



ANNUAL STATEMENT

For the Year Ended December 31, 2012
of the Condition and Affairs of the

Stonewood General Insurance Company

NAIC Group Code.....3494, 3494 (Current Period) (Prior Period)	NAIC Company Code..... 35211	Employer's ID Number..... 31-1277903
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	Country of Domicile US
Incorporated/Organized..... September 5, 1989	Commenced Business..... February 1, 1990	
Statutory Home Office	52 East Gay Street..... Columbus OH US 43215 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	
Main Administrative Office	6131 Falls of Neuse Rd., Suite 306..... Raleigh NC US..... 27609 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	919-900-1200 <i>(Area Code) (Telephone Number)</i>
Mail Address	6131 Falls of Neuse Rd., Suite 306..... Raleigh NC US 27609 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>	
Primary Location of Books and Records	6131 Falls of Neuse Rd., Suite 306..... Raleigh NC US 27609 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	919-900-1200 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address	www.stonewoodins.com	
Statutory Statement Contact	Aileen K. Celentano <i>(Name)</i> acelentano@stonewoodins.com <i>(E-Mail Address)</i>	919-882-3536 <i>(Area Code) (Telephone Number) (Extension)</i> 919-900-1201 <i>(Fax Number)</i>

OFFICERS

Name	Title	Name	Title
1. Steven J. Hartman #	President	2. Thomas R. Fauerbach #	Chief Financial Officer/Secretary
3. Michael E. Crow	Treasurer	4. Gregg T. Davis	Chairman

OTHER

Thomas R. Fauerbach # Chief Financial Officer

DIRECTORS OR TRUSTEES

Gregg T. Davis	Steven J. Hartman #	Ann Person	Michael E. Crow
Thomas R. Fauerbach #			

State of..... North Carolina
County of..... Wake

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) Steven J. Hartman	_____ (Signature) Thomas R. Fauerbach	_____ (Signature) Michael E. Crow
1. (Printed Name) President	2. (Printed Name) Chief Financial Officer/Secretary	3. (Printed Name) Treasurer
_____ (Title)	_____ (Title)	_____ (Title)

Subscribed and sworn to before me
This _____ day of _____ 2013

a. Is this an original filing? Yes [X] No []
b. If no

1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....3494 NAIC Company Code....35211

BUSINESS IN THE STATE OF **GEORGIA** DURING THE YEAR

19.GA

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0				0			0			
2.1 Allied lines.....	0	0				0			0			
2.2 Multiple peril crop.....	0	0				0			0			
2.3 Federal flood.....	0	0				0			0			
3. Farmowners multiple peril.....	0	0				0			0			
4. Homeowners multiple peril.....	0	0				0			0			
5.1 Commercial multiple peril (non-liability portion).....	0	0				0			0			
5.2 Commercial multiple peril (liability portion).....	0	0				0			0			
6. Mortgage guaranty.....	0	0				0			0			
8. Ocean marine.....	0	0				0			0			
9. Inland marine.....	0	0				0			0			
10. Financial guaranty.....	0	0				0			0			
11. Medical professional liability.....	0	0				0			0			
12. Earthquake.....	0	0				0			0			
13. Group accident and health (b).....	0	0				0			0			
14. Credit A & H (group and individual).....	0	0				0			0			
15.1 Collectively renewable A&H (b).....	0	0				0			0			
15.2 Non-cancelable A & H (b).....	0	0				0			0			
15.3 Guaranteed renewable A & H (b).....	0	0				0			0			
15.4 Non-renewable for stated reasons only (b).....	0	0				0			0			
15.5 Other accident only.....	0	0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0				0			0			
15.7 All other A & H (b).....	0	0				0			0			
15.8 Federal employees health benefits program premium (b).....	0	0				0			0			
16. Workers' compensation.....	0	0				0			0			
17.1 Other liability-occurrence.....	0	0				0			0			
17.2 Other liability-claims-made.....	0	0				0			0			
17.3 Excess workers' compensation.....	0	0				0			0			
18. Products liability.....	0	0				0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	0	0				0			0			
19.2 Other private passenger auto liability.....	0	0			71,756	(305,223)	211,597	51,189	21,894	25,291		350
19.3 Commercial auto no-fault (personal injury protection).....	0	0							0			
19.4 Other commercial auto liability.....	0	0			250	250			0			
21.1 Private passenger auto physical damage.....	0	0			(2,300)	(2,300)		2,450	2,450			350
21.2 Commercial auto physical damage.....	0	0			(500)	(500)			0			
22. Aircraft (all perils).....	0	0							0			
23. Fidelity.....	0	0							0			
24. Surety.....	0	0							0			
26. Burglary and theft.....	0	0							0			
27. Boiler and machinery.....	0	0							0			
28. Credit.....	0	0							0			
30. Warranty.....	0	0							0			
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	69,206	(307,773)	211,597	53,639	24,344	25,291	0	700

