. Health care (\$.....0) and other amounts receivable.....	0	0	0	0
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	121,245,517	8,484	121,237,033	123,526,783
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
28. Total (Lines 26 and 27).....	121,245,517	8,484	121,237,033	123,526,783

DETAILS OF WRITE-INS

1101.	0	0	0	0
1102.	0	0	0	0
1103.	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 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

COLONY SPECIALTY INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$.....0).....	0	0
2. Reinsurance payable on paid losses and loss adjustment expenses.....	0	0
3. Loss adjustment expenses.....	0	0
4. Commissions payable, contingent commissions and other similar charges.....	6,556	52,457
5. Other expenses (excluding taxes, licenses and fees).....	0	0
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	109,599	87,779
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	0	0
7.2 Net deferred tax liability.....	5,219,423	5,427,235
8. Borrowed money \$.....0 and interest thereon \$.....0.....	0	0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....9,488,175 and including warranty reserves of \$.....0).....	0	0
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).....	593,858	(261,856)
13. Funds held by company under reinsurance treaties.....	37,120,872	36,762,356
14. Amounts withheld or retained by company for account of others.....	2,535	2,825
15. Remittances and items not allocated.....	0	0
16. Provision for reinsurance.....	498	498
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.....	70,282	3,309,755
20. Derivatives.....	0	0
21. Payable for securities.....	0	0
22. Payable for securities lending.....	0	0
23. Liability for amounts held under uninsured plans.....	0	0
24. Capital notes \$.....0 and interest thereon \$.....0.....	0	0
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	43,123,623	45,381,049
27. Protected cell liabilities.....	0	0
28. Total liabilities (Lines 26 and 27).....	43,123,623	45,381,049
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	3,500,000	3,500,000
31. Preferred capital stock.....	0	0
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....	0	0
34. Gross paid in and contributed surplus.....	8,002,700	8,002,700
35. Unassigned funds (surplus).....	66,610,710	66,643,034
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....	0	0
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....	0	0
37. Surplus as regards policyholders (Lines 29 to 35, less 36).....	78,113,410	78,145,734
38. Totals.....	121,237,033	123,526,783

DETAILS OF WRITE-INS		
2501.	0	0
2502.	0	0
2503.	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
2901.	0	0
2902.	0	0
2903.	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.	0	0
3202.	0	0
3203.	0	0
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

COLONY SPECIALTY INSURANCE COMPANY
STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.....5,452,968).....	5,353,090	5,561,192	2,637,682
1.2 Assumed..... (written \$.....0).....	0	0	0
1.3 Ceded..... (written \$.....5,452,968).....	5,353,090	5,561,192	2,637,682
1.4 Net..... (written \$.....0).....	0	0	0
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....0):			
2.1 Direct.....	2,875,825	903,663	2,637,682
2.2 Assumed.....	0	0	0
2.3 Ceded.....	2,875,825	903,663	2,637,682
2.4 Net.....	0	0	0
3. Loss adjustment expenses incurred.....	0	0	0
4. Other underwriting expenses incurred.....	0	0	0
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	0	0	0
7. Net income of protected cells.....	0	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	0	0	0
INVESTMENT INCOME			
9. Net investment income earned.....	517,501	820,720	2,619,317
10. Net realized capital gains (losses) less capital gains tax of \$.....9,519.....	17,678	281,722	670,983
11. Net investment gain (loss) (Lines 9 + 10).....	535,179	1,102,442	3,290,300
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....51).....	(51)	869	5,246
13. Finance and service charges not included in premiums.....	0	0	0
14. Aggregate write-ins for miscellaneous income.....	(70,280)	(48,351)	(194,058)
15. Total other income (Lines 12 through 14).....	(70,331)	(47,482)	(188,812)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	464,848	1,054,960	3,101,488
17. Dividends to policyholders.....	0	0	0
18. Net income after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	464,848	1,054,960	3,101,488
19. Federal and foreign income taxes incurred.....	100,352	204,962	631,814
20. Net income (Line 18 minus Line 19) (to Line 22).....	364,496	849,998	2,469,674
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	78,145,734	74,003,800	74,003,800
22. Net income (from Line 20).....	364,496	849,998	2,469,674
23. Net transfers (to) from Protected Cell accounts.....	0	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....(214,781).....	(398,880)	(615,809)	1,125,036
25. Change in net unrealized foreign exchange capital gain (loss).....	0	0	0
26. Change in net deferred income tax.....	(6,969)	(525)	50,848
27. Change in nonadmitted assets.....	9,029	11,728	(3,126)
28. Change in provision for reinsurance.....	0	0	(498)
29. Change in surplus notes.....	0	0	0
30. Surplus (contributed to) withdrawn from protected cells.....	0	0	0
31. Cumulative effect of changes in accounting principles.....	0	0	0
32. Capital changes:			
32.1 Paid in.....	0	500,000	500,000
32.2 Transferred from surplus (Stock Dividend).....	0	0	0
32.3 Transferred to surplus.....	0	0	0
33. Surplus adjustments:			
33.1 Paid in.....	0	0	0
33.2 Transferred to capital (Stock Dividend).....	0	0	0
33.3 Transferred from capital.....	0	0	0
34. Net remittances from or (to) Home Office.....	0	0	0
35. Dividends to stockholders.....	0	0	0
36. Change in treasury stock.....	0	0	0
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	(32,324)	745,392	4,141,934
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	78,113,410	74,749,192	78,145,734
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. Intercompany interest expense.....	(70,280)	(48,351)	(194,058)
1402.	0	0	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).....	(70,280)	(48,351)	(194,058)
3701.	0	0	0
3702.	0	0	0
3703.	0	0	0
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

COLONY SPECIALTY INSURANCE COMPANY
CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	570,804	(1,560,335)	911,696
2. Net investment income.....	484,074	889,423	3,070,896
3. Miscellaneous income.....	(70,331)	(47,482)	(188,812)
4. Total (Lines 1 through 3).....	984,547	(718,394)	3,793,780
5. Benefit and loss related payments.....	(306,710)	(464,988)	(585,648)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions.....	24,081	(10,893)	(89,351)
8. Dividends paid to policyholders.....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$.....20,187 tax on capital gains (losses).....	233,000	185,000	1,844,320
10. Total (Lines 5 through 9).....	(49,629)	(290,881)	1,169,321
11. Net cash from operations (Line 4 minus Line 10).....	1,034,176	(427,513)	2,624,459
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	7,928,850	42,513,153	83,943,474
12.2 Stocks.....	0	0	0
12.3 Mortgage loans.....	0	0	0
12.4 Real estate.....	0	0	0
12.5 Other invested assets.....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	0	0	16,469
12.7 Miscellaneous proceeds.....	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	7,928,850	42,513,153	83,959,943
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	9,534,313	40,041,945	66,773,921
13.2 Stocks.....	0	0	0
13.3 Mortgage loans.....	0	0	0
13.4 Real estate.....	0	0	0
13.5 Other invested assets.....	0	0	0
13.6 Miscellaneous applications.....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6).....	9,534,313	40,041,945	66,773,921
14. Net increase (decrease) in contract loans and premium notes.....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(1,605,462)	2,471,208	17,186,022
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	500,000	500,000
16.3 Borrowed funds.....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	0	0	0
16.5 Dividends to stockholders.....	0	0	0
16.6 Other cash provided (applied).....	(7,256,889)	(1,111,897)	7,491,372
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(7,256,889)	(611,897)	7,991,372
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(7,828,175)	1,431,798	27,801,853
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	41,328,844	13,526,991	13,526,991
19.2 End of period (Line 18 plus Line 19.1).....	33,500,669	14,958,789	41,328,844

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

20.0001	0	0	0
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NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies

A. The financial statements of Colony Specialty Insurance Company (the Company) are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance (Insurance Department). The Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) "*Accounting Practices and Procedures Manual*" (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio. These financial statements contain no differences as a result of practices prescribed or permitted by Ohio that differ from NAIC SAP.

Note 2 - Accounting Changes and Corrections of Errors

Not applicable.

Note 3 - Business Combinations and Goodwill

Not applicable.

Note 4 - Discontinued Operations

Not applicable.

Note 5 - Investments

- D. Loan-backed securities
- (1)

Prepayment assumptions for loan-backed securities were obtained from an industry standard external data provider.
- (2)

The Company did not have any securities with a recognized other-than-temporary impairment loss in the three months ended March 31, 2011.
- (3)

Not applicable.
- (4)

Loan-backed securities in an unrealized loss position at March 31, 2011 for less than 1 year:

Fair value:	\$ 2,410,794
Amortized Cost:	\$ 2,433,078
Statement Value:	\$ 2,433,078
Unrealized Loss:	\$ (22,284)
- (5)

The Company evaluates its investments for impairment. In accordance with policy, the determination that a security has incurred an other-than-temporary decline in fair value and the associated amount of any loss recognition requires the judgment by the Company's management and a continual review of its investments. Investments in an unrealized loss position are reviewed on a quarterly basis to determine whether a decline in fair value below the amortized cost basis is other-than-temporary. In general, the process for identifying other-than-temporary declines in fair value involves the consideration of a number of factors, including but not limited to, whether the issuer has been downgraded to below investment-grade, the length of time in which there has been a significant decline in value, the liquidity, business prospects, and overall financial condition of the issuer, the nature and performance of the collateral or other credit support backing the security, the significance of the decline in value, and whether the Company has the intent to sell the debt security or may be required to sell the debt security before its anticipated recovery. If consideration of the factors above results in a conclusion that the decline in fair value is other-than-temporary, the cost basis of the security is written down to fair value and the write down is recorded as a realized loss. For loan-backed securities, the aforementioned factors were evaluated at the end of each quarter and it was determined that there was no other-than-temporary impairment during the three month period ended March 31, 2011.

