



51632201120100100

ANNUAL STATEMENT

For the Year Ended December 31, 2011
OF THE CONDITION AND AFFAIRS OF THE

EnTitle Insurance Company

NAIC Group Code	0000 (Current Period)	0000 (Prior Period)	NAIC Company Code	51632	Employer's ID Number	34-1252928
Organized under the Laws of OHIO			, State of Domicile or Port of Entry		OHIO	
Country of Domicile	US					
Incorporated/Organized	April 7, 1978			Commenced Business		April 7, 1978
Statutory Home Office	4600 Rockside Road, Suite 104 (Street and Number)			, Independence, OH 44131 (City or Town, State and Zip Code)		
Main Administrative Office	4600 Rockside Road, Suite 104 (Street and Number)			Independence, OH 44131 (City or Town, State and Zip Code)		
				216-524-3400 (Area Code)	(Telephone Number)	
Mail Address	4600 Rockside Road, Suite 104 (Street and Number or P.O. Box)			, Independence, OH 44131 (City or Town, State and Zip Code)		
Primary Location of Books and Records	4600 Rockside Road, Suite 104 (Street and Number)			Independence, OH 44131 (City or Town, State and Zip Code)		
Internet Web Site Address	216-524-3400 (Area Code) (Telephone Number)					
Statutory Statement Contact	Sheila Kale (Name)			216-524-3400 (Area Code) (Telephone Number) (Extension)		
	skale@entitleins.com (E-Mail Address)			216-524-3488 (Fax Number)		

OFFICERS

OFFICERS		
	Name	Title
1.	Timothy M. Dwyer	President
2.	Nicholas Ferreri	Chief Financial Officer
3.	James S. Shoenfelt	Secretary

VICE-PRESIDENTS

DIRECTORS OR TRUSTEES

State of OHIO

County of CUYAHOGA ss

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)
Timothy M. Dwyer
(Printed Name)
1.
President
(Title)

(Signature)
Nicholas Ferreri
(Printed Name)
2.
Chief Financial Officer
(Title)

(Signature)
James S. Shoenfelt
(Printed Name)
3.
Secretary
(Title)

Subscribed and sworn to (or affirmed) before me on this
day of February , 2012

a. Is this an original filing? Yes No

b. If no: 1. State the amendment number
2. Date filed
3. Number of pages attached



51632201145001100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		76		12	13,556	25,585	XXX	XXX	12,286				
2. Policies Issued By Non-Affiliated Agents		30		3	8,031		4,030	XXX	7,261				
3. Policies Issued By Affiliated Agents							XXX	XXX					
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX	XXX					
6. Total		106		15	21,587	25,585	4,030	5,550	19,547				
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145003100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR 2011

NAIC Group Code	0000	Type of Business	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
1. Policies Issued Directly			22		7	14,556			330	XXX	XXX	14,084		
2. Policies Issued By Non-Affiliated Agents			15		3	11,729				5,439	XXX	11,443	2,042	2,042
3. Policies Issued By Affiliated Agents										XXX				
4. All Other			XXX		XXX	XXX				XXX	XXX	XXX	XXX	XXX
5. Aggregate Write-in for Line 05										XXX				
6. Total			37		10	26,285			330	5,439	1,798	25,527	2,042	2,042
DETAILS OF WRITE-INS														
0501.										XXX				
0502.										XXX				
0503.										XXX				
0598. Summary of remaining write-ins for Line 05 from overflow page										XXX				
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)										XXX				

NONE

**EXHIBIT OF PREMIUMS AND LOSSES**

DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		9		1	2,314	1,400	XXX	XXX	2,094				
2. Policies Issued By Non-Affiliated Agents				25			XXX		25				
3. Policies Issued By Affiliated Agents							XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		9		1	2,339	1,400		2,479	2,119				
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145005100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		1,793		787	855,444	1,072,562	XXX	XXX	776,970		159,103	684,306	550,203
2. Policies Issued By Non-Affiliated Agents		20		6	5,980		XXX	XXX	5,926				
3. Policies Issued By Affiliated Agents							XXX	XXX					
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5. Aggregate Write-in for Line 05							XXX	XXX					
6. Total		1,813		793	861,424	1,072,562		62,022	782,896		159,103	684,306	550,203
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE

**EXHIBIT OF PREMIUMS AND LOSSES**

DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		168	79	110,637	340	XXX	XXX	100,650					
2. Policies Issued By Non-Affiliated Agents		79	37	60,712		34,862	XXX		55,225				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		247	116	171,349	340	34,862	4,652	155,875					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE

**EXHIBIT OF PREMIUMS AND LOSSES**

DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		78	18	31,507	42,080	XXX	XXX	28,571					
2. Policies Issued By Non-Affiliated Agents		8	2	4,791		2,219	XXX		4,281				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		86	20	36,298	42,080	2,219	1,452	32,852					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



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EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		51		17	30,173	29,360	XXX	XXX	27,349				
2. Policies Issued By Non-Affiliated Agents		1			150		XXX		150				
3. Policies Issued By Affiliated Agents							XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		52		17	30,323	29,360		2,023	27,499				
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



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EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		315	78	203,112	144,961	XXX	XXX	189,508					
2. Policies Issued By Non-Affiliated Agents		105	20	100,250		61,075	XXX	95,865	356,212				6,439
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		420	98	303,362	144,961	61,075	9,345	285,373	356,212				6,439
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145011100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		112	28	47,385	63,680	XXX	XXX	43,075					
2. Policies Issued By Non-Affiliated Agents		19	6	11,994		9,886	XXX		11,149				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		131	34	59,379	63,680	9,886	11,582	54,224					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145014100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		101	25	52,816	47,208	XXX	XXX	50,814					
2. Policies Issued By Non-Affiliated Agents		56	10	38,009		16,303	XXX	37,049	625,883	1,881	26,404		23,000
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
5. Aggregate Write-in for Line 05							XXX						
6. Total		157	35	90,825	47,208	16,303	3,045	87,863	625,883	1,881	26,404		23,000
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145015100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		46	6	12,565	9,260	XXX	XXX	11,309					
2. Policies Issued By Non-Affiliated Agents		271	36	84,882		64,824	XXX		76,394				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		317	42	97,447	9,260	64,824	2,710	87,703					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145016100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business													
1. Policies Issued Directly						XXX	XXX						
2. Policies Issued By Non-Affiliated Agents		48		7		7,616	XXX			11,536			
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
5. Aggregate Write-in for Line 05						XXX	XXX	XXX	XXX	XXX	XXX		
6. Total		48		7		7,616	XXX	341	11,536				
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145017100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		44		8	11,271	20,940	XXX	XXX	10,174				
2. Policies Issued By Non-Affiliated Agents		39		5	14,889		9,223	XXX	13,434				
3. Policies Issued By Affiliated Agents							XXX	XXX					
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX	XXX					
6. Total		83		13	26,160	20,940	9,223	1,271	23,608				
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145018100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		30		7	13,299	14,769	XXX	XXX	12,020				
2. Policies Issued By Non-Affiliated Agents		55		9	28,657		22,824	XXX	26,037				
3. Policies Issued By Affiliated Agents							XXX						
4. All Other		XXX		XXX			XXX	XXX	XXX	XXX	XXX		
5. Aggregate Write-in for Line 05								XXX					
6. Total		85		16	41,956	14,769	22,824	2,559	38,057				
DETAILS OF WRITE-INS													
0501.								XXX					
0502.								XXX					
0503.								XXX					
0598. Summary of remaining write-ins for Line 05 from overflow page								XXX					
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)								XXX					