DETAILS OF WRITE-INS

3401.....	0	0				0			0			
3402.....	0	0				0			0			
3403.....	0	0				0			0			
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....3494 NAIC Company Code....35211

BUSINESS IN GRAND TOTAL DURING THE YEAR

19.GT

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0				0			0			
2.1 Allied lines.....	0	0				0			0			
2.2 Multiple peril crop.....	0	0				0			0			
2.3 Federal flood.....	0	0				0			0			
3. Farmowners multiple peril.....	0	0				0			0			
4. Homeowners multiple peril.....	0	0				0			0			
5.1 Commercial multiple peril (non-liability portion).....	0	0				0			0			
5.2 Commercial multiple peril (liability portion).....	0	0				0			0			
6. Mortgage guaranty.....	0	0				0			0			
8. Ocean marine.....	0	0				0			0			
9. Inland marine.....	0	0				0			0			
10. Financial guaranty.....	0	0				0			0			
11. Medical professional liability.....	0	0				0			0			
12. Earthquake.....	0	0				0			0			
13. Group accident and health (b).....	0	0				0			0			
14. Credit A & H (group and individual).....	0	0				0			0			
15.1 Collectively renewable A&H (b).....	0	0				0			0			
15.2 Non-cancelable A & H (b).....	0	0				0			0			
15.3 Guaranteed renewable A & H (b).....	0	0				0			0			
15.4 Non-renewable for stated reasons only (b).....	0	0				0			0			
15.5 Other accident only.....	0	0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0				0			0			
15.7 All other A & H (b).....	0	0				0			0			
15.8 Federal employees health benefits program premium (b).....	0	0				0			0			
16. Workers' compensation.....	0	0				0			0			
17.1 Other liability-occurrence.....	0	0				0			0			
17.2 Other liability-claims-made.....	0	0				0			0			
17.3 Excess workers' compensation.....	0	0				0			0			
18. Products liability.....	0	0				0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	0	0				0			0			
19.2 Other private passenger auto liability.....	0	0			71,756	(305,223)	211,597	51,189	21,894	25,291		888
19.3 Commercial auto no-fault (personal injury protection).....	0	0							0			
19.4 Other commercial auto liability.....	0	0			250	250			0			
21.1 Private passenger auto physical damage.....	0	0			(2,300)	(2,300)		2,450	2,450			887
21.2 Commercial auto physical damage.....	0	0			(500)	(500)			0			
22. Aircraft (all perils).....	0	0							0			
23. Fidelity.....	0	0							0			
24. Surety.....	0	0							0			
26. Burglary and theft.....	0	0							0			
27. Boiler and machinery.....	0	0							0			
28. Credit.....	0	0							0			
30. Warranty.....	0	0							0			
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	69,206	(307,773)	211,597	53,639	24,344	25,291	0	1,775

DETAILS OF WRITE-INS

3401.....	0	0				0			0			
3402.....	0	0				0			0			
3403.....	0	0				0			0			
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....3494 NAIC Company Code....35211

BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0				0			0			
2.1 Allied lines.....	0	0				0			0			
2.2 Multiple peril crop.....	0	0				0			0			
2.3 Federal flood.....	0	0				0			0			
3. Farmowners multiple peril.....	0	0				0			0			
4. Homeowners multiple peril.....	0	0				0			0			
5.1 Commercial multiple peril (non-liability portion).....	0	0				0			0			
5.2 Commercial multiple peril (liability portion).....	0	0				0			0			
6. Mortgage guaranty.....	0	0				0			0			
8. Ocean marine.....	0	0				0			0			
9. Inland marine.....	0	0				0			0			
10. Financial guaranty.....	0	0				0			0			
11. Medical professional liability.....	0	0				0			0			
12. Earthquake.....	0	0				0			0			
13. Group accident and health (b).....	0	0				0			0			
14. Credit A & H (group and individual).....	0	0				0			0			
15.1 Collectively renewable A&H (b).....	0	0				0			0			
15.2 Non-cancelable A & H (b).....	0	0				0			0			
15.3 Guaranteed renewable A & H (b).....	0	0				0			0			
15.4 Non-renewable for stated reasons only (b).....	0	0				0			0			
15.5 Other accident only.....	0	0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0				0			0			
15.7 All other A & H (b).....	0	0				0			0			
15.8 Federal employees health benefits program premium (b).....	0	0				0			0			
16. Workers' compensation.....	0	0				0			0			
17.1 Other liability-occurrence.....	0	0				0			0			
17.2 Other liability-claims-made.....	0	0				0			0			
17.3 Excess workers' compensation.....	0	0				0			0			
18. Products liability.....	0	0				0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	0	0				0			0			
19.2 Other private passenger auto liability.....	0	0				0			0			125
19.3 Commercial auto no-fault (personal injury protection).....	0	0				0			0			
19.4 Other commercial auto liability.....	0	0				0			0			
21.1 Private passenger auto physical damage.....	0	0				0			0			125
21.2 Commercial auto physical damage.....	0	0				0			0			
22. Aircraft (all perils).....	0	0				0			0			
23. Fidelity.....	0	0				0			0			
24. Surety.....	0	0				0			0			
26. Burglary and theft.....	0	0				0			0			
27. Boiler and machinery.....	0	0				0			0			
28. Credit.....	0	0				0			0			
30. Warranty.....	0	0				0			0			
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	250

DETAILS OF WRITE-INS

3401.....	0	0				0			0			
3402.....	0	0				0			0			
3403.....	0	0				0			0			
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

19.NY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....3494 NAIC Company Code....35211

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0				0			0			
2.1 Allied lines.....	0	0				0			0			
2.2 Multiple peril crop.....	0	0				0			0			
2.3 Federal flood.....	0	0				0			0			
3. Farmowners multiple peril.....	0	0				0			0			
4. Homeowners multiple peril.....	0	0				0			0			
5.1 Commercial multiple peril (non-liability portion).....	0	0				0			0			
5.2 Commercial multiple peril (liability portion).....	0	0				0			0			
6. Mortgage guaranty.....	0	0				0			0			
8. Ocean marine.....	0	0				0			0			
9. Inland marine.....	0	0				0			0			
10. Financial guaranty.....	0	0				0			0			
11. Medical professional liability.....	0	0				0			0			
12. Earthquake.....	0	0				0			0			
13. Group accident and health (b).....	0	0				0			0			
14. Credit A & H (group and individual).....	0	0				0			0			
15.1 Collectively renewable A&H (b).....	0	0				0			0			
15.2 Non-cancelable A & H (b).....	0	0				0			0			
15.3 Guaranteed renewable A & H (b).....	0	0				0			0			
15.4 Non-renewable for stated reasons only (b).....	0	0				0			0			
15.5 Other accident only.....	0	0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0				0			0			
15.7 All other A & H (b).....	0	0				0			0			
15.8 Federal employees health benefits program premium (b).....	0	0				0			0			
16. Workers' compensation.....	0	0				0			0			
17.1 Other liability-occurrence.....	0	0				0			0			
17.2 Other liability-claims-made.....	0	0				0			0			
17.3 Excess workers' compensation.....	0	0				0			0			
18. Products liability.....	0	0				0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	0	0				0			0			
19.2 Other private passenger auto liability.....	0	0				0			0			88
19.3 Commercial auto no-fault (personal injury protection).....	0	0				0			0			
19.4 Other commercial auto liability.....	0	0				0			0			
21.1 Private passenger auto physical damage.....	0	0				0			0			87
21.2 Commercial auto physical damage.....	0	0				0			0			
22. Aircraft (all perils).....	0	0				0			0			
23. Fidelity.....	0	0				0			0			
24. Surety.....	0	0				0			0			
26. Burglary and theft.....	0	0				0			0			
27. Boiler and machinery.....	0	0				0			0			
28. Credit.....	0	0				0			0			
30. Warranty.....	0	0				0			0			
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	175