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

Note 7 - Investment Income

No significant change.

Note 8 - Derivative Instruments

Not applicable.

NOTES TO FINANCIAL STATEMENTS

Note 9 - Income Taxes

A. The components of net deferred tax assets at March 31, 2011 and December 31, 2011 were as follows:

	03/31/2010	03/31/2010	03/31/2010	12/31/2010
	Ordinary	Capital	Total	
Gross Deferred Tax Assets	\$ 2,969	\$ 4,748	\$ 7,717	\$ 6,130
Gross Deferred Tax Liabilities	4,208	5,222,932	5,227,140	5,433,365
Net Deferred Tax Asset/(Liability)	(1,239)	(5,218,184)	(5,219,423)	(5,427,235)
Deferred Tax Assets Non-admitted			-	-
Net Admitted Deferred Tax Liability			(5,219,423)	(5,427,235)
(Increase)/Decrease in Non-admitted Deferred Tax Asset			\$ -	\$ -

B. Deferred tax liabilities not recognized:

The Company had no unrecognized deferred tax liabilities.

C. Current Tax and Change in Deferred Tax

The provision for incurred taxes on earnings as of March 31, 2011 and December 31, 2010 was:

	3/31/2011	12/31/2010
Federal Income Tax on Current Year Earnings	\$ 100,352	\$ 658,813
Current Year Adjustment of Prior Years' Tax	-	(26,999)
Federal Income Tax on Net Capital Gains	9,519	361,299
Federal Income Taxes Incurred	\$ 109,871	\$ 993,113

The tax effect of temporary differences that give rise to significant portions of the deferred tax assets and deferred tax liabilities was as follows:

	3/31/2011	12/31/2010
Deferred tax assets:		
Non-admitted assets	\$2,969	\$6,130
Unrealized losses on equity securities	4,748	-
Total deferred tax assets	7,717	6,130
Non-admitted deferred tax assets	-	-
Admitted deferred tax assets	7,717	6,130
Deferred tax liabilities:		
Net unrealized gains on equity securities	5,222,932	5,432,965
Accumulated bond discounts	4,208	400
Total deferred tax liabilities	5,227,140	5,433,365
Net deferred tax liability	\$(5,219,423)	\$(5,427,235)

The change in net deferred income taxes was comprised of the following:

	3/31/2011	12/31/2010	Change
Total gross deferred tax assets	\$ 7,717	\$ 6,130	\$ 1,587
Total gross deferred tax liabilities	5,227,140	5,433,365	(206,225)
Net deferred tax liability	(5,219,423)	(5,427,235)	207,812
Deferred tax on change in net unrealized capital gains			(214,781)
Change in net deferred income tax			\$ (6,969)

NOTES TO FINANCIAL STATEMENTS

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

The significant items causing a difference between the statutory federal income tax rate and the Company's effective income tax rate are as follows:

	3/31/2011	Effective tax rate
Provision computed at statutory rate	\$ 166,028	35.00%
Tax exempt interest income	(55,429)	(11.69)
Non-admitted assets	3,161	0.67
Other	3,080	0.65
Total	\$ 116,840	24.63%
Federal and foreign income taxes incurred	\$ 100,352	21.15%
Realized capital gains tax	9,519	2.01
Change in net deferred income taxes	6,969	1.47
Total statutory income taxes	\$ 116,840	24.63%

E. Operating Loss and Tax Credit Carry-forwards

No change

F. Consolidated Federal Income Tax Return

No change

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant change.

Note 11 - Debt

Not applicable.

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

Not applicable.

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

No significant change.

Note 14 - Contingencies

No significant change.

Note 15 - Leases

Not applicable.

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

Not applicable.

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

C. Not applicable.

Note 18 - Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not applicable.

NOTES TO FINANCIAL STATEMENTS

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

Not applicable.

Note 20 - Fair Value

- A. The Company's financial assets carried at fair value have been classified, for disclosure purposes, based on a three-level hierarchy shown below. The hierarchy gives the highest ranking to fair values determined using unadjusted quoted prices in active markets for identical assets (Level 1) and the lowest ranking to fair values using methodologies and models with unobservable inputs (Level 3). An asset's classification is based on the lowest level input that is significant to its measurement. The levels of the fair value hierarchy are as follows:
- Level 1—Values are quoted prices (unadjusted) in active markets for identical assets that can be accessed at the reporting date. Actively traded, as defined by the Company, is a security that has traded in the past seven days. The Company receives one quote per instrument for Level 1 inputs.
 - Level 2—Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly. The Company receives one quote per instrument for Level 2 inputs.
 - Level 3—Unobservable inputs reflecting the Company's own assumptions about the assumptions market participants would use in pricing the asset or liability based on the best information available in the circumstances.

The Company receives fair value prices from an independent pricing service and its third-party investment managers. These prices are determined using observable market information such as dealer quotes, market spreads, cash flows, yield curves, live trading levels, trade execution data, market consensus prepayment speeds, credit information and the security's terms and conditions, among other things.

- (1) The following table provides information as of March 31, 2011 about the Company's financial assets measured at fair value:

	Level 1	Level 2	Level 3	Total
Assets at Fair Value:				
Bonds at lower of cost or fair value	\$ -	\$3,106,461	\$ -	\$ 3,106,461
Unaffiliated common stocks	\$ -	\$ -	\$14,922,664	\$14,922,664
Total Assets at Fair Value	\$ -	\$3,106,461	\$14,922,664	\$18,029,125

- (2) The following table provides information as of March 31, 2011 about the Company's Level 3 financial assets:

Fair Value Measurements Using Unobservable Inputs	
Unaffiliated common stocks:	
Beginning balance, January 1, 2011	\$15,522,758
Transfers into Level 3	-
Transfers out of Level 3	-
Total gains/(losses) realized included in earnings	-
Total gains (losses) unrealized included in surplus	(600,094)
Total purchases	-
Total sales	-
Total issuances	-
Total settlements	-
Ending balance, March 31, 2011	\$14,922,664
Amount of total gains or losses for the period included in earnings attributable to the change in unrealized gains or losses relating to assets still held at the reporting date	-

- (3) The Company had no transfers between Levels in the three month period ended March 31, 2011.
- (4) For Level 2 investments, the Company's third-party administrator receives prices from independent pricing services and custodians and derives a "best price". These prices are determined using observable market information such as dealer quotes, market spreads, cash flows, yield curves, live trading levels, trade execution data, market consensus prepayment speeds, credit information and the security's terms and conditions, among other things. For Level 3 investments, the Company uses a quoted market price and adjusts the price using unobservable inputs for its investment in an equity security due to certain restrictions as to the ability to sell the security.

Note 21 - Other Items

No significant change.

Note 22 - Events Subsequent

Not applicable.

NOTES TO FINANCIAL STATEMENTS

Note 23 - Reinsurance

No significant change.

Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not applicable.

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

No significant change.

Note 26 - Intercompany Pooling Arrangements

Not applicable.

Note 27 - Structured Settlements

Not applicable.

Note 28 - Health Care Receivables

Not applicable.

Note 29 - Participating Policies

Not applicable.

Note 30 - Premium Deficiency Reserves

No significant change.

Note 31 - High Deductibles

Not applicable.

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

Not applicable.

Note 33 - Asbestos/Environmental Reserves

No significant change.

Note 34 - Subscriber Savings Accounts

Not applicable.

Note 35 - Multiple Peril Crop Insurance

Not applicable.

Note 36 - Financial Guaranty Insurance

B. Not applicable.

COLONY SPECIALTY INSURANCE COMPANY
GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
GENERAL

1.1

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]

1.2

If yes, has the report been filed with the domiciliary state?

Yes [☐]

No [☐]

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.

Have there been any substantial changes in the organizational chart since the prior quarter end?
If yes, complete the Schedule Y-Part 1 - Organizational chart.

Yes [☐]

No [☒ X]

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [☐]

No [☒ X]

4.2

If yes, provide name of 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

5.

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?
If yes, attach an explanation.

Yes [☐]

No [☐]

N/A [☒ X]

6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2008.....

6.2

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.

12/31/2008.....

6.3

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).

10/30/2009.....

6.4

By what department or departments?
Ohio

6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes [☐]

No [☐]

N/A [☒ X]

6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [☐]

No [☐]

N/A [☒ X]

7.1

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?

Yes [☐]

No [☒ X]

7.2

If yes, give full information:

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [☐]

No [☒ X]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [☐]

No [☒ X]

8.4

If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator].

1	2	3	4	5	6	7
Affiliate Name	Location (City, State)	FRB	OCC	OTS	FDIC	SEC

9.1

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;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes [☒ X]

No [☐]

9.11

If the response to 9.1 is No, please explain:

9.2

Has the code of ethics for senior managers been amended?

Yes [☐]

No [☒ X]

9.21

If the response to 9.2 is Yes, provide information related to amendment(s).

9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [☐]

No [☒ X]

COLONY SPECIALTY INSURANCE COMPANY
GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
GENERAL

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$.....4,341,297

INVESTMENT

11.1 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]

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

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

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

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

14.2 If yes, please complete the following:

	1	2
	Prior Year-End	Current Quarter
	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
14.21 Bonds.....	\$0	\$0
14.22 Preferred Stock.....	\$0	\$0
14.23 Common Stock.....	\$0	\$0
14.24 Short-Term Investments.....	\$0	\$0
14.25 Mortgage Loans on Real Estate.....	\$0	\$0
14.26 All Other.....	\$0	\$0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above.....	\$0	\$0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]

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

16. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 3, III. Conducting Examinations, F-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

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

1	2
Name of Custodian(s)	Custodian Address
US Bank Institutional Trust & Custody	2204 Lakeshore Dr, Suite 302, Birmingham, AL 35209

16.2 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	2	3
Name(s)	Location(s)	Complete Explanation(s)

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? Yes [] No [X]

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

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

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

1	2	3
Central Registration Depository	Name(s)	Address
107105	Blackrock Financial Management	40 E. 52nd Street, New York, NY 10022

17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [X] No []

17.2 If no, list exceptions:

COLONY SPECIALTY 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? Yes [] No [] N/A [X]
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting 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? Yes [] No [X]
If yes, attach an explanation.