NONE



51632201145019100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		23	6	17,531	14,110	XXX	XXX	15,911					
2. Policies Issued By Non-Affiliated Agents		164	23	112,165		80,906	XXX	102,608					
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		187	29	129,696	14,110	80,906	6,420	118,519					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145021100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		499	139	209,100	281,374	XXX	XXX	197,164					
2. Policies Issued By Non-Affiliated Agents		57	16	41,589		33,909	XXX		38,404				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		556	155	250,689	281,374	33,909	8,400	235,568					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145022100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		292	95	106,055	141,247	XXX	XXX	96,109					
2. Policies Issued By Non-Affiliated Agents		36	11	25,247		18,217	XXX		22,880				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		328	106	131,302	141,247	18,217	16,289	118,989					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145024100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		40		10	17,152	21,015	XXX	XXX		15,445			
2. Policies Issued By Non-Affiliated Agents		106		17	55,542		42,598	XXX		52,939			
3. Policies Issued By Affiliated Agents							XXX	XXX					
4. All Other		XXX		XXX	XXX		XXX	XXX		XXX	XXX		
5. Aggregate Write-in for Line 05								XXX			XXX		
6. Total		146		27	72,694	21,015	42,598	2,691		68,384			
DETAILS OF WRITE-INS													
0501.								XXX					
0502.								XXX					
0503.								XXX					
0598. Summary of remaining write-ins for Line 05 from overflow page								XXX					
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)								XXX					

NONE



51632201145025100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		13		2	5,267	7,285	XXX	XXX		4,740			
2. Policies Issued By Non-Affiliated Agents			4	1	2,500		1,583	XXX		2,250			
3. Policies Issued By Affiliated Agents							XXX	XXX					
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX	XXX	XXX	XXX	XXX		
6. Total		17		3	7,767	7,285	1,583	2,114		6,990			
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145026100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		200	35	33,299	96,629	XXX	XXX	28,336					
2. Policies Issued By Non-Affiliated Agents		895	115	137,500		39,901	XXX	121,533					
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		1,095	150	170,799	96,629	39,901	50,224	149,869					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145027100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		2	2	3,415	710	XXX	XXX	3,074					
2. Policies Issued By Non-Affiliated Agents						XXX	XXX						
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		2	2	3,415	710		94	3,074					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145028100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly						XXX	XXX			8			
2. Policies Issued By Non-Affiliated Agents		22		5		10,480	XXX			16,493			
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05						10,480	XXX						
6. Total		22		5		17,308	829			16,501			
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145029100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR 2011

NAIC Group Code	0000	Type of Business	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632	
1. Policies Issued Directly			20		4	9,649	9,678	XXX	XXX	9,202	4,134	1,069,236	189,212	371,733	314,000
2. Policies Issued By Non-Affiliated Agents								XXX	XXX						
3. Policies Issued By Affiliated Agents								XXX	XXX						
4. All Other			XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5. Aggregate Write-in for Line 05								XXX	XXX						
6. Total			20		4	9,649	9,678		(4,286)	13,336		1,069,236	189,212	371,733	314,000
DETAILS OF WRITE-INS															
0501.								XXX							
0502.								XXX							
0503.								XXX							
0598. Summary of remaining write-ins for Line 05 from overflow page								XXX							
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)								XXX							

NONE



51632201145032100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business													
1. Policies Issued Directly						XXX	XXX						
2. Policies Issued By Non-Affiliated Agents						2,084	XXX						
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other						XXX	XXX						
5. Aggregate Write-in for Line 05						XXX	XXX						
6. Total		3	XXX	1 2,605		2,084	XXX						
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145033100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		555	242	530,207	203,585	XXX	XXX	478,731					
2. Policies Issued By Non-Affiliated Agents		1,020	699	2,890,656		1,956,662	XXX		2,721,791				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		1,575	941	3,420,863	203,585	1,956,662	139,325	3,200,522					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145034100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		154		32	35,744	98,139	XXX	XXX	32,381				
2. Policies Issued By Non-Affiliated Agents		14		4	5,909		3,999	XXX	5,318				
3. Policies Issued By Affiliated Agents							XXX	XXX					
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX	XXX					
6. Total		168		36	41,653	98,139	3,999	3,318	37,699				
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE

**EXHIBIT OF PREMIUMS AND LOSSES**

DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business													
1. Policies Issued Directly					XXX	XXX							
2. Policies Issued By Non-Affiliated Agents						XXX							
3. Policies Issued By Affiliated Agents						XXX							
4. All Other		XXX	XXX	X	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
5. Aggregate Write-in for Line 05													
6. Total													
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						



51632201145036100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2011

NAIC Group Code	0000											NAIC Company Code	51632
Type of Business		1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	11 Direct Known Claim Reserve	
1. Policies Issued Directly		109	17	59,101	52,033	XXX	XXX	53,467					
2. Policies Issued By Non-Affiliated Agents		4,701	440	2,107,156		1,699,086	XXX	2,010,113	375,082	43,693	130,442	41,709	
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5. Aggregate Write-in for Line 05							XXX						
6. Total		4,810	457	2,166,257	52,033	1,699,086	56,322	2,063,580	375,082	43,693	130,442	41,709	
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE

**EXHIBIT OF PREMIUMS AND LOSSES**

DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		2		1	1,864	225	XXX	XXX	1,784	424	161,511		
2. Policies Issued By Non-Affiliated Agents		5		1	453		470	XXX				161,511	
3. Policies Issued By Affiliated Agents							XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		7		2	2,317	225	470	1,525	2,208	161,511		161,511	
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly						XXX	XXX						
2. Policies Issued By Non-Affiliated Agents							XXX						
3. Policies Issued By Affiliated Agents							XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
5. Aggregate Write-in for Line 05								XXX					
6. Total													
DETAILS OF WRITE-INS													
0501.							XXX						
0502.								XXX					
0503.								XXX					
0598. Summary of remaining write-ins for Line 05 from overflow page								XXX					
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE

**EXHIBIT OF PREMIUMS AND LOSSES**

DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		1,575		397	1,718,654	97,017	XXX	1,677,037	36,000	21,031	62,029		20,000
2. Policies Issued By Non-Affiliated Agents		63		13	80,200		39,983	78,852					
3. Policies Issued By Affiliated Agents							XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		1,638		410	1,798,854	97,017	39,983	1,755,889	36,000	21,031	62,029		20,000
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145040100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		13		3	3,627	6,905	XXX	XXX	3,264				
2. Policies Issued By Non-Affiliated Agents		2		1	1,689		1,369	XXX		1,520			
3. Policies Issued By Affiliated Agents							XXX	XXX					
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX	XXX					
6. Total		15		4	5,316	6,905	1,369	81	4,784				
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145041100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		89	18	31,957	52,318	XXX	XXX	29,735					
2. Policies Issued By Non-Affiliated Agents		15	3	7,996		3,792	XXX	7,702	3,573		3,573		
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
5. Aggregate Write-in for Line 05							XXX						
6. Total		104	21	39,953	52,318	3,792	666	37,437	3,573		3,573		
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145042100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		1		407	977	XXX	XXX	331					
2. Policies Issued By Non-Affiliated Agents						XXX	XXX						
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		1		407	977		1,010	331					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145043100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		98	21	35,320	45,093	XXX	XXX	32,314					
2. Policies Issued By Non-Affiliated Agents		42	8	18,193		12,402	XXX		16,701				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		140	29	53,513	45,093	12,402	2,288	49,015					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145044100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business													
1. Policies Issued Directly						XXX	XXX						
2. Policies Issued By Non-Affiliated Agents							XXX						
3. Policies Issued By Affiliated Agents							XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
5. Aggregate Write-in for Line 05													
6. Total													
DETAILS OF WRITE-INS													
0501.							XXX						
0502.													
0503.													
0598. Summary of remaining write-ins for Line 05 from overflow page													
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145045100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		6		1	2,565	125	XXX	XXX	2,497	6	2,955	22,016	48,259
2. Policies Issued By Non-Affiliated Agents							XXX	XXX					30,000
3. Policies Issued By Affiliated Agents							XXX	XXX					
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5. Aggregate Write-in for Line 05							XXX	XXX					
6. Total		6		1	2,565	125		3,057	2,503	2,955	22,016	48,259	30,000
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145047100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		1,218	348	643,008	600,528	XXX	XXX	601,002					
2. Policies Issued By Non-Affiliated Agents		39	11	30,561		24,551	XXX	29,233	1,008,989	274	(3,073)		
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		
5. Aggregate Write-in for Line 05							XXX						
6. Total		1,257	359	673,569	600,528	24,551	17,200	630,235	1,008,989	274	(3,073)		
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE

**EXHIBIT OF PREMIUMS AND LOSSES**

DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		1		915	445	XXX	XXX		871				
2. Policies Issued By Non-Affiliated Agents		33		77,367		50,289	XXX		81,447				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		34		78,282	445	50,289	1,693		82,318				
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145049100

EXHIBIT OF PREMIUMS AND LOSSES

DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		13	3	5,491	6,085	XXX	XXX	4,942					
2. Policies Issued By Non-Affiliated Agents		20	3	8,026		6,684	XXX		7,223				
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05							XXX						
6. Total		33	6	13,517	6,085	6,684	2,186	12,165					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		7		1	4,000	XXX	XXX	1,218					
2. Policies Issued By Non-Affiliated Agents		7		2	5,783	XXX	XXX	6,523					
3. Policies Issued By Affiliated Agents					XXX	XXX	XXX						
4. All Other		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
5. Aggregate Write-in for Line 05						XXX	XXX						
6. Total		14		3	4,000	5,783	1,604	7,741					
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE



51632201145059100

EXHIBIT OF PREMIUMS AND LOSSES
DIRECT BUSINESS IN THE STATE OF TOTAL DURING THE YEAR 2011

NAIC Group Code	0000	1 Number of Policies Issued During The Year	2 Direct Amount of Insurance Written in Millions (\$000,000 Omitted)	3 Direct Premiums Written	4 Other Income on Policies Issued for the Type of Business	5 Amounts Paid to or Retained by Title Agents	6 Taxes Licenses and Fees Incurred	7 Direct Premiums Earned	8 Direct Losses Paid	9 Direct Allocated Loss Adjustment Expenses Paid	10 Direct Losses and Allocated Loss Adjustment Expenses Incurred	NAIC Company Code	51632
Type of Business												Direct Known Claim Reserve	
1. Policies Issued Directly		7,775	2,450	4,870,316	3,211,998	XXX	XXX	4,568,566	36,000	180,134	746,335	570,203	
2. Policies Issued By Non-Affiliated Agents		7,994	1,526	6,012,719	4,273,049	XXX	XXX	5,686,213	3,605,483	257,076	747,330	408,709	
3. Policies Issued By Affiliated Agents						XXX	XXX						
4. All Other		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5. Aggregate Write-in for Line 05						XXX	XXX						
6. Total		15,769	3,976	10,883,035	3,211,998	4,273,049	463,108	10,254,779	3,641,483	437,210	1,493,665	978,912	
DETAILS OF WRITE-INS													
0501.							XXX						
0502.							XXX						
0503.							XXX						
0598. Summary of remaining write-ins for Line 05 from overflow page							XXX						
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)							XXX						

NONE

SCHEDULE E – PART 1A – SEGREGATED FUNDS HELD FOR OTHERS AS NON-INTEREST EARNING CASH DEPOSITS

Showing all Banks, Trust Companies, Savings and Loan and Building and Loan Associations in which non-interest earning deposits of segregated funds held for others were maintained by the Company at any time during the year and the balances, if any (according to reporting entity's records) on December 31, of the current year.

1 Depository	2 Rate of Interest	3 Balance
OPEN DEPOSITORYES FEDERALLY INSURED DEPOSITORYES		
0199998 Deposits in (0) depositories which do not exceed the allowable limit in any one depository	XXX	
0199999 Total Federally Insured Depositories	XXX	
NON-FEDERALLY INSURED DEPOSITORYES		
Fifth Third Bank Pittsburgh, PA 309		
Citizens Bank Pittsburgh, PA 10,180		
PNC Bank Pittsburgh, PA 5,694,996		
City National Bank City of Commerce, CA 3,611,578		
0299999 Total Non-Federally Insured Depositories	XXX	9,317,063
0399999 Total Open Depositories - Dec. 31st	XXX	9,317,063
SUSPENDED DEPOSITORYES		
0499999 Total Suspended Depositories - Dec. 31st	XXX	
0599999 Grand Total - All Depositories - Dec. 31st	XXX	9,317,063

1. Totals: Last day of January	6,166,260
2. February	2,064,484
3. March	3,701,632
4. April	1,589,468
5. May	6,153,626
6. June	4,446,029
7. July	3,429,554
8. August	8,963,719
9. September	16,114,959
10. October	20,450,131
11. November	20,306,406
12. December	9,317,063

SCHEDULE E – PART 1B – SEGREGATED FUNDS HELD FOR OTHERS AS INTEREST EARNING CASH DEPOSITS

Showing all Banks, Trust Companies, Savings and Loan and Building and Loan Associations in which interest earning deposits of segregated funds held for others were maintained by the Company at any time during the year and the balances, if any (according to reporting entity's records) on December 31, of the current year.