19.OH

DETAILS OF WRITE-INS

3401.....	0	0				0			0			
3402.....	0	0				0			0			
3403.....	0	0				0			0			
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....3494 NAIC Company Code....35211

BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

19.0K

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	0	0				0			0			
2.1 Allied lines.....	0	0				0			0			
2.2 Multiple peril crop.....	0	0				0			0			
2.3 Federal flood.....	0	0				0			0			
3. Farmowners multiple peril.....	0	0				0			0			
4. Homeowners multiple peril.....	0	0				0			0			
5.1 Commercial multiple peril (non-liability portion).....	0	0				0			0			
5.2 Commercial multiple peril (liability portion).....	0	0				0			0			
6. Mortgage guaranty.....	0	0				0			0			
8. Ocean marine.....	0	0				0			0			
9. Inland marine.....	0	0				0			0			
10. Financial guaranty.....	0	0				0			0			
11. Medical professional liability.....	0	0				0			0			
12. Earthquake.....	0	0				0			0			
13. Group accident and health (b).....	0	0				0			0			
14. Credit A & H (group and individual).....	0	0				0			0			
15.1 Collectively renewable A&H (b).....	0	0				0			0			
15.2 Non-cancelable A & H (b).....	0	0				0			0			
15.3 Guaranteed renewable A & H (b).....	0	0				0			0			
15.4 Non-renewable for stated reasons only (b).....	0	0				0			0			
15.5 Other accident only.....	0	0				0			0			
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0				0			0			
15.7 All other A & H (b).....	0	0				0			0			
15.8 Federal employees health benefits program premium (b).....	0	0				0			0			
16. Workers' compensation.....	0	0				0			0			
17.1 Other liability-occurrence.....	0	0				0			0			
17.2 Other liability-claims-made.....	0	0				0			0			
17.3 Excess workers' compensation.....	0	0				0			0			
18. Products liability.....	0	0				0			0			
19.1 Private passenger auto no-fault (personal injury protection).....	0	0				0			0			
19.2 Other private passenger auto liability.....	0	0				0			0			325
19.3 Commercial auto no-fault (personal injury protection).....	0	0				0			0			
19.4 Other commercial auto liability.....	0	0				0			0			
21.1 Private passenger auto physical damage.....	0	0				0			0			325
21.2 Commercial auto physical damage.....	0	0				0			0			
22. Aircraft (all perils).....	0	0				0			0			
23. Fidelity.....	0	0				0			0			
24. Surety.....	0	0				0			0			
26. Burglary and theft.....	0	0				0			0			
27. Boiler and machinery.....	0	0				0			0			
28. Credit.....	0	0				0			0			
30. Warranty.....	0	0				0			0			
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	650

DETAILS OF WRITE-INS

3401.....	0	0				0			0			
3402.....	0	0				0			0			
3403.....	0	0				0			0			
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$.....0.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

Sch. F-Pt. 1
NONE

Sch. F-Pt. 2
NONE

SCHEDULE F - PART 3

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

1 Federal ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	6 Reinsurance Premiums Ceded	Reinsurance Recoverable on										Reinsurance Payable		18 Net Amount Recoverable From Reinsurers Col. 15-[16+17]	19 Funds Held By Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 thru 14 Totals	16 Ceded Balances Payable	17 Other Amounts Due to Reinsurers			
Authorized Other U.S. Unaffiliated Insurers																			
31-0943862	22268....	Infinity Insurance Company.....	IN.....					117	43	95					255			255	
0599999	Total Authorized Other U.S. Unaffiliated Insurers.....				0	0	0	117	43	95	0	0	0	0	255	0	0	255	0
0999999	Total Authorized.....				0	0	0	117	43	95	0	0	0	0	255	0	0	255	0
2899999	Total Authorized, Unauthorized and Certified.....				0	0	0	117	43	95	0	0	0	0	255	0	0	255	0
9999999	Totals.....				0	0	0	117	43	95	0	0	0	0	255	0	0	255	0

Note A: Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000.