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	0.000 %	0	0	0	0	0	0	0	0
Total.....	XXX...	XXX.....	0	0	0	0	0	0	0	0

5. Operating Percentages:
5.1 A&H loss percent 0.0 %
5.2 A&H cost containment percent 0.0 %
5.3 A&H expense percent excluding cost containment expenses 0.0 %
6.1 Do you act as a custodian for health savings accounts? Yes [] No [X]
6.2 If yes, please provide the amount of custodial funds held as of the reporting date. 0
6.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
6.4 If yes, please provide the amount of funds administered as of the reporting date. 0

COLONY SPECIALTY INSURANCE COMPANY
SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Is Insurer Authorized? (YES or NO)
------------------------------	------------------------------	----------------------------	-----------------------------------	---

NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

		1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2	3	4	5	6	7
States, Etc.		Active Status	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date
1.	Alabama.....AL	L.....	201,457	180,135	0	0	865,624	970,415
2.	Alaska.....AK	L.....	0	0	0	0	0	0
3.	Arizona.....AZ	L.....	0	0	0	0	0	0
4.	Arkansas.....AR	L.....	41,382	23,728	0	0	0	0
5.	California.....CA	L.....	0	0	0	0	0	0
6.	Colorado.....CO	L.....	134,639	94,808	24,167	6,196	313,497	512,241
7.	Connecticut.....CT	L.....	0	0	0	0	0	0
8.	Delaware.....DE	L.....	0	0	0	0	0	0
9.	District of Columbia.....DC	L.....	7,179	2,704	535	0	18	59,845
10.	Florida.....FL	L.....	331,164	354,763	559,434	219,555	2,633,905	3,274,634
11.	Georgia.....GA	L.....	115,963	112,200	0	0	287,932	32
12.	Hawaii.....HI	L.....	0	0	0	0	0	0
13.	Idaho.....ID	L.....	34,862	47,981	0	0	0	0
14.	Illinois.....IL	L.....	0	(1,118)	0	0	0	0
15.	Indiana.....IN	L.....	100,935	88,735	(10,000)	13,958	176,748	113,270
16.	Iowa.....IA	L.....	0	0	0	0	0	0
17.	Kansas.....KS	L.....	0	0	0	0	0	0
18.	Kentucky.....KY	L.....	0	0	0	0	0	0
19.	Louisiana.....LA	L.....	0	0	0	0	0	0
20.	Maine.....ME	L.....	0	0	0	0	0	0
21.	Maryland.....MD	L.....	247,411	258,679	17,142	22,754	2,569,192	1,006,838
22.	Massachusetts.....MA	L.....	0	0	0	0	0	0
23.	Michigan.....MI	L.....	0	0	0	0	0	0
24.	Minnesota.....MN	L.....	0	0	0	0	0	0
25.	Mississippi.....MS	L.....	18,576	20,962	0	0	70,658	0
26.	Missouri.....MO	L.....	0	0	0	0	0	0
27.	Montana.....MT	L.....	42,574	34,281	0	0	814,379	86
28.	Nebraska.....NE	L.....	0	0	0	0	0	0
29.	Nevada.....NV	L.....	218,413	114,714	19,830	25,821	1,415,194	1,117,790
30.	New Hampshire.....NH	L.....	0	0	0	0	0	0
31.	New Jersey.....NJ	L.....	0	0	0	0	0	0
32.	New Mexico.....NM	N.....	0	0	0	0	0	0
33.	New York.....NY	L.....	0	0	0	0	0	0
34.	North Carolina.....NC	L.....	153,572	188,225	25,147	104,168	2,049,874	3,476,472
35.	North Dakota.....ND	L.....	0	0	0	0	0	0
36.	Ohio.....OH	L.....	335,827	406,054	25,975	43,110	973,759	543,741
37.	Oklahoma.....OK	L.....	0	0	0	0	0	0
38.	Oregon.....OR	L.....	295,762	299,025	65,543	61,088	360,022	77,091
39.	Pennsylvania.....PA	L.....	1,974,960	1,099,331	208,416	173,211	8,498,997	9,193,644
40.	Rhode Island.....RI	L.....	0	0	0	0	0	0
41.	South Carolina.....SC	L.....	79,155	50,750	13,027	12,061	2,291,392	1,686,283
42.	South Dakota.....SD	L.....	20,104	19,382	0	0	0	0
43.	Tennessee.....TN	L.....	149,429	151,899	0	0	402,787	92
44.	Texas.....TX	L.....	0	0	0	0	0	0
45.	Utah.....UT	L.....	16,716	21,935	0	0	35,389	0
46.	Vermont.....VT	L.....	0	0	0	0	0	0
47.	Virginia.....VA	E.....	947,056	1,551,227	62,433	572,779	6,384,222	7,713,654
48.	Washington.....WA	L.....	(12,559)	(8,041)	0	0	0	0
49.	West Virginia.....WV	L.....	0	0	0	0	0	0
50.	Wisconsin.....WI	L.....	(1,609)	0	0	0	0	0
51.	Wyoming.....WY	L.....	0	0	0	0	0	0
52.	American Samoa.....AS	N.....	0	0	0	0	0	0
53.	Guam.....GU	N.....	0	0	0	0	0	0
54.	Puerto Rico.....PR	N.....	0	0	0	0	0	0
55.	US Virgin Islands.....VI	N.....	0	0	0	0	0	0
56.	Northern Mariana Islands.....MP	N.....	0	0	0	0	0	0
57.	Canada.....CN	N.....	0	0	0	0	0	0
58.	Aggregate Other Alien.....OT	XXX.....	0	0	0	0	0	0
59.	Totals.....	(a).....49	5,452,968	5,112,359	1,011,649	1,254,701	30,143,589	29,746,128

DETAILS OF WRITE-INS							
5801.	.....	XXX.....	0	0	0	0	0
5802.	.....	XXX.....	0	0	0	0	0
5803.	.....	XXX.....	0	0	0	0	0
5898.	Summary of remaining write-ins for Line 58 from overflow page.....	XXX.....	0	0	0	0	0
5899.	Totals (Lines 5801 thru 5803 + Line 5898) (Line 58 above).....	XXX.....	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.
(a) Insert the number of L responses except for Canada and Other Alien.

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

PART 1 – ORGANIZATIONAL CHART

Q11

NONE

COLONY SPECIALTY INSURANCE COMPANY
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.....	538	(348)	(64.7)	23.6
2. Allied lines.....	139,595	33,232	23.8	17.6
3. Farmowners multiple peril.....	0	0	0.0	0.0
4. Homeowners multiple peril.....	0	0	0.0	0.0
5. Commercial multiple peril.....	215,040	46,641	21.7	48.3
6. Mortgage guaranty.....	0	0	0.0	0.0
8. Ocean marine.....	0	0	0.0	0.0
9. Inland marine.....	18,076	7,044	39.0	27.8
10. Financial guaranty.....	0	0	0.0	0.0
11.1. Medical professional liability - occurrence.....	0	(1,102)	0.0	0.0
11.2. Medical professional liability - claims-made.....	751	(2,174)	(289.4)	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.....	1,138,199	719,452	63.2	(184.5)
17.1 Other liability-occurrence.....	530,728	190,387	35.9	39.1
17.2 Other liability-claims made.....	2,956,314	2,718,720	92.0	52.8
17.3 Excess workers' compensation.....	0	0	0.0	0.0
18.1 Products liability-occurrence.....	170,255	(587,053)	(344.8)	(38.1)
18.2 Products liability-claims made.....	5,673	(93,396)	(1,646.3)	61.8
19.1, 19.2 Private passenger auto liability.....	0	0	0.0	0.0
19.3, 19.4 Commercial auto liability.....	131,551	(151,712)	(115.3)	53.0
21. Auto physical damage.....	46,368	1,486	3.2	39.3
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	(5,352)	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. Warranty.....	0	0	0.0	0.0
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.0	0.0
35. Totals.....	5,353,090	2,875,825	53.7	16.2
DETAILS OF WRITE-INS				
3401.....	0	0	0.0	0.0
3402.....	0	0	0.0	0.0
3403.....	0	0	0.0	0.0
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.0	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....	1,198	1,198	708
2. Allied lines.....	55,585	55,585	259,963
3. Farmowners multiple peril.....	0	0	0
4. Homeowners multiple peril.....	0	0	0
5. Commercial multiple peril.....	227,563	227,563	259,416
6. Mortgage guaranty.....	0	0	0
8. Ocean marine.....	0	0	0
9. Inland marine.....	9,655	9,655	5,090
10. Financial guaranty.....	0	0	0
11.1 Medical professional liability - occurrence.....	0	0	0
11.2 Medical professional liability - claims made.....	5,714	5,714	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.....	1,434,829	1,434,829	649,993
17.1 Other liability-occurrence.....	404,741	404,741	472,376
17.2 Other liability-claims made.....	3,033,313	3,033,313	2,928,906
17.3 Excess workers' compensation.....	0	0	0
18.1 Products liability-occurrence.....	128,132	128,132	261,725
18.2 Products liability-claims made.....	1,011	1,011	5,600
19.1 19.2 Private passenger auto liability.....	0	0	0
19.3 19.4 Commercial auto liability.....	100,552	100,552	190,035
21. Auto physical damage.....	50,675	50,675	78,547
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. Warranty.....	0	0	0
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	5,452,968	5,452,968	5,112,359
DETAILS OF WRITE-INS			
3401.....	0	0	0
3402.....	0	0	0
3403.....	0	0	0
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	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 (Cols. 1 + 2)	2011 Loss and LAE Payments on Claims Reported as of Prior Year-End	2011 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2011 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 (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 Reserve Developed (Savings)/Deficiency (Cols. 11 + 12)	
1. 2008 + Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0	
2. 2009.....	0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Subtotals 2009 + Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2010.....	0	0	0	0	0	0	0	0	0	0	0	0	0	
5. Subtotals 2010 + Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0	0	XXX.....	XXX.....	XXX.....	
7. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Prior Year- End's Surplus As Regards Policyholders	78,146										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. ....0.0 %	2. ....0.0 %	3. ....0.0 %	
														Col. 13, Line 7 Line 8
														4. ....0.0 %

Q13

COLONY SPECIALTY 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 Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	YES
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4. Will the Director and Officer Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Explanation:

1.
2.
3.
4.