1 Depository	2 Rate of Interest	3 Interest Received During Year	4 Interest Earned During Year	5 Balance
OPEN DEPOSITORYES				
FEDERALLY INSURED DEPOSITORYES				
0199998 Deposits in (..... 0) depositories which do not exceed the allowable limit in any one depository	XXX			
0199999 Total Federally Insured Depositories	XXX			
NON-FEDERALLY INSURED DEPOSITORYES				
0299999 Total Non-Federally Insured Depositories	XXX			
0399999 Total Open Depositories - Dec. 31st	XXX			
SUSPENDED DEPOSITORYES				
0499999 Total Suspended Depositories - Dec. 31st	XXX			
NONE				
0599999 Grand Totals - All Depositories - Dec. 31st	XXX			

1. Totals: Last day of January
2. February
3. March
4. April
5. May
6. June
7. July
8. August
9. September
10. October
11. November
12. December

SCHEDULE E – PART 1C – REINSURANCE RESERVE FUNDS

Showing all Banks, Trust Companies, Savings and Loan and Building and Loan Associations in which deposits of reinsurance reserve funds were maintained by the Company at any time during the year and the balances, if any (according to reporting entity's records) on December 31, of the current year. Exclude balances represented by negotiable instruments.

1 Depository	2 Rate of Interest	3 Interest Received During Year	4 Interest Earned During Year	5 Balance
OPEN DEPOSITORIES				
0199998 Deposits in (0) depositories which do not exceed the allowable limit in any one depository - open depositories	XXX			
0199999 Total Open Depositories - Dec. 31st	XXX			
SUSPENDED DEPOSITORIES				
0299998 Deposits in (0) depositories which do not exceed the allowable limit in any one depository - suspended depositories	XXX			
0299999 Total Suspended Depositories - Dec. 31st	XXX			
0399999 Grand Totals - All Depositories - Dec. 31st	XXX			

NONE

1. Totals: Last day of January
2. February
3. March
4. April
5. May
6. June
7. July
8. August
9. September
10. October
11. November
12. December

SCHEDULE E – PART 1D – SUMMARY

Segregated Funds Held for Others			
Type	1 Non-Interest Earning	2 Interest Earning	3 Total (Cols. 1 + 2)
1. Open depositories	9,317,063	.....	9,317,063
2. Suspended depositories .....	.....	.....	.....
3. Total segregated cash funds held for others (General Interrogatories-Part 2, Line 9.22)	9,317,063	.....	9,317,063
4. Other forms of security held for others (General Interrogatories-Part 2, Line 9.23) .....	.....	.....	.....
5. Total all segregated funds held for others (General Interrogatories-Part 2, Line 9.21)	9,317,063	.....	9,317,063

Company Funds on Hand and on Deposit			
General Funds			
6. Open depositories .....	.....	.....	5,595,689
7. Suspended depositories .....	.....	.....	.....
8. Total general funds .....	.....	.....	5,595,689

Reinsurance Reserve Funds			
9. Open depositories .....	.....	.....	.....
10. Suspended depositories .....	.....	.....	.....
11. Total reinsurance reserve funds .....	.....	.....	.....

Total Company Funds			
12. Open depositories .....	.....	.....	14,912,752
13. Suspended depositories .....	.....	.....	.....
14. Total company funds on deposit (Lines 8 & 11) .....	.....	.....	5,595,689
15. Company funds on hand .....	.....	.....	.....
16. Total company funds on hand and on deposit .....	.....	.....	5,595,689

SCHEDULE E – PART 1E – SUMMARY OF INTEREST EARNED

Interest Earned On	1 Interest Earned By Company	2 Average Monthly Balance of Non-Earning Deposits	3 Average Monthly Balance of Earning Deposits
Segregated Funds Held for Others			
17. Open depositories .....	.....	.....	.....
18. Suspended depositories .....	.....	8,558,611	.....
19. Total segregated funds held for others .....	.....	8,558,611	.....
Company Funds on Deposit			
20. Open depositories	4,991	.....	4,468,733
21. Suspended depositories .....	.....	.....	.....
22. Total company funds on deposit	4,991	.....	4,468,733
Total All Funds on Deposit			
23. Open depositories	4,991	8,558,611	4,468,733
24. Suspended depositories .....	.....	.....	.....
25. Total all funds on deposit	4,991	8,558,611	4,468,733

SCHEDULE E - PART 1F - FUNDS ON DEPOSIT - INTERROGATORIES

1. Does the reporting entity require, at least annually, letters of representation from its directors and officers concerning conflicts of interest in relation to:

1.1 The supply of goods or paid provision of personal services to a reporting entity depository listed in Schedule E – Part 1, or its parent, subsidiaries, or any of its affiliates? Yes [X] No []

1.2 Real estate agreements, including, but not limited to lease, rental, mortgage, or purchase agreements with the reporting entity depository listed in Schedule E – Part 1, or its parent, subsidiaries, or any of its affiliates? Yes [X] No []

2.1 Is the reporting entity aware of any real estate agreements, including, but not limited to lease, rental, mortgage, or purchase agreements, existing between the reporting entity, its Parent, Subsidiaries, or any of its Affiliates, and any depository listed in Schedule E – Part 1, or its parent, subsidiaries or any of its affiliates? Yes [] No [X]

2.2 If yes, give details below.

.....
.....
.....
.....
.....

3. Does the reporting entity maintain sufficient records of funds held as escrow or security deposits and reported in Exhibit Capital Gains (Losses) and Schedule E – Part 1A that will enable it to identify the funds on an individual basis?

Yes [X] No []

SCHEDULE F – PART 1

Assumed Reinsurance as of December 31, Current Year (000 Omitted)

SCHEDULE F – PART 2

Ceded Reinsurance as of December 31, Current Year (000 Omitted)

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Ceded Liability	7 Ceded Reinsurance Premiums Paid	8 Reinsurance Recoverable on Paid Losses and Loss Adjustment Expenses	9 Reinsurance Recoverable on Known Case Losses and LAE Reserves	Reinsurance Payable		12 Net Amount Recoverable From Reinsurers (Cols. 8 + 9 – 10 - 11)	13 Funds Held by Company Under Reinsurance Treaties
									10	11		
06-1434264 95-2566122 74-0924290	50028 50814 50121	ACE CAPITAL REINSURANCE COMPANY FIRST AMERICAN TITLE INSURANCE COMPANY STEWART NATIONAL TITLE SERVICES	NEW YORK CALIFORNIA TEXAS						4			4
0599999		Total Authorized - Other U.S. Unaffiliated Insurers							4			4
AA1126623 AA1128623	1126623 1128623	LLOYD'S SYNDICATE NUMBER 0623 LLOYD'S SYNDICATE NUMBER 2623	ENGLAND ENGLAND				16 67					
0899999		Total Authorized - Other Non-U.S. Insurers					83					
0999999		Total Authorized					83		4			4
9999999		Totals					83		4			4

SCHEDULE F – PART 3

Provision for Unauthorized Reinsurance as of December 31, Current Year (000 Omitted)

1 Federal ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Recoverable all Items Schedule F	6 Funds Held By Company Under Reinsurance Treaties	7 Letters of Credit	Letter of Credit Issuing or Confirming Bank (a)			11 Ceded Balances Payable	12 Miscellaneous Balances	13 Other Allowed Offset Items	14 Cols. 6+7+11+ 12+13 but not in excess of Col. 5	15 Subtotal Col. 5 minus Col. 14	16 Recoverable Paid Losses & LAE Expenses Over 90 Days past Due not in Dispute	17 20 % of Amount in Col. 16	18 Smaller of Col. 14 or Col. 17	19 Smaller of Col. 14 or 20 % of Amount in Dispute Included in Col. 5	20 Total Provision for Unauthorized Reinsurance Smaller of Col. 5 or Cols. 14 + 18 + 19
							8 American Bankers Association (ABA) Routing Number	9 Letter of Credit Code	10 Bank Name										
9999999	Totals						XXX	XXX	XXX										

1. Amounts in dispute totaling \$ 0 are included in Column 5.

2. Amounts in dispute totaling \$ 0 are excluded from Column 16.

3. Column 5 excludes \$ 0 recoverables on ceded IBNR on contracts in force prior to July 1, 1984 and not subsequently renewed.