1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
(1).....		
(2).....		
(3).....		
(4).....		
(5).....		

Note B: Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated	
(1) Infinity Insurance Company.....	255		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
(2).....			Yes <input type="checkbox"/>	No <input type="checkbox"/>
(3).....			Yes <input type="checkbox"/>	No <input type="checkbox"/>
(4).....			Yes <input type="checkbox"/>	No <input type="checkbox"/>
(5).....			Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Sch. F-Pt. 4
NONE**

**Sch. F-Pt. 5
NONE**

**Sch. F-Pt. 6-Section 1
NONE**

**Sch. F-Pt. 6-Section 1 (continued)
NONE**

**Sch. F-Pt. 6-Section 2
NONE**

**Sch. F-Pt. 7
NONE**

**Sch. F-Pt. 8
NONE**

SCHEDULE F - PART 9

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	3,881,299		3,881,299
2. Premiums and considerations (Line 15).....			0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....			0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	51,048		51,048
6. Net amount recoverable from reinsurers.....		254,948	254,948
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	3,932,347	254,948	4,187,295
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....		254,948	254,948
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	20,068		20,068
11. Unearned premiums (Line 9).....			0
12. Advance premiums (Line 10).....			0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....			0
15. Funds held by company under reinsurance treaties (Line 13).....			0
16. Amounts withheld or retained by company for account of others (Line 14).....			0
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....			0
19. Total liabilities excluding protected cell business (Line 26).....	20,068	254,948	275,016
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	3,912,279	.XXX	3,912,279
22. Totals (Line 38).....	3,932,347	254,948	4,187,295

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?..Yes [] No [X]

If yes, give full explanation:

**Sch. H-Pt. 1
NONE**

**Sch. H-Pt. 2
NONE**

**Sch. H-Pt. 3
NONE**

**Sch. H-Pt. 4
NONE**

**Sch. H-Pt. 5
NONE**

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX								0	XXX
2. 2003.....	(12)		(12)	20		3		11		2	34	19
3. 2004.....	26		26	12		2		4			18	12
4. 2005.....	6	5	1	2	2	0				0	0	0
5. 2006.....	1	1	0								0	
6. 2007.....			0								0	
7. 2008.....			0								0	
8. 2009.....	0		0								0	
9. 2010.....			0								0	
10. 2011.....			0								0	
11. 2012.....			0								0	
12. Totals.....	XXX	XXX	XXX	34	2	5	0	15	0	2	52	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....											0		
2. 2003.....											0		
3. 2004.....											0		
4. 2005.....											0		
5. 2006.....											0		
6. 2007.....											0		
7. 2008.....											0		
8. 2009.....											0		
9. 2010.....											0		
10. 2011.....											0		
11. 2012.....											0		
12. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2003.....	34	0	34	(283.8)	0.0	(283.8)				0	0
3. 2004.....	18	0	18	70.0	0.0	70.0				0	0
4. 2005.....	2	2	0	37.3	44.2	3.1				0	0
5. 2006.....	0	0	0	0.0	0.0	0.0				0	0
6. 2007.....	0	0	0	0.0	0.0	0.0				0	0
7. 2008.....	0	0	0	0.0	0.0	0.0				0	0
8. 2009.....	0	0	0	0.0	0.0	0.0				0	0
9. 2010.....	0	0	0	0.0	0.0	0.0				0	0
10. 2011.....	0	0	0	0.0	0.0	0.0				0	0
11. 2012.....	0	0	0	0.0	0.0	0.0				0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX								0	XXX
2. 2003.....	1,616	18	1,598	960	20	79	(0)	211		8	1,231	290
3. 2004.....	1,033	77	956	534	18	48	0	161		3	725	184
4. 2005.....	583	6	577	308	6	15	1	78		3	393	151
5. 2006.....	577	4	573	305	1	17	1	85		3	405	150
6. 2007.....	636	2	634	371	2	20	1	76		4	464	175
7. 2008.....	555	2	553	359	32	26	6	71		4	417	161
8. 2009.....	511	1	509	368	53	62	41	66	1	3	401	160
9. 2010.....	562	1	561	364	(13)	27	2	66		4	468	164
10. 2011.....	638	1	637	402		24		65		3	491	148
11. 2012.....			0								0	
12. Totals.....	XXX	XXX	XXX	3,972	119	317	53	879	1	37	4,996	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....												0	
2. 2003.....												0	
3. 2004.....												0	
4. 2005.....												0	
5. 2006.....	47	47			6	6			4	4		0	1
6. 2007.....			27	27			3	3	2	2		0	
7. 2008.....	5	5	30	30	1	1	4	4	3	3		0	3
8. 2009.....	70	70	22	22	8	8	3	3	8	8		0	6
9. 2010.....			11	11			1	1	1	1		0	
10. 2011.....												0	
11. 2012.....												0	
12. Totals.....	122	122	90	90	15	15	11	11	18	18	0	0	10