Bar Code:



NONE

COLONY SPECIALTY INSURANCE COMPANY
SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Current year change in encumbrances.....	0	0
4. Total gain (loss) on disposals.....	0	0
5. Deduct amounts received on disposals.....	0	0
6. Total foreign exchange change in book/adjusted carrying value.....	0	0
7. Deduct current year's other than temporary impairment recognized.....	0	0
8. Deduct current year's depreciation.....	0	0
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....	0	0
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase (decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium and mortgage interest points and commitment fees.....	0	0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....	0	0
10. Deduct current year's other than temporary impairment recognized.....	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....	0	0
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....	0	0
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase (decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium and depreciation.....	0	0
9. Total foreign exchange change in book/adjusted carrying value.....	0	0
10. Deduct current year's other than temporary impairment recognized.....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Deduct total nonadmitted amounts.....	0	0
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	79,810,484	94,667,156
2. Cost of bonds and stocks acquired.....	9,534,313	66,773,921
3. Accrual of discount.....	41,684	138,610
4. Unrealized valuation increase (decrease).....	(613,662)	1,730,824
5. Total gain (loss) on disposals.....	28,988	1,015,813
6. Deduct consideration for bonds and stocks disposed of.....	7,928,850	83,943,474
7. Deduct amortization of premium.....	187,855	572,366
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	80,685,101	79,810,484
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	80,685,101	79,810,484

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	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1 (a).....	97,049,105	84,440,361	97,377,332	(50,615)	84,061,519	0	0	97,049,105
2. Class 2 (a).....	7,034,175	2,073,535	799,998	(84,258)	8,223,455	0	0	7,034,175
3. Class 3 (a).....	0	4,257,813	0	(14,558)	4,243,255	0	0	0
4. Class 4 (a).....	0	0	0	0	0	0	0	0
5. Class 5 (a).....	0	0	0	0	0	0	0	0
6. Class 6 (a).....	0	0	0	0	0	0	0	0
7. Total Bonds.....	104,083,280	90,771,709	98,177,330	(149,431)	96,528,229	0	0	104,083,280
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.....	104,083,280	90,771,709	98,177,330	(149,431)	96,528,229	0	0	104,083,280

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$.....30,765,791; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

QSI02

COLONY SPECIALTY INSURANCE COMPANY
SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals.....	15,716,969	XXX.....	15,712,511	3,956	0

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	23,246,328	13,526,247
2. Cost of short-term investments acquired.....	54,735,931	138,553,134
3. Accrual of discount.....	7,180	3,110
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	139	11,161
6. Deduct consideration received on disposals.....	62,272,606	128,847,324
7. Deduct amortization of premium.....	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	15,716,971	23,246,328
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	15,716,971	23,246,328

SCHEDULE DB - PART A - VERIFICATION

Options, Caps, Floors, Collars, Swaps and Forwards

1.	Book/Adjusted Carrying Value, December 31, prior year (Line 9, prior year).....	0
2.	Cost paid/(consideration received) on additions.....	0
3.	Unrealized valuation increase (decrease).....	0
4.	Total gain (loss) on termination recognized.....	0
5.	Considerations received (paid) on terminations.....	0
6.	Amortization.....	0
7.	Adjustment to the Book/Adjusted Carrying Value of hedge item.....	0
8.	Total foreign exchange change in Book/Adjusted Carrying Value.....	0
9.	Book/Adjusted Carrying Value, December 31, current year (Lines 1 + 2 + 3 + 4 - 5 + 6 + 7 + 8).....	0
10.	Deduct nonadmitted assets.....	0
11.	Statement value at end of current period (Line 9 minus Line 10).....	0

NONE

SCHEDULE DB - PART B - VERIFICATION

Futures Contracts

1.	Book/Adjusted Carrying Value, December 31, prior year.....	0
2.	Net cash deposits (Section 1, Broker Name/Net Cash Deposits footnote).....	0
3.1	Change in variation margin on open contracts.....	0
3.2	Add:	
	Change in adjustment to basis of hedged item:	
3.21	Section 1, Column 17, current year to date minus.....	0
3.22	Section 1, Column 17, prior year.....	0
	Change in amount recognized:	
3.23	Section 1, Column 16, current year to date minus.....	0
3.24	Section 1, Column 16, prior year.....	0
3.3	Subtotal (line 3.1 minus Line 3.2).....	0
4.1	Variation margin on terminated contracts during the year.....	0
4.2	Less:	
4.21	Amount used to adjust basis of hedged item.....	0
4.22	Amount recognized.....	0
4.3	Subtotal (line 4.1 minus Line 4.2).....	0
5.	Dispositions gains (losses) on contracts terminated in prior year:	
5.1	Recognized.....	0
5.2	Used to adjust basis of hedged items.....	0
6.	Book/Adjusted Carrying Value at end of current period (Lines 1 + 2 + 3.3 - 4.3 - 5.1 - 5.2).....	0
7.	Deduct nonadmitted assets.....	0
8.	Statement value at end of current period (Line 6 minus Line 7).....	0

NONE

SCHEDULE DB - PART C - SECTION 1

Replicated (Synthetic) Assets Open as of Current Statement Date

Replicated (Synthetic) Asset								Components of the Replicated (Synthetic) Asset							
1	2	3	4	5	6	7	8	Derivative Instruments Open			Cash Instrument(s) Held				
Number	Description	NAIC Designation or Other Description	Notional Amount	Book/Adjusted Carrying Value	Fair Value	Effective Date	Maturity Date	9	10	11	12	13	14	15	16
								Description	Book/Adjusted Carrying Value	Fair Value	CUSIP	Description	NAIC Desig. or Other Description	Book/Adjusted Carrying Value	Fair Value

NONE

SCHEDULE DB - PART C - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-To-Date	
	1 Number of Positions	2 Total Replicated (Synthetic) Assets Statement Value	3 Number of Positions	4 Total Replicated (Synthetic) Assets Statement Value	5 Number of Positions	6 Total Replicated (Synthetic) Assets Statement Value	7 Number of Positions	8 Total Replicated (Synthetic) Assets Statement Value	9 Number of Positions	10 Total Replicated (Synthetic) Assets Statement Value
1. Beginning Inventory.....	0	0	0	0	0	0	0	0	0	0
2. Add: Opened or Acquired Transactions.....	0	0	0	0	0	0	0	0	0	0
3. Add: Increases in Replicated Asset Statement Value.....	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0
4. Less: Closed or Disposed of Transactions.....	0	0	0	0	0	0	0	0	0	0
5. Less: Positions Disposed of for Failing Effectiveness Criteria.....	0	0	0	0	0	0	0	0	0	0
6. Less: Decreases in Replicated (Synthetic) Asset Statement Value.....	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0
7. Ending inventory.....	0	0	0	0	0	0	0	0	0	0

NONE

COLONY SPECIALTY INSURANCE COMPANY
SCHEDULE DB - VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

		Book/Adjusted Carrying Value Check
1.	Part A, Section 1, Column 14.....	0
2.	Part B, Section 1, Column 14.....	0
3.	Total (Line 1 plus Line 2).....	0
4.	Part D, Column 5.....	0
5.	Part D, Column 6.....	0
6.	Total (Line 3 minus Line 4 minus Line 5).....	0
		Fair Value Check
7.	Part A, Section 1, Column 16.....	0
8.	Part B, Section 1, Column 13.....	0
9.	Total (Line 7 plus Line 8).....	0
10.	Part D, Column 8.....	0
11.	Part D, Column 9.....	0
12.	Total (Line 9 minus Line 10 minus Line 11).....	0
		Potential Exposure Check
13.	Part A, Section 1, Column 21.....	0
14.	Part B, Section 1, Column 19.....	0
15.	Part D, Column 11.....	0
16.	Total (Line 13 plus Line 14 minus Line 15).....	0

NONE

COLONY SPECIALTY INSURANCE COMPANY
SCHEDULE E- VERIFICATION
Cash Equivalents

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	16,549,229	0
2. Cost of cash equivalents acquired.....	26,501,466	66,379,395
3. Accrual of discount.....	3,129	4,099
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	0	5,308
6. Deduct consideration received on disposals.....	28,005,000	49,839,573
7. Deduct amortization of premium.....	4	0
8. Total foreign exchange change in book/ adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	15,048,819	16,549,229
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	15,048,819	16,549,229