26

(a)

Code	American Bankers Association (ABA) Routing Number	Bank Name

NONE

SCHEDULE H - PART 1

Showing All Title Plants Owned at December 31 of Current Year and Basis of Valuation

1 Permanent Identification Number	2 Form of Ownership	Title Plant Covering Period		5 Date Acquired	6 Actual Cost	7 Book Value	8 Book Value Valuation Basis (a)	9 Increase by Adjustment in Book Value	10 Decrease by Adjustment in Book Value
		3 From	4 To						
OR00001	WHOLLY OWNED BY COMPANY	07/24/2008	12/31/2011	07/24/2008	42,852	42,852	COST		
99999999	Totals				42,852	42,852	XXX		

(a) If the basis is other than cost, provide explanation to reason for deviating from the cost basis:

SCHEDULE H - PART 2

Showing All Title Plants Acquired During the Year

SCHEDULE H - PART 3

Showing All Title Plants Sold or Otherwise Disposed of During the Year

1 Permanent Identification Number	2 Form of Ownership	Title Plant Covering Period		5 Date Sold	6 Name of Purchaser	7 Cost to Company	8 Prior Year Book Value	Change in Book Value		11 Book Value at Date of Sale (8 + 9 - 10)	12 Consideration	13 Profit and (Losses) on Sale
		3 From	4 To					9 Increase by Adjustment in Book Value During Year	10 Decrease by Adjustment in Book Value During Year			
29												
9999999	Totals											

NONE**SCHEDULE H – VERIFICATION BETWEEN YEARS**

1. Book value, December 31, prior year	<u>42,852</u>
2. Increase by adjustment in book value:	
2.1 Totals, Part 1, Col 9	<u> </u>
2.2 Totals, Part 3, Col 9	<u> </u>
3. Cost of acquisition, Part 2, Col. 8	
4. Totals	<u>42,852</u>

5. Decrease by adjustment in book value:	
5.1 Totals, Part 1, Col. 10	<u> </u>
5.2 Totals, Part 3, Col. 10	<u> </u>
6. Consideration received on sales, Part 3, Col. 12	<u> </u>
7. Net profit (loss) on sales, Part 3, Col. 13	<u> </u>
8. Book value, December 31, current year	<u>42,852</u>

SCHEDULE H - PART 4

Showing Total Title Assets Held Directly or by Subsidiaries

Type of Title Plant Ownership	1 Title Plant Value Current Year	2 Title Plant Value Prior Year
1. Direct investment in title plant assets	42,852	42,852
2. Title plant assets held by subsidiaries (proportionate to ownership)		
3. Total (Line 1 plus Line 2)	42,852	42,852

SCHEDULE P – PART 1A – POLICIES WRITTEN DIRECTLY

(\$000 omitted)

Years in Which Policies Were Written	Amount of Insurance Written in Millions	Premiums Written and Other Income					Loss and Allocated Loss Adjustment Expenses Payments					
		2	3	4	5	6	Loss Payments			Allocated LAE Payments		
							7	8	9	10	11	12
1. Prior	XXX											
2. 2002												
3. 2003												
4. 2004												
5. 2005												
6. 2006												
7. 2007												
8. 2008		11					11					
9. 2009		1,303					3	1,300			3	
10. 2010		3,755					3,755	531			185	
11. 2011		4,870		3,212	40		8,042					
12. Totals	XXX	9,939		3,212	43		13,108	531			188	

	13	14	15	16	Loss and Allocated Loss Adjustment Expenses Unpaid						23	
					Known Claim Reserves			IBNR Reserves				
					17	18	19	20	21	22		
	Salvage and Subrogation Received	Unallocated Loss Expense Payments	Total Net Loss and Expense Paid (Cols. 7+8+10+11 -9-12+14)	Number of Claims Reported (Direct)	Direct	Assumed	Ceded	Direct	Assumed	Ceded	Unallocated Loss Expense Unpaid	
1. Prior												
2. 2002												
3. 2003												
4. 2004												
5. 2005												
6. 2006												
7. 2007												
8. 2008												
9. 2009			3	2								
10. 2010		7	716	8	500				64			14
11. 2011									145			40
12. Totals		7	719	10	500				209			54

	24	25	Losses and Allocated Loss Expenses Incurred				Loss and LAE Ratio		32	33	34
			26	27	28	29	30	31			
			Number of Claims Outstanding (Direct)	Direct (Cols. 7+10+17+20)	Assumed (Cols. 8+11+18+21)	Ceded (Cols. 9+12+19+22)	Net	Net LAE Per Basis (\$1000 of Coverage ([Cols. 14+23+26/29+14+23]/[Cols. 6-4]))			
1. Prior									XXX		
2. 2002											
3. 2003											
4. 2004											
5. 2005											
6. 2006											
7. 2007											
8. 2008											
9. 2009		1	3				3	0.230	0.231		
10. 2010	578	2	1,280				1,280	34.461	34.461		578
11. 2011	185		145				145	3.799	3.830		185
12. Totals	763	3	1,428				1,428	XXX	XXX	XXX	763

SCHEDULE P – PART 1B – POLICIES WRITTEN THROUGH AGENTS

(\$000 omitted)

Years in Which Policies Were Written	Amount of Insurance Written in Millions	Premiums Written and Other Income						Loss and Allocated Loss Adjustment Expenses Payments					
		2 Direct Premium	3 Assumed Premium	4 Other Income	5 Ceded Premium	6 Net (2 + 3 + 4 - 5)	Loss Payments			Allocated LAE Payments			
							7 Direct	8 Assumed	9 Ceded	10 Direct	11 Assumed	12 Ceded	
1. Prior	XXX	30,587		103	140	30,550	1,113		131	517		78	
2. 2002		8,698			72	8,626	69		13	108		70	
3. 2003		10,751			118	10,633	43		122	44			
4. 2004		7,264			52	7,212	17			67			
5. 2005		7,756			266	7,490	(32)			87			
6. 2006		4,554			179	4,375	15			33			
7. 2007		3,874			145	3,729				21			
8. 2008		3,727			101	3,626	1			1			
9. 2009		5,161			29	5,132	34			61			
10. 2010		6,938			84	6,854	3,627			180			
11. 2011		6,013			43	5,970				4			
12. Totals	XXX	95,323		103	1,229	94,197	4,887		266	1,123		148	