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2003.....	1,251	20	1,231	77.4	111.1	77.0				0	0
3. 2004.....	743	18	725	71.9	23.7	75.8				0	0
4. 2005.....	401	7	393	68.7	121.2	68.2				0	0
5. 2006.....	464	59	405	80.4	1,470.6	70.7				0	0
6. 2007.....	499	35	464	78.5	1,744.9	73.2				0	0
7. 2008.....	498	81	417	89.8	4,055.1	75.4				0	0
8. 2009.....	607	206	401	118.9	18,986.8	78.8				0	0
9. 2010.....	470	2	468	83.6	182.8	83.4				0	0
10. 2011.....	491	0	491	77.0	0.0	77.2				0	0
11. 2012.....	0	0	0	0.0	0.0	0.0				0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2003.....	278.....	23.....	255.....	140.....	3.....	12.....	0.....	42.....		1.....	191.....	40.....
3. 2004.....	284.....	27.....	257.....	108.....	1.....	12.....	0.....	37.....		1.....	157.....	21.....
4. 2005.....	35.....	3.....	32.....	17.....	1.....	0.....	0.....	2.....		0.....	18.....	4.....
5. 2006.....	34.....	3.....	31.....	19.....	1.....	0.....	0.....	2.....		0.....	21.....	4.....
6. 2007.....	31.....	2.....	29.....	18.....	2.....	1.....	0.....	3.....		0.....	19.....	4.....
7. 2008.....	31.....	2.....	29.....	16.....	2.....	1.....	0.....	2.....		0.....	18.....	4.....
8. 2009.....	38.....	3.....	35.....	26.....	2.....	2.....	0.....	3.....		0.....	29.....	6.....
9. 2010.....	45.....	3.....	42.....	30.....	1.....	3.....	0.....	4.....		0.....	36.....	6.....
10. 2011.....	50.....	4.....	46.....	31.....		2.....		5.....		0.....	38.....	7.....
11. 2012.....			0.....								0.....	
12. Totals.....	XXX.....	XXX.....	XXX.....	405.....	12.....	34.....	0.....	101.....	0.....	3.....	527.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....											0.....		
2. 2003.....											0.....		
3. 2004.....											0.....		
4. 2005.....											0.....		
5. 2006.....											0.....		
6. 2007.....											0.....		
7. 2008.....											0.....		
8. 2009.....											0.....		
9. 2010.....											0.....		
10. 2011.....											0.....		
11. 2012.....											0.....		
12. Totals.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0.....	0.....
2. 2003.....	194.....	3.....	191.....	69.9.....	13.1.....	75.0.....				0.....	0.....
3. 2004.....	158.....	1.....	157.....	55.5.....	3.7.....	61.0.....				0.....	0.....
4. 2005.....	19.....	1.....	18.....	55.0.....	48.2.....	55.6.....				0.....	0.....
5. 2006.....	22.....	1.....	21.....	65.2.....	43.2.....	67.3.....				0.....	0.....
6. 2007.....	21.....	2.....	19.....	68.8.....	108.1.....	66.1.....				0.....	0.....
7. 2008.....	19.....	2.....	18.....	62.6.....	81.3.....	61.3.....				0.....	0.....
8. 2009.....	31.....	2.....	29.....	81.2.....	58.5.....	83.0.....				0.....	0.....
9. 2010.....	37.....	1.....	36.....	81.9.....	22.4.....	86.5.....				0.....	0.....
10. 2011.....	38.....	0.....	38.....	76.0.....	0.0.....	82.7.....				0.....	0.....
11. 2012.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....				0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