SCHEDULE A - PART 2

Showing all Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Location		4	5	6	7	8	9
	2	3						
Description of Property	City	State	Date Acquired	Name of Vendor	Actual Cost at Time of Acquisition	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Additional Investment Made After Acquisition

NONE

QE01

SCHEDULE A - PART 3

Showing all Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract "

1	Location		4	5	6	7	8	Change in Book/Adjusted Carrying Value Less Encumbrances					14	15	16	17	18	19	20
	2	3						9	10	11	12	13							
Description of Property	City	State	Disposal Date	Name of Purchaser	Actual Cost	Expended for Additions, Permanent Improvements and Changes in Encumbrances	Book/Adjusted Carrying Value Less Encumbrances Prior Year	Current Year's Depreciation	Current Year's Other Than Temporary Impairment Recognized	Current Year's Change in Encumbrances	Total Change in B./A.C.V. (11 - 9 - 10)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Amounts Received During Year	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Gross Income Earned Less Interest Incurred on Encumbrances	Taxes, Repairs, and Expenses Incurred

NONE

SCHEDULE B - PART 2

Showing all Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Location		4	5	6	7	8	9
	2	3						
Loan Number	City	State	Loan Type	Date Acquired	Rate of Interest	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Value of Land and Buildings

NONE

QE02

SCHEDULE B - PART 3

Showing all Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter

1	Location		4	5	6	7	Change in Book Value/Recorded Investment						14	15	16	17	18
	2	3					8	9	10	11	12	13					
Loan Number	City	State	Loan Type	Date Acquired	Disposal Date	Book Value/Recorded Investment Excluding Accrued Interest Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Capitalized Deferred Interest and Other	Total Change in Book Value (8+9-10+11)	Total Foreign Exchange Change in Book Value	Book Value/Recorded Investment Excluding Accrued Interest on Disposal	Consideration	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal

NONE

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

1 CUSIP Identification	2 Name or Description	Location		5 Name of Vendor or General Partner	6 NAIC Design- nation	7 Date Originally Acquired	8 Type and Strategy	9 Actual Cost at Time of Acquisition	10 Additional Investment Made After Acquisition	11 Amount of Encumbrances	12 Commitment for Additional Investment	13 Percentage of Ownership
		3 City	4 State									

NONE

QE03

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

1 CUSIP Identification	2 Name or Description	Location		5 Name of Purchaser or Nature of Disposal	6 Date Originally Acquired	7 Disposal Date	8 Book/Adjusted Carrying Value Less Encumbrances, Prior Year	Changes in Book/Adjusted Carrying Value						15 Book/Adjusted Carrying Value Less Encumbrances on Disposal	16 Consideration	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Investment Income
		3 City	4 State					9 Unrealized Valuation Increase (Decrease)	10 Current Year's (Depreciation) or (Amortization)/ Accretion	11 Current Year's Other Than Temporary Impairment Recognized	12 Capitalized Deferred Interest and Other	13 Total Change in B./A.C.V (9+10-11+12)	14 Total Foreign Exchange Change in B./A.C.V.						

NONE

SCHEDULE D - PART 3

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

1	2		3	4	5	6	7	8	9	10
CUSIP Identification	Description		Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
QE04	Bonds - Industrial and Miscellaneous									
	02209S	AJ 2		...02/16/2011	CITIGROUP GLOBAL MARKETS INC.....		320,235	250,000	1,028	2FE.....
	03523T	BB 3		...01/24/2011	JP MORGAN SECURITIES INC.....		377,275	380,000	0	2FE.....
	118230	AJ 0		...01/04/2011	Suntrust.....		249,050	250,000	0	2FE.....
	12527G	AA 1		...03/22/2011	CREDIT SUISSE SECURITIES (USA).....		281,250	250,000	6,875	3FE.....
	12527G	AB 9		...03/22/2011	PERSHING LLC.....		283,438	250,000	7,125	3FE.....
	257559	AG 9	I.....	...03/25/2011	Morgan Stanley.....		315,938	250,000	8,884	3FE.....
	29358Q	AA 7	F.....	...03/08/2011	CITIGROUP GLOBAL MARKETS INC.....		480,323	490,000	0	2F.....
	26875P	AH 4		...01/04/2011	CREDIT SUISSE SECURITIES (USA).....		246,238	250,000	764	1FE.....
	345397	VN 0		...03/29/2011	Morgan Stanley.....		867,000	800,000	25,822	3FE.....
	350472	AC 0		...03/16/2011	Morgan Stanley.....		306,750	300,000	3,021	3FE.....
	471109	AC 2		...03/22/2011	JP MORGAN SECURITIES INC.....		273,750	250,000	8,000	3FE.....
	652482	CC 2		...02/09/2011	JP MORGAN SECURITIES INC.....		646,653	650,000	0	2FE.....
	629377	AU 6		...03/16/2011	CITIGROUP GLOBAL MARKETS INC.....		311,250	300,000	3,073	3FE.....
	69073T	AP 8		...03/18/2011	DEUTSCHE BANK SECURITIES, INC.....		273,750	250,000	2,663	3FE.....
	377316	AK 0		...03/17/2011	CREDIT SUISSE SECURITIES (USA).....		258,125	250,000	6,977	3FE.....
	704549	AE 4		...03/16/2011	DEUTSCHE BANK SECURITIES, INC.....		281,250	250,000	7,170	3FE.....
	749121	CA 5		...03/23/2011	CITIGROUP GLOBAL MARKETS INC.....		273,125	250,000	9,833	3FE.....
	858119	AH 3		...03/16/2011	CREDIT SUISSE SECURITIES (USA).....		257,500	250,000	7,969	3FE.....
	92532B	AB 5		...03/23/2011	Morgan Stanley.....		274,688	250,000	6,948	3FE.....
	36248F	AG 7		...03/23/2011	Goldman Sachs.....		717,080	710,000	2,718	1FE.....
	059497	AX 5		...01/12/2011	JEFFERIES & COMPANY, INC.....		782,583	730,000	1,879	1Z*.....
	12513Y	AF 7		...02/09/2011	CITIGROUP GLOBAL MARKETS INC.....		305,970	295,000	567	1Z*.....
	17311Q	BK 5		...02/15/2011	Wells Fargo.....		782,377	725,000	1,951	1Z*.....
	20173Q	AE 1		...02/09/2011	Goldman Sachs.....		368,717	350,000	688	1Z*.....
3899999.		Total - Bonds - Industrial & Miscellaneous.....					9,534,313	8,980,000	113,955	XXX.....
8399997.		Total - Bonds - Part 3.....					9,534,313	8,980,000	113,955	XXX.....
8399999.		Total - Bonds.....					9,534,313	8,980,000	113,955	XXX.....
9999999.		Total - Bonds, Preferred and Common Stocks.....					9,534,313	XXX.....	113,955	XXX.....

(a) For all common stock bearing the NAIC market indicator "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 During the Current Quarter

1	2			3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
												11	12	13	14	15							
CUSIP Identification	Description			F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value At Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Maturity Date	NAIC Desig- nation or Market Indicator (a)

Bonds - U.S. Government

36223N	UD	4	GN 312980.....	.....	03/01/2011	REDEMPTION.....	.....	.....213	213	222	221	0	(8)	0	(8)	0	213	0	0	0	3	12/15/2021	1.....
3620AC	3D	4	GN 726296.....	.....	02/09/2011	VARIOUS.....	.....	1,694,794	1,660,409	1,714,307	1,710,878	0	(3,065)	0	(3,065)	0	1,707,813	0	(13,019)	(13,019)	15,023	09/15/2039	1.....
0599999.	Total - Bonds - U.S. Government.....							1,695,007	1,660,622	1,714,529	1,711,099	0	(3,073)	0	(3,073)	0	1,708,026	0	(13,019)	(13,019)	15,026	XXX...	..XXX....

Bonds - U.S. Special Revenue and Special Assessment

312931	K6	4	FG A84817.....	.....	03/01/2011	REDEMPTION.....	.....	.....111,878	111,878	117,122	116,822	0	(4,945)	0	(4,945)	0	111,878	0	(0)	(0)	1,363	03/01/2039	1FE.....
312938	YE	7	FG A90709.....	.....	02/09/2011	VARIOUS.....	.....	947,203	941,091	953,737	952,154	0	(926)	0	(926)	0	951,228	0	(4,025)	(4,025)	8,525	01/01/2040	1FE.....
3128M4	2P	7	FG G03182.....	.....	03/01/2011	REDEMPTION.....	.....	63,965	63,965	60,287	61,514	0	2,451	0	2,451	0	63,965	0	0	0	485	05/01/2036	1FE.....
3128M7	LM	6	FG G05432.....	.....	03/01/2011	REDEMPTION.....	.....	38,367	38,367	40,171	40,024	0	(1,657)	0	(1,657)	0	38,367	0	0	0	265	04/01/2039	1FE.....
31283J	SM	4	FG G10524.....	.....	03/01/2011	REDEMPTION.....	.....	.....212	212	211	212	0	(0)	0	(0)	0	212	0	0	0	2	06/01/2011	1FE.....
31393K	LM	5	FHR 2570 CL.....	.....	03/01/2011	REDEMPTION.....	.....	52,704	52,704	50,357	52,012	0	692	0	692	0	52,704	0	0	0	334	07/15/2017	1FE.....
31394M	HR	4	FHR 2710 HC.....	.....	03/01/2011	REDEMPTION.....	.....	39,722	39,722	38,557	39,233	0	489	0	489	0	39,722	0	0	0	260	12/15/2022	1FE.....
31395T	K8	6	FHR 2957 HB.....	.....	03/01/2011	REDEMPTION.....	.....	213,898	213,898	224,593	219,933	0	(6,034)	0	(6,034)	0	213,898	0	0	0	1,587	08/15/2032	1FE.....
31402D	MP	2	FN 725866.....	.....	03/01/2011	REDEMPTION.....	.....	33,042	33,042	31,003	31,790	0	1,251	0	1,251	0	33,042	0	(0)	(0)	217	09/01/2034	1.....
31403D	GY	9	FN 745515.....	.....	03/01/2011	REDEMPTION.....	.....	99,050	99,050	92,658	94,766	0	4,284	0	4,284	0	99,050	0	0	0	757	05/01/2036	1.....
31407C	AE	7	FN 826305.....	.....	03/01/2011	REDEMPTION.....	.....	97,883	97,883	91,597	93,694	0	4,188	0	4,188	0	97,883	0	0	0	753	07/01/2035	1.....
31410P	QW	6	FN 893369.....	.....	03/01/2011	REDEMPTION.....	.....	104,336	104,336	99,812	101,362	0	2,973	0	2,973	0	104,336	0	0	0	672	07/01/2033	1.....
31393E	FX	2	FNR 2003-79 NL.....	.....	03/01/2011	REDEMPTION.....	.....	66,014	66,014	62,888	65,026	0	987	0	987	0	66,014	0	0	0	431	05/25/2022	1.....
38374K	RA	3	GNR 2005-3 AE.....	.....	03/01/2011	REDEMPTION.....	.....	48,759	48,759	47,391	48,340	0	419	0	419	0	48,759	0	0	0	349	01/20/2031	1FE.....
3199999.	Total - Bonds - U.S. Special Revenue & Assessment.....							1,917,032	1,910,920	1,910,384	1,916,884	0	4,173	0	4,173	0	1,921,057	0	(4,025)	(4,025)	16,001	XXX...	..XXX....