	13 Salvage and Subrogation Received	14 Unallocated Loss Expense Payments	15 Total Net Loss and Expense Paid (Cols. 7+8+10+11 -9-12+14)	16 Number of Claims Reported (Direct)	Loss and Allocated Loss Adjustment Expenses Unpaid						23 Unallocated Loss Expense Unpaid	
					Known Claim Reserves			IBNR Reserves				
					17 Direct	18 Assumed	19 Ceded	20 Direct	21 Assumed	22 Ceded		
1. Prior	930		1,421	366				201		93	56	
2. 2002			94	82	4		4	33		32	9	
3. 2003			(35)	93	1			82			23	
4. 2004	1		84	71				69			19	
5. 2005	74		55	67	37			77		6	21	
6. 2006			48	34				50		3	14	
7. 2007	29		21	38				49		3	14	
8. 2008			2	8	1			63		2	18	
9. 2009			95	12	49			147		4	41	
10. 2010	5		3,807	95	337			553		1	157	
11. 2011			4	1	50			267		1	74	
12. Totals	1,039		5,596	867	479		4	1,591		145	446	

	24 Total Net Loss and LAE Unpaid (Cols. 17+18+20 +21-19 -22+23)	25 Number of Claims Outstanding (Direct)	Losses and Allocated Loss Expenses Incurred				Loss and LAE Ratio		32 Net Loss & LAE Per \$1000 of Coverage ([Cols. 14+23 +29] / [29+14+23]) [Col. 1])	33 Net Reserves After Discount (Cols. 24-33)	
			26 Direct	27 Assumed	28 Ceded	29 Net	30 Direct	31 Net Basis ([Cols. 14+23+26/ Col 2])			
				(Cols. 7+ 10+17+20)	(Cols. 8+ 11+18+21)	(12+19+22)		([Cols. 6 - 4])			
1. Prior	164	3	1,831		302	1,529	6,169	5,206	XXX		164
2. 2002	10	1	214		119	95	2,564	1,206			10
3. 2003	106	5	170		122	48	1,795	0,668			106
4. 2004	88	1	153			153	2,368	2,385			88
5. 2005	129	1	169		6	163	2,450	2,457			129
6. 2006	61	2	98		3	95	2,459	2,491			61
7. 2007	60	3	70		3	67	2,168	2,172			60
8. 2008	80	1	66		2	64	2,254	2,261			80
9. 2009	233	6	291		4	287	6,433	6,391			233
10. 2010	1,046	34	4,697		1	4,696	69,963	70,805			1,046
11. 2011	390	1	321		1	320	6,569	6,600			390
12. Totals	2,367	58	8,080		563	7,517	XXX	XXX	XXX		2,367

SCHEDULE P – PART 2

POLICY YEAR INCURRED LOSS AND ALAE

Years in Which Policies Were Written	Incurred Losses and Allocated Expenses at Year End (\$000 OMITTED)										Development	
	Including Known Claims and IBNR on Unreported Claims											
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	11 One Year (Cols. 10 - 9)	12 Two Year (Cols. 10 - 8)
1. Prior												
2. 1992	14		11	17	17	17	17	17	17	17		
3. 1993	51	89	79	146	146	146	147	147	147	147		
4. 1994	50	45	44	40	40	40	34	32	28	28		(4)
5. 1995	4	11	12	12	12	12	12	12	12	12		
6. 1996	18	5	92	5	5	5	5	5	5	5		
7. 1997	80	85	(1)	96	914	76	77	77	77	77		
8. 1998	54	44	154	45	45	46	47	45	45	45		
9. 1999	78	208	221	242	241	255	255	251	241	331	90	80
10. 2000	157	348	472	490	538	412	284	299	321	304	(17)	5
11. 2001	480	767	553	515	519	470	462	450	473	563	90	113
12. 2002	251	31	81	7	43	48	51	51	50	95	45	44
13. 2003	XXX	111	180	463	224	50	94	130	165	48	(117)	(82)
14. 2004	XXX	XXX	144	191	332	436	226	130	153	153		23
15. 2005	XXX	XXX	XXX	321	213	157	119	110	135	163	28	53
16. 2006	XXX	XXX	XXX	XXX	161	127	92	83	104	95	(9)	12
17. 2007	XXX	XXX	XXX	XXX	XXX	122	73	78	80	67	(13)	(11)
18. 2008	XXX	XXX	XXX	XXX	XXX	XXX	76	67	85	64	(21)	(3)
19. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	152	230	290	60	138
20. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,489	5,976	1,487	XXX
21. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	465	XXX	XXX
22. Totals											1,623	368

SCHEDULE P – PART 2A – POLICY YEAR PAID LOSS AND ALAE

Years in Which Policies Were Written	Cumulative Paid Losses and Allocated Expenses at Year End (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011			
	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011			
1. Prior													
2. 1992	14		11	17	17	17	17	17	17	17			1
3. 1993	15	55	41	146	146	146	147	147	147	147	1		1
4. 1994	50	45	44	40	40	40	34	32	28	28	2		2
5. 1995	2	11	12	12	12	12	12	12	12	12	2		1
6. 1996	5	5	7	8	5	5	5	5	5	5	3		
7. 1997			1	1	14	76	77	77	77	77	3		3
8. 1998	36	55	45	45	45	46	46	45	45	45	9		5
9. 1999	28	48	92	104	187	224	226	226	238	302	34		25
10. 2000	28	121	176	199	249	263	264	279	279	281	86		64
11. 2001	318	327	424	283	395	400	398	402	429	507	83		32
12. 2002		29	46	37	23	46	51	49	49	94	57		21
13. 2003	XXX		2	320	26	33	41	56	83	(35)	52		31
14. 2004	XXX	XXX	3	12	37	67	72	84	84	84	49		19
15. 2005	XXX	XXX	XXX	63	37	48	53	53	53	55	3		25
16. 2006	XXX	XXX	XXX	XXX	1	37	42	42	46	48	20		11
17. 2007	XXX	XXX	XXX	XXX	XXX	16	3	17	20	21	8		4
18. 2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2	1		6
19. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	14	98	3		5
20. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	532	4,523	27		7
21. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4			

SCHEDULE P – PART 2B –
POLICY YEAR LOSS AND ALAE CASE BASIS RESERVES

Years in Which Policies Were Written	Case Basis Losses and Allocated Expenses Reserves at Year End (\$000 OMITTED)									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 1992	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 1993	36	34	38	.....	.....	.....	.....	.....	.....	.....
4. 1994	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 1995	2	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 1996	13	.....	85	(3)	.....	.....	.....	.....	.....	.....
7. 1997	80	85	(2)	95	900	.....	.....	.....	.....	.....
8. 1998	18	(11)	109	.....	.....	.....	.....	.....	.....	.....
9. 1999	50	126	104	100	24	.....	5	.....	3	.....
10. 2000	129	137	229	214	222	102	.....	1	1	.....
11. 2001	97	213	(18)	135	41	2	13	3	.....	.....
12. 2002	38	.....	33	(31)	17	.....	(2)	1	.....	.....
13. 2003	XXX	.....	.....	18	62	1	.....	27	3	1
14. 2004	XXX	XXX	.....	4	163	185	101	.....	.....	.....
15. 2005	XXX	XXX	XXX	.....	5	17	1	1	.....	37
16. 2006	XXX	XXX	XXX	XXX	20	16	.....	.....	.....	.....
17. 2007	XXX	XXX	XXX	XXX	XXX	5	14	16	.....	.....
18. 2008	XXX	XXX	XXX	XXX	XXX	XXX	2	6	.....	1
19. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	22	49
20. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,009	837
21. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50

SCHEDULE P – PART 2C –
POLICY YEAR BULK RESERVES ON KNOWN CLAIMS

Years in Which Policies Were Written	Bulk Reserves on Known Claims at Year End (\$000 OMITTED)									
	Loss and Allocated Loss Expense									
1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 1992	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 1993	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 1994	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 1995	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 1996	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 1997	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 1998	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 1999	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2000	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2001	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12. 2002	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
13. 2003	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....
14. 2004	XXX	XXX	.....	.....	.....	.....	.....	.....	.....	.....
15. 2005	XXX	XXX	XXX	.....	.....	.....	.....	.....	.....	.....
16. 2006	XXX	XXX	XXX	XXX	.....	.....	.....	.....	.....	.....
17. 2007	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	.....	.....
18. 2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	.....
19. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....
20. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	525
21. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....

SCHEDULE P – PART 2D –
POLICY YEAR IBNR RESERVES

Years in Which Policies Were Written	IBNR Reserves on Unreported Claims at Year End (\$000 OMITTED)									
	Loss and Allocated Loss Expense									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 1992	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 1993	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 1994	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 1995	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 1996	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 1997	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 1998	.....	.....	.....	.....	.....	.....	.....	1	.....	.....
9. 1999	.....	34	25	38	30	31	24	25	.....	29
10. 2000	.....	90	67	77	67	47	20	19	41	23
11. 2001	65	227	147	97	83	68	51	45	44	56
12. 2002	213	2	2	1	3	2	2	1	1	1
13. 2003	XXX	111	178	125	136	16	53	47	79	82
14. 2004	XXX	XXX	141	175	132	184	53	46	69	69
15. 2005	XXX	XXX	XXX	258	171	92	65	56	82	71
16. 2006	XXX	XXX	XXX	XXX	140	74	50	41	58	47
17. 2007	XXX	XXX	XXX	XXX	XXX	101	56	45	60	46
18. 2008	XXX	XXX	XXX	XXX	XXX	XXX	74	61	84	61
19. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	136	194	143
20. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	423	616
21. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	411

SCHEDULE P – PART 3 –
INCURRED LOSS AND ALAE BY YEAR OF FIRST REPORT

Years in Which Losses Were Incurred	Losses and Allocated Expenses at Year End (\$000 OMITTED) Incurred Loss and ALAE on Known Claims and Bulk Reserves on Known Claims										Development	
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	11 One Year (Cols. 10 - 9)	12 Two Year (Cols. 10 - 8)
1. Prior					289	226	156	156	380	1,421	1,421	1,421
2. 2002					89	(21)	(51)	(51)	154	94	(286)	(62)
3. 2003	XXX				(56)	(93)	(93)	(93)		(33)	(187)	18
4. 2004	XXX	XXX			131	100	83	86	154	84	37	177
5. 2005	XXX	XXX	XXX		234	190	107	107	125	93	(61)	7
6. 2006	XXX	XXX	XXX		225	233	123	47		48	(77)	(59)
7. 2007	XXX	XXX	XXX	XXX	XXX	26	12	20		41	(6)	(82)
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX	73	127		3	(17)	(9)
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	171		44		98
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,068		5,314	1,246	XXX
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		54	XXX	XXX
12. Totals											2,114	1,509

SCHEDULE P – PART 3A –
PAID LOSS AND ALAE BY YEAR OF FIRST REPORT

Years in Which Losses Were Incurred	Cumulative Paid Losses and Allocated Expenses at Year End (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011		
1. Prior					128	156	156	156	380	1,421	33	14
2. 2002					1	(51)	(51)	(51)	154	94	54	38
3. 2003	XXX				(59)	(93)	(93)	(93)		(35)	60	44
4. 2004	XXX	XXX			40	76	76	81	154	47	84	12
5. 2005	XXX	XXX	XXX		23	92	107	107	125	55	50	15
6. 2006	XXX	XXX	XXX	XXX	120	126	123	47		48	68	5
7. 2007	XXX	XXX	XXX	XXX	6	9	18	2		21	74	5
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16		81	13	41
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	552		98	4	45
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		4,523	4	44
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		4	32	

SCHEDULE P – PART 3B –
LOSS AND ALAE CASE BASIS RESERVES BY
YEAR OF FIRST REPORT

Years in Which Losses Were Incurred	Case Basis Losses and Allocated Expenses Reserves at Year End (\$000 OMITTED)									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior					161	70				
2. 2002					88	30				
3. 2003	XXX				3					
4. 2004	XXX	XXX			91	24	7	5		
5. 2005	XXX	XXX	XXX		211	98				
6. 2006	XXX	XXX	XXX	XXX	XXX	105	107			
7. 2007	XXX	XXX	XXX	XXX	XXX	XXX	20	3		
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2		
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	57	46	73
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,991	791
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50

SCHEDULE P – PART 3C –
BULK RESERVES ON KNOWN CLAIMS BY
YEAR OF FIRST REPORT

Years in Which Losses Were Incurred	Bulk Reserves on Known Claims at Year End (\$000 OMITTED) Loss and Allocated Loss Expense									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior										
2. 2002										
3. 2003	XXX									
4. 2004	XXX	XXX								
5. 2005	XXX	XXX	XXX							
6. 2006	XXX	XXX	XXX	XXX						
7. 2007	XXX	XXX	XXX	XXX	XXX					
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		525
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 4A - POLICY YEAR REPORTED CLAIM COUNTS

Years in Which Policies Were Written	Number of Claims Reported (Direct)									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior										
2. 1992										
3. 1993										
4. 1994										
5. 1995										
6. 1996										
7. 1997										
8. 1998										
9. 1999										
10. 2000										
11. 2001										1
12. 2002										82
13. 2003	XXX									93
14. 2004	XXX	XXX								71
15. 2005	XXX	XXX	XXX							67
16. 2006	XXX	XXX	XXX	XXX						34
17. 2007	XXX	XXX	XXX	XXX	XXX					38
18. 2008	XXX	XXX	XXX	XXX	XXX	XXX				8
19. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX			14
20. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		103
21. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SCHEDULE P – PART 4B – POLICY YEAR CLAIM CLOSED WITH LOSS PAYMENT

Years in Which Policies Were Written	Number of Claims Closed With Loss Payment									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior										
2. 1992										1
3. 1993										2
4. 1994										2
5. 1995										3
6. 1996										3
7. 1997										3
8. 1998										9
9. 1999										34
10. 2000										86
11. 2001										83
12. 2002										57
13. 2003	XXX									52
14. 2004	XXX	XXX								49
15. 2005	XXX	XXX	XXX							3
16. 2006	XXX	XXX	XXX	XXX						20
17. 2007	XXX	XXX	XXX	XXX	XXX					8
18. 2008	XXX	XXX	XXX	XXX	XXX	XXX				1
19. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX			3
20. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		27
21. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 4C – POLICY YEAR CLAIM CLOSED WITHOUT LOSS PAYMENT