Bonds - Industrial and Miscellaneous

02209S	AJ	2	ALTRIA GROUP INC.....	.....	03/22/2011	Goldman Sachs.....	.....	328,465	250,000	320,235	0	0	(574)	0	(574)	0	319,661	0	8,804	8,804	3,148	08/06/2019	2FE.....
78387G	AD	5	AT&T INC.....	.....	03/15/2011	MATURITY.....	.....	2,000,000	2,000,000	2,075,500	2,002,134	0	(2,134)	0	(2,134)	0	2,000,000	0	0	0	62,500	03/15/2011	1FE.....
29358Q	AA	7	ENSCO PLC.....	F...	03/21/2011	BNP Paribas.....	.....	487,991	490,000	480,323	0	0	14	0	14	0	480,337	0	7,654	7,654	448	03/15/2021	2F.....
17314Q	AY	3	CMLT1 2009-11 6A1.....	.....	03/25/2011	REDEMPTION.....	.....	209,003	209,003	183,922	186,918	0	22,084	0	22,084	0	209,003	0	(0)	(0)	551	10/25/2035	1Z*.....
06052F	AC	4	BAAT 2009-2A A3.....	.....	03/15/2011	REDEMPTION.....	.....	192,915	192,915	192,913	192,914	0	1	0	1	0	192,915	0	(0)	(0)	675	09/15/2013	1FE.....
17305E	EQ	4	CCCIT 2009-A4 A4.....	.....	03/11/2011	CITIGROUP GLOBAL MARKETS INC.	.....	1,098,438	1,000,000	1,088,125	1,072,838	0	(3,974)	0	(3,974)	0	1,068,864	0	29,573	29,573	11,297	06/23/2016	1FE.....
3899999.	Total - Bonds - Industrial & Miscellaneous.....							4,316,811	4,141,918	4,341,018	3,454,805	0	15,417	0	15,417	0	4,270,779	0	46,032	46,032	78,619	XXX...	..XXX....
8399997.	Total - Bonds - Part 4.....							7,928,850	7,713,459	7,965,930	7,082,788	0	16,518	0	16,518	0	7,899,863	0	28,988	28,988	109,646	XXX...	..XXX....
8399999.	Total - Bonds.....							7,928,850	7,713,459	7,965,930	7,082,788	0	16,518	0	16,518	0	7,899,863	0	28,988	28,988	109,646	XXX...	..XXX....
9999999.	Total - Bonds, Preferred and Common Stocks.....							7,928,850	XXX.....	7,965,930	7,082,788	0	16,518	0	16,518	0	7,899,863	0	28,988	28,988	109,646	XXX...	..XXX....

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

SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
	Description of Items Hedged or Used for Income Generation	Schedule /Exhibit Identifier	Type(s) of Risk	Exchange or Counterparty	Trade Date	Date of Maturity or Expiration	Number of Contracts	Notional Amount	Strike Price, Rate of Indexed Received (Paid)	Prior Year Initial Cost of Premium (Received) Paid	Current Year Initial Cost of Premium (Received) Paid	Current Year Income	Book/ Adjusted Carrying Value	Code	Fair Value	Unrealized Valuation Increase (Decrease)	Total Foreign Exchange Change in B./A.C.V.	Current Year's (Amortization) Accretion	Adjustment to Carrying Value of Hedged Items	Potential Exposure	Credit Quality of Reference Entity	Hedge Effectiveness at Inception and at Quarter-end (a)
Description	Generation	Identifier	Risk	Counterparty	Date	Expiration	Contracts	Amount	(Paid)	Paid	Paid	Income	Value		Value	(Decrease)	B./A.C.V.	Accretion	Items	Exposure	Entity	(a)

NONE

QE06

(a)	Code	Financial or Economic Impact of the Hedge at the End of the Reporting Period
	0	

NONE

SCHEDULE DB - PART B - SECTION 1

Futures Contracts Open as of Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Change in Variation Margin				19	20
														15	16	17	18		
Ticker Symbol	Number of Contracts	Notional Amount	Description	Description of Hedged Item(s)	Schedule/ Exhibit Identifier	Type(s) of Risk	Date of Maturity or Expiration	Exchange	Trade Date	Transaction Price	Reporting Date Price	Fair Value	Book/ Adjusted Carrying Value	Cumulative	Gain (Loss) Recognized in Current Year	Gain (Loss) Used to Adjust Basis of Hedged Item	Deferred	Potential Exposure	Hedge Effectiveness at Inception and at Quarter-end (a)

NONE

(a)

Code	Financial or Economic Impact of the Hedge at the End of the Reporting Period
0	

QE07

NONE

Broker Name	Net Cash Deposits
Brokers	
.....	0
Total Net Cash Deposits.....	0

NONE

SCHEDULE DB - PART D

Showing Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

1	2	3	4	Book Adjusted Carrying Value			Fair Value			11	12
				5	6	7	8	9	10		
Description Counterparty or Exchange Traded	Master Agreement (Y or N)	Credit Support Annex (Y or N)	Fair Value of Acceptable Collateral	Contracts With Book Adjusted Carrying Value > 0	Contracts With Book Adjusted Carrying Value < 0	Exposure Net of Collateral	Contracts Fair Value > 0	Contracts Fair Value < 0	Exposure Net of Collateral	Potential Exposure	Off-Balance Sheet Exposure

NONE

COLONY SPECIALTY INSURANCE COMPANY
SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6
CUSIP Identification	Description	NAIC Designation /Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Dates

General Interrogatory:

1. The activity for the year to date: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
2. Average balance for the year to date: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
NAIC 1: \$.....0 NAIC 2: \$.....0 NAIC 3: \$.....0 NAIC 4: \$.....0 NAIC 5: \$.....0 NAIC 6: \$.....0

NONE

COLONY SPECIALTY INSURANCE COMPANY
SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6
CUSIP Identification	Description	NAIC Designation /Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Dates

General Interrogatory:

1. The activity for the year to date: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
2. Average balance for the year to date: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
3. Grand Total Schedule DL Part 1 and Part 2: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0

NONE

COLONY SPECIALTY INSURANCE COMPANY
SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	

Open Depositories

Wachovia Bank, NA.....	.....	.....0.000	0	0	483,938	475,119	2,734,879	XXX..
0199999. Total Open Depositories.....	...XXX.....	XXX.....	0	0	483,938	475,119	2,734,879	XXX..
0399999. Total Cash on Deposit.....	...XXX.....	XXX.....	0	0	483,938	475,119	2,734,879	XXX..
0599999. Total Cash.....	...XXX.....	XXX.....	0	0	483,938	475,119	2,734,879	XXX..

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
U.S. Government Issuer Obligations							
TREASURY BILL.....		03/18/2011	0.000	04/21/2011	2,949,916	0	0
TREASURY BILL.....		03/04/2011	0.000	05/05/2011	8,999,146	0	0
WI TREASURY SEC.....		03/17/2011	0.000	05/19/2011	3,099,758	0	0
0199999. U.S. Government Issuer Obligations.....					15,048,820	0	0
0599999. Total - U.S. Government Bonds.....					15,048,820	0	0
Total							
7799999. Subtotals - Issuer Obligations.....					15,048,820	0	0
8399999. Subtotals - Bonds.....					15,048,820	0	0
8699999. Total - Cash Equivalents.....					15,048,820	0	0



Designate the type of health care
providers reported on this page.