Years in Which Policies Were Written	Number of Claims Closed Without Loss Payment									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior										
2. 1992										1
3. 1993										1
4. 1994										2
5. 1995										1
6. 1996										
7. 1997										3
8. 1998										5
9. 1999										25
10. 2000										64
11. 2001										32
12. 2002										21
13. 2003	XXX									31
14. 2004	XXX	XXX								19
15. 2005	XXX	XXX	XXX							25
16. 2006	XXX	XXX	XXX	XXX						11
17. 2007	XXX	XXX	XXX	XXX	XXX					4
18. 2008	XXX	XXX	XXX	XXX	XXX	XXX				6
19. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX			5
20. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		7
21. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 5A - REPORT YEAR REPORTED CLAIM COUNTS

Years in Which Claims Were First Reported	Number of Claims Reported (Direct)									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior										366
2. 2002										82
3. 2003	XXX									93
4. 2004	XXX	XXX								71
5. 2005	XXX	XXX	XXX							67
6. 2006	XXX	XXX	XXX	XXX						34
7. 2007	XXX	XXX	XXX	XXX	XXX					38
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX				8
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX			14
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		103
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SCHEDULE P – PART 5B – REPORT YEAR CLAIMS CLOSED WITH LOSS PAYMENT

Years in Which Claims Were First Reported	Number of Claims Closed With Loss Payment									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior										33
2. 2002										54
3. 2003	XXX									60
4. 2004	XXX	XXX								51
5. 2005	XXX	XXX	XXX							50
6. 2006	XXX	XXX	XXX	XXX						68
7. 2007	XXX	XXX	XXX	XXX	XXX					74
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX				13
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX			4
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		4
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	32

SCHEDULE P – PART 5C – REPORT YEAR CLAIMS CLOSED WITHOUT LOSS PAYMENT

Years in Which Claims Were First Reported	Number of Claims Closed Without Loss Payment									
	1 2002	2	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior										14
2. 2002										38
3. 2003	XXX									44
4. 2004	XXX	XXX								12
5. 2005	XXX	XXX	XXX							15
6. 2006	XXX	XXX	XXX	XXX						5
7. 2007	XXX	XXX	XXX	XXX	XXX					5
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX				41
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX			45
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		44
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P INTERROGATORIES

1.1 Title insurance losses should include all losses on any transaction for which a title insurance premium, rate or charge was made or contemplated. Escrow losses for which the company is contractually obligated should be included. Losses arising from defalcations for which the reporting entity is contractually obligated should be included. Are the title insurance losses reported in Schedule P defined in conformance with the above definition? Yes [X] No []

1.2 If not, describe the types of losses reported.

1.3 If the types or basis of reporting has changed over time, please explain the nature of such changes.

.....

2.1 Are paid loss and allocated loss adjustment expenses reduced on account of salvage or subrogation in accordance with the instructions? Yes [X] No []

2.2 If not, describe the basis of reporting.

2.3 If the basis of reporting has changed over time, please explain the nature of such changes.

.....

3.1 Are sales of salvage at prices different from their book value recorded in accordance with the instructions? Yes [X] No []

3.2 If not, describe the basis of reporting.

3.3 If the basis of reporting has changed over time, please explain the nature of such changes.

.....

4.1 Are the case basis reserves reported gross of anticipated salvage and subrogation in accordance with the instructions? Yes [X] No []

4.2 If not, please explain.

4.3 If the basis of reporting has changed over time, please explain the nature of such changes.

.....

5.1 Do any of the reserves reported in Schedule P contain a provision for reserve discount, contingency margin, or any other element not providing for an estimation of ultimate liability? Yes [] No [X]

5.2 If so, please explain.

.....

6.1 Does the company IBNR reserves in Schedule P reconcile to the IBNR reserves prepared on a GAAP basis? Yes [X] No []

6.2 If not, please explain.

.....

7.1 Are allocated loss adjustment expenses recorded in accordance with the instructions? Yes [X] No []

7.2 If not, please explain which items are not in conformity.

.....

7.3 If the basis of reporting has changed over time, please explain the nature of such changes.

.....

8.1 The unallocated loss adjustment expenses paid during the most recent calendar year should be distributed to the various policy years in which the policy was issued as follows: (1) 10% to the most recent policy year, (2) 20% to the next most recent policy year, (3) 10% to the succeeding policy year, (4) 5% to each of the next two succeeding policy years, and (5) the balance to all policy years, including the most recent policy year, in proportion to the amount of loss payments paid for each policy year during the most recent calendar year. Are they so reported? Yes [X] No []

8.2 If estimates were used prior to 1996, please explain the basis of such estimates.

.....

9. Indicate the basis of determining claim counts:

9.1 Are policies having multiple claims shown in Schedule P as a single claim? Yes [X] No []

9.2 Are claims closed without payment removed from the claim count? Yes [] No [X]

9.3 If the definition of claim count has changed over time, please explain the nature of such changes.

.....

10.1 Have there been any portfolio reinsurance transfers or other accounting conventions that have caused a mismatch of premiums, other income, loss or ALAE? Yes [] No [X]

10.2 If so, please explain.

.....

11.1 Have there been any excess of loss or stop loss reinsurance treaties or other accounting conventions that have caused a mismatch of premiums, other loss or ALAE? Yes [] No [X]

11.2 If so, please explain.

.....

12.1 Have there been any major mergers or acquisitions, either with respect to an insurer or an agent, that had a material impact on operations or claims development? Yes [] No [X]

12.2 If so, please explain.

.....

13.1 Were any estimates or allocations used to complete this data request? Yes [X] No []

13.2 If so, please explain the nature of the estimate or allocation, the assumptions made and the data used to support your assumptions. A review of prior year's Schedule P, Part 3 showed past inaccuracies. The inaccuracies were corrected using the previous Controller's work papers, but in doing so, some estimates had to be made.

.....

14. Are there any especially significant events, coverage, retention or accounting changes which have occurred which must be considered when making an analysis of the information provided? Yes [] No [X]

SCHEDULE Y**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity / Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
		00000	26-0331910			ENTITLE DIRECT GROUP		CT	UDP	TIMOTHY M. DWYER	OWNERSHIP	100.0	TIMOTHY M. DWYER	

NONE

Asterik	Explanation

SCHEDULE Y

PART 2 – SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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 filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	<u>Response</u>
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2. Will an actuarial opinion be filed by March 1?	YES
APRIL FILING	
3. Will Management's Discussion and Analysis be filed by April 1?	YES
4. Will the Supplemental Schedule of Business Written by Agency be filed with the state of domicile by April 1?	YES
5. Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
JUNE FILING	
6. Will an audited financial report be filed by June 1?	YES
7. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING	
8. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES

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 filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	
9. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
10. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
11. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
12. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
AUGUST FILING	
13. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

Explanation:

Bar Code:



5163220114200000



5163220112240000



5163220112250000



5163220112260000



5163220112230000

OVERFLOW PAGE FOR WRITE-INS

ALPHABETICAL INDEX TO TITLE ANNUAL STATEMENT

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