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

Physicians - Including Surgeons and Osteopaths

			Direct Losses Paid		5	Direct Losses Unpaid		8
			3	4		6	7	
States, Etc.			Amount	Number of Claims	Direct Losses Incurred	Amount Reported	Number of Claims	Direct Losses Incurred But Not Reported
1.	Alabama.....	AL.....0	0	0	0	0	0	0
2.	Alaska.....	AK.....0	0	0	0	0	0	0
3.	Arizona.....	AZ.....0	0	0	0	0	0	0
4.	Arkansas.....	AR.....0	0	0	0	0	0	0
5.	California.....	CA.....0	0	0	0	0	0	0
6.	Colorado.....	CO.....0	0	0	0	0	0	0
7.	Connecticut.....	CT.....0	0	0	0	0	0	0
8.	Delaware.....	DE.....0	0	0	0	0	0	0
9.	District of Columbia.....	DC.....0	0	0	0	0	0	0
10.	Florida.....	FL.....0	0	0	0	0	0	0
11.	Georgia.....	GA.....0	0	0	0	0	0	0
12.	Hawaii.....	HI.....0	0	0	0	0	0	0
13.	Idaho.....	ID.....0	0	0	0	0	0	0
14.	Illinois.....	IL.....0	0	0	0	0	0	0
15.	Indiana.....	IN.....0	0	0	0	0	0	0
16.	Iowa.....	IA.....0	0	0	0	0	0	0
17.	Kansas.....	KS.....0	0	0	0	0	0	0
18.	Kentucky.....	KY.....0	0	0	0	0	0	0
19.	Louisiana.....	LA.....0	0	0	0	0	0	0
20.	Maine.....	ME.....0	0	0	0	0	0	0
21.	Maryland.....	MD.....0	0	0	0	0	0	0
22.	Massachusetts.....	MA.....0	0	0	0	0	0	0
23.	Michigan.....	MI.....0	0	0	0	0	0	0
24.	Minnesota.....	MN.....0	0	0	0	0	0	0
25.	Mississippi.....	MS.....0	0	0	0	0	0	0
26.	Missouri.....	MO.....0	0	0	0	0	0	0
27.	Montana.....	MT.....0	0	0	0	0	0	0
28.	Nebraska.....	NE.....0	0	0	0	0	0	0
29.	Nevada.....	NV.....0	0	0	0	0	0	0
30.	New Hampshire.....	NH.....0	0	0	0	0	0	0
31.	New Jersey.....	NJ.....0	0	0	0	0	0	0
32.	New Mexico.....	NM.....0	0	0	0	0	0	0
33.	New York.....	NY.....0	0	0	0	0	0	0
34.	North Carolina.....	NC.....0	0	0	0	0	0	0
35.	North Dakota.....	ND.....0	0	0	0	0	0	0
36.	Ohio.....	OH.....0	0	0	0	0	0	0
37.	Oklahoma.....	OK.....0	0	0	0	0	0	0
38.	Oregon.....	OR.....0	0	0	0	0	0	0
39.	Pennsylvania.....	PA.....0	0	0	0	0	0	0
40.	Rhode Island.....	RI.....0	0	0	0	0	0	0
41.	South Carolina.....	SC.....0	0	0	0	0	0	0
42.	South Dakota.....	SD.....0	0	0	0	0	0	0
43.	Tennessee.....	TN.....0	0	0	0	0	0	0
44.	Texas.....	TX.....0	0	0	0	0	0	0
45.	Utah.....	UT.....0	0	0	0	0	0	0
46.	Vermont.....	VT.....0	0	0	0	0	0	0
47.	Virginia.....	VA.....0	0	0	0	0	0	0
48.	Washington.....	WA.....0	0	0	0	0	0	0
49.	West Virginia.....	WV.....0	0	0	0	0	0	0
50.	Wisconsin.....	WI.....0	0	0	0	0	0	0
51.	Wyoming.....	WY.....0	0	0	0	0	0	0
52.	American Samoa.....	AS.....0	0	0	0	0	0	0
53.	Guam.....	GU.....0	0	0	0	0	0	0
54.	Puerto Rico.....	PR.....0	0	0	0	0	0	0
55.	US Virgin Islands.....	VI.....0	0	0	0	0	0	0
56.	Northern Mariana Islands.....	MP.....0	0	0	0	0	0	0
57.	Canada.....	CN.....0	0	0	0	0	0	0
58.	Aggregate Other Alien.....	OT.....0	0	0	0	0	0	0
59.	Totals.....	0	0	0	0	0	0	0

NONE

DETAILS OF WRITE-INS								
5801.	.....	.....0	0	0	0	0	0	0
5802.	.....	.....0	0	0	0	0	0	0
5803.	.....	.....0	0	0	0	0	0	0
5898.	Summary of remaining write-ins for Line 58 from overflow page.....	0	0	0	0	0	0	0
5899.	Totals (Lines 5801 thru 5803 + 5898) (Line 58 above).....	0	0	0	0	0	0	0



Designate the type of health care
providers reported on this page.

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

Hospitals

			Direct Losses Paid		5	Direct Losses Unpaid		8
			3	4		6	7	
States, Etc.			Amount	Number of Claims	Direct Losses Incurred	Amount Reported	Number of Claims	Direct Losses Incurred But Not Reported
1.	Alabama.....	AL.....0	0	0	0	0	0	0
2.	Alaska.....	AK.....0	0	0	0	0	0	0
3.	Arizona.....	AZ.....0	0	0	0	0	0	0
4.	Arkansas.....	AR.....0	0	0	0	0	0	0
5.	California.....	CA.....0	0	0	0	0	0	0
6.	Colorado.....	CO.....0	0	0	0	0	0	0
7.	Connecticut.....	CT.....0	0	0	0	0	0	0
8.	Delaware.....	DE.....0	0	0	0	0	0	0
9.	District of Columbia.....	DC.....0	0	0	0	0	0	0
10.	Florida.....	FL.....0	0	0	0	0	0	0
11.	Georgia.....	GA.....0	0	0	0	0	0	0
12.	Hawaii.....	HI.....0	0	0	0	0	0	0
13.	Idaho.....	ID.....0	0	0	0	0	0	0
14.	Illinois.....	IL.....0	0	0	0	0	0	0
15.	Indiana.....	IN.....0	0	0	0	0	0	0
16.	Iowa.....	IA.....0	0	0	0	0	0	0
17.	Kansas.....	KS.....0	0	0	0	0	0	0
18.	Kentucky.....	KY.....0	0	0	0	0	0	0
19.	Louisiana.....	LA.....0	0	0	0	0	0	0
20.	Maine.....	ME.....0	0	0	0	0	0	0
21.	Maryland.....	MD.....0	0	0	0	0	0	0
22.	Massachusetts.....	MA.....0	0	0	0	0	0	0
23.	Michigan.....	MI.....0	0	0	0	0	0	0
24.	Minnesota.....	MN.....0	0	0	0	0	0	0
25.	Mississippi.....	MS.....0	0	0	0	0	0	0
26.	Missouri.....	MO.....0	0	0	0	0	0	0
27.	Montana.....	MT.....0	0	0	0	0	0	0
28.	Nebraska.....	NE.....0	0	0	0	0	0	0
29.	Nevada.....	NV.....0	0	0	0	0	0	0
30.	New Hampshire.....	NH.....0	0	0	0	0	0	0
31.	New Jersey.....	NJ.....0	0	0	0	0	0	0
32.	New Mexico.....	NM.....0	0	0	0	0	0	0
33.	New York.....	NY.....0	0	0	0	0	0	0
34.	North Carolina.....	NC.....0	0	0	0	0	0	0
35.	North Dakota.....	ND.....0	0	0	0	0	0	0
36.	Ohio.....	OH.....0	0	0	0	0	0	0
37.	Oklahoma.....	OK.....0	0	0	0	0	0	0
38.	Oregon.....	OR.....0	0	0	0	0	0	0
39.	Pennsylvania.....	PA.....0	0	0	0	0	0	0
40.	Rhode Island.....	RI.....0	0	0	0	0	0	0
41.	South Carolina.....	SC.....0	0	0	0	0	0	0
42.	South Dakota.....	SD.....0	0	0	0	0	0	0
43.	Tennessee.....	TN.....0	0	0	0	0	0	0
44.	Texas.....	TX.....0	0	0	0	0	0	0
45.	Utah.....	UT.....0	0	0	0	0	0	0
46.	Vermont.....	VT.....0	0	0	0	0	0	0
47.	Virginia.....	VA.....0	0	0	0	0	0	0
48.	Washington.....	WA.....0	0	0	0	0	0	0
49.	West Virginia.....	WV.....0	0	0	0	0	0	0
50.	Wisconsin.....	WI.....0	0	0	0	0	0	0
51.	Wyoming.....	WY.....0	0	0	0	0	0	0
52.	American Samoa.....	AS.....0	0	0	0	0	0	0
53.	Guam.....	GU.....0	0	0	0	0	0	0
54.	Puerto Rico.....	PR.....0	0	0	0	0	0	0
55.	US Virgin Islands.....	VI.....0	0	0	0	0	0	0
56.	Northern Mariana Islands.....	MP.....0	0	0	0	0	0	0
57.	Canada.....	CN.....0	0	0	0	0	0	0
58.	Aggregate Other Alien.....	OT.....0	0	0	0	0	0	0
59.	Totals.....	0	0	0	0	0	0	0

NONE

DETAILS OF WRITE-INS								
5801.		0	0	0	0	0	0	0
5802.		0	0	0	0	0	0	0
5803.		0	0	0	0	0	0	0
5898.	Summary of remaining write-ins for Line 58 from overflow page.....	0	0	0	0	0	0	0
5899.	Totals (Lines 5801 thru 5803 + 5898) (Line 58 above).....	0	0	0	0	0	0	0



Designate the type of health care
providers reported on this page.

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

Other Health Care Professionals, Including Dentists, Chiropractors and Podiatrists

		1	2	Direct Losses Paid		5	Direct Losses Unpaid		8
				3	4		6	7	
States, Etc.		Direct Premiums Written	Direct Premiums Earned	Amount	Number of Claims	Direct Losses Incurred	Amount Reported	Number of Claims	Direct Losses Incurred But Not Reported
1.	Alabama.....AL	0	0	0	0	0	0	0	0
2.	Alaska.....AK	0	0	0	0	0	0	0	0
3.	Arizona.....AZ	0	0	0	0	0	0	0	0
4.	Arkansas.....AR	0	0	0	0	0	0	0	0
5.	California.....CA	0	0	0	0	0	0	0	0
6.	Colorado.....CO	0	0	0	0	0	0	0	0
7.	Connecticut.....CT	0	0	0	0	0	0	0	0
8.	Delaware.....DE	0	0	0	0	0	0	0	0
9.	District of Columbia.....DC	0	0	0	0	0	0	0	0
10.	Florida.....FL	0	0	0	0	0	0	0	0
11.	Georgia.....GA	0	0	0	0	0	0	0	0
12.	Hawaii.....HI	0	0	0	0	0	0	0	0
13.	Idaho.....ID	0	0	0	0	0	0	0	0
14.	Illinois.....IL	0	0	0	0	0	0	0	0
15.	Indiana.....IN	0	0	0	0	0	0	0	0
16.	Iowa.....IA	0	0	0	0	0	0	0	0
17.	Kansas.....KS	0	0	0	0	0	0	0	0
18.	Kentucky.....KY	0	0	0	0	0	0	0	0
19.	Louisiana.....LA	0	0	0	0	0	0	0	0
20.	Maine.....ME	0	0	0	0	0	0	0	0
21.	Maryland.....MD	0	0	0	0	0	0	0	0
22.	Massachusetts.....MA	0	0	0	0	0	0	0	0
23.	Michigan.....MI	0	0	0	0	0	0	0	0
24.	Minnesota.....MN	0	0	0	0	0	0	0	0
25.	Mississippi.....MS	0	0	0	0	0	0	0	0
26.	Missouri.....MO	0	0	0	0	0	0	0	0
27.	Montana.....MT	0	0	0	0	0	0	0	0
28.	Nebraska.....NE	0	0	0	0	0	0	0	0
29.	Nevada.....NV	0	0	0	0	0	0	0	0
30.	New Hampshire.....NH	0	0	0	0	0	0	0	0
31.	New Jersey.....NJ	0	0	0	0	0	0	0	0
32.	New Mexico.....NM	0	0	0	0	0	0	0	0
33.	New York.....NY	0	0	0	0	0	0	0	0
34.	North Carolina.....NC	0	0	0	0	0	0	0	0
35.	North Dakota.....ND	0	0	0	0	0	0	0	0
36.	Ohio.....OH	0	0	0	0	0	0	0	0
37.	Oklahoma.....OK	0	0	0	0	0	0	0	0
38.	Oregon.....OR	0	0	0	0	0	0	0	0
39.	Pennsylvania.....PA	0	0	0	0	0	0	0	0
40.	Rhode Island.....RI	0	0	0	0	0	0	0	0
41.	South Carolina.....SC	0	0	0	0	0	0	0	0
42.	South Dakota.....SD	0	0	0	0	0	0	0	0
43.	Tennessee.....TN	0	0	0	0	0	0	0	0
44.	Texas.....TX	0	0	0	0	0	0	0	0
45.	Utah.....UT	0	0	0	0	0	0	0	0
46.	Vermont.....VT	0	0	0	0	0	0	0	0
47.	Virginia.....VA	0	0	0	0	0	0	0	0
48.	Washington.....WA	0	0	0	0	0	0	0	0
49.	West Virginia.....WV	0	0	0	0	0	0	0	0
50.	Wisconsin.....WI	0	0	0	0	0	0	0	0
51.	Wyoming.....WY	0	0	0	0	0	0	0	0
52.	American Samoa.....AS	0	0	0	0	0	0	0	0
53.	Guam.....GU	0	0	0	0	0	0	0	0
54.	Puerto Rico.....PR	0	0	0	0	0	0	0	0
55.	US Virgin Islands.....VI	0	0	0	0	0	0	0	0
56.	Northern Mariana Islands.....MP	0	0	0	0	0	0	0	0
57.	Canada.....CN	0	0	0	0	0	0	0	0
58.	Aggregate Other Alien.....OT	0	0	0	0	0	0	0	0
59.	Totals.....	0	0	0	0	0	0	0	0

NONE

DETAILS OF WRITE-INS									
5801.	.....	.....0	0	0	0	0	0	0	0
5802.	.....	.....0	0	0	0	0	0	0	0
5803.	.....	.....0	0	0	0	0	0	0	0
5898.	Summary of remaining write-ins for Line 58 from overflow page.....	0	0	0	0	0	0	0	0
5899.	Totals (Lines 5801 thru 5803 + 5898) (Line 58 above).....	0	0	0	0	0	0	0	0



Designate the type of health care providers reported on this page.

SUPPLEMENT "A" TO SCHEDULE T
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

Other Health Care Facilities

			Direct Losses Paid		5	Direct Losses Unpaid		8
			3	4		6	7	
States, Etc.			Amount	Number of Claims	Direct Losses Incurred	Amount Reported	Number of Claims	Direct Losses Incurred But Not Reported
1.	Alabama.....	AL.....0	0	0	0	0	0	0
2.	Alaska.....	AK.....0	0	0	0	0	0	0
3.	Arizona.....	AZ.....0	0	0	0	0	0	0
4.	Arkansas.....	AR.....0	0	0	0	0	0	0
5.	California.....	CA.....0	0	0	0	0	0	0
6.	Colorado.....	CO.....0	0	0	0	0	0	0
7.	Connecticut.....	CT.....0	0	0	0	0	0	0
8.	Delaware.....	DE.....0	0	0	0	0	0	0
9.	District of Columbia.....	DC.....0	0	0	0	0	0	0
10.	Florida.....	FL.....0	0	0	0	0	0	0
11.	Georgia.....	GA.....0	0	0	0	0	0	0
12.	Hawaii.....	HI.....0	0	0	0	0	0	0
13.	Idaho.....	ID.....0	0	0	0	0	0	0
14.	Illinois.....	IL.....0	0	0	0	0	0	0
15.	Indiana.....	IN.....0	0	0	0	0	0	0
16.	Iowa.....	IA.....0	0	0	0	0	0	0
17.	Kansas.....	KS.....0	0	0	0	0	0	0
18.	Kentucky.....	KY.....0	0	0	0	0	0	0
19.	Louisiana.....	LA.....0	0	0	0	0	0	0
20.	Maine.....	ME.....0	0	0	0	0	0	0
21.	Maryland.....	MD.....0	0	0	0	0	0	0
22.	Massachusetts.....	MA.....0	0	0	0	0	0	0
23.	Michigan.....	MI.....0	0	0	0	0	0	0
24.	Minnesota.....	MN.....0	0	0	0	0	0	0
25.	Mississippi.....	MS.....0	0	0	0	0	0	0
26.	Missouri.....	MO.....0	0	0	0	0	0	0
27.	Montana.....	MT.....0	0	0	0	0	0	0
28.	Nebraska.....	NE.....0	0	0	0	0	0	0
29.	Nevada.....	NV.....0	0	0	0	0	0	0
30.	New Hampshire.....	NH.....0	0	0	0	0	0	0
31.	New Jersey.....	NJ.....0	0	0	0	0	0	0
32.	New Mexico.....	NM.....0	0	0	0	0	0	0
33.	New York.....	NY.....0	0	0	0	0	0	0
34.	North Carolina.....	NC.....0	0	0	0	0	0	0
35.	North Dakota.....	ND.....0	0	0	0	0	0	0
36.	Ohio.....	OH.....0	0	0	0	0	0	0
37.	Oklahoma.....	OK.....0	0	0	0	0	0	0
38.	Oregon.....	OR.....0	0	0	0	0	0	0
39.	Pennsylvania.....	PA.....0	0	0	0	0	0	0
40.	Rhode Island.....	RI.....0	0	0	0	0	0	0
41.	South Carolina.....	SC.....0	0	0	0	0	0	0
42.	South Dakota.....	SD.....0	0	0	0	0	0	0
43.	Tennessee.....	TN.....0	0	0	0	0	0	0
44.	Texas.....	TX.....0	0	0	0	0	0	0
45.	Utah.....	UT.....0	0	0	0	0	0	0
46.	Vermont.....	VT.....0	0	0	0	0	0	0
47.	Virginia.....	VA.....5,714	751	0	(3,276)	0	0	32,586
48.	Washington.....	WA.....0	0	0	0	0	0	0
49.	West Virginia.....	WV.....0	0	0	0	0	0	0
50.	Wisconsin.....	WI.....0	0	0	0	0	0	0
51.	Wyoming.....	WY.....0	0	0	0	0	0	0
52.	American Samoa.....	AS.....0	0	0	0	0	0	0
53.	Guam.....	GU.....0	0	0	0	0	0	0
54.	Puerto Rico.....	PR.....0	0	0	0	0	0	0
55.	US Virgin Islands.....	VI.....0	0	0	0	0	0	0
56.	Northern Mariana Islands.....	MP.....0	0	0	0	0	0	0
57.	Canada.....	CN.....0	0	0	0	0	0	0
58.	Aggregate Other Alien.....	OT.....0	0	0	0	0	0	0
59.	Totals.....	5,714	751	0	(3,276)	0	0	32,586

DETAILS OF WRITE-INS

5801.	.....	.....0	0	0	0	0	0	0
5802.	.....	.....0	0	0	0	0	0	0
5803.	.....	.....0	0	0	0	0	0	0
5898.	Summary of remaining write-ins for Line 58 from overflow page.....	0	0	0	0	0	0	0
5899.	Totals (Lines 5801 thru 5803 + 5898) (Line 58 above).....	0	0	0	0	0	0	0

COLONY SPECIALTY INSURANCE COMPANY
Overflow Page for Write-Ins

NONE