**Sch. P-Pt. 1D
NONE**

**Sch. P-Pt. 1E
NONE**

**Sch. P-Pt. 1F-Sn. 1
NONE**

**Sch. P-Pt. 1F-Sn. 2
NONE**

**Sch. P-Pt. 1G
NONE**

SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX								0	XXX
2. 2003.....	7	1	6	4				1				5
3. 2004.....	13	5	8	3	1			1				3
4. 2005.....			0	1		0						1
5. 2006.....			0	0								0
6. 2007.....			0									0
7. 2008.....			0									0
8. 2009.....			0									0
9. 2010.....			0									0
10. 2011.....			0									0
11. 2012.....			0									0
12. Totals.....	XXX	XXX	XXX	8	1	0	0	2	0	0	0	9

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....												0	
2. 2003.....												0	
3. 2004.....												0	
4. 2005.....												0	
5. 2006.....												0	
6. 2007.....												0	
7. 2008.....												0	
8. 2009.....												0	
9. 2010.....												0	
10. 2011.....												0	
11. 2012.....												0	
12. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2003.....	5	0	5	71.5	0.0	83.5				0	0
3. 2004.....	4	1	3	30.8	20.0	37.6				0	0
4. 2005.....	1	0	1	0.0	0.0	0.0				0	0
5. 2006.....	0	0	0	0.0	0.0	0.0				0	0
6. 2007.....	0	0	0	0.0	0.0	0.0				0	0
7. 2008.....	0	0	0	0.0	0.0	0.0				0	0
8. 2009.....	0	0	0	0.0	0.0	0.0				0	0
9. 2010.....	0	0	0	0.0	0.0	0.0				0	0
10. 2011.....	0	0	0	0.0	0.0	0.0				0	0
11. 2012.....	0	0	0	0.0	0.0	0.0				0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported-Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX								0	XXX
2. 2003.....			0								0	0
3. 2004.....			0								0	0
4. 2005.....			0								0	0
5. 2006.....			0								0	0
6. 2007.....			0								0	0
7. 2008.....			0								0	0
8. 2009.....			0								0	0
9. 2010.....			0								0	0
10. 2011.....			0								0	0
11. 2012.....			0								0	0
12. Totals.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....												0	
2. 2003.....												0	
3. 2004.....												0	
4. 2005.....												0	
5. 2006.....												0	
6. 2007.....												0	
7. 2008.....												0	
8. 2009.....												0	
9. 2010.....												0	
10. 2011.....												0	
11. 2012.....												0	
12. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	0

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	0	0
2. 2003.....	0	0	0	0.0	0.0	0.0				0	0
3. 2004.....	0	0	0	0.0	0.0	0.0				0	0
4. 2005.....	0	0	0	0.0	0.0	0.0				0	0
5. 2006.....	0	0	0	0.0	0.0	0.0				0	0
6. 2007.....	0	0	0	0.0	0.0	0.0				0	0
7. 2008.....	0	0	0	0.0	0.0	0.0				0	0
8. 2009.....	0	0	0	0.0	0.0	0.0				0	0
9. 2010.....	0	0	0	0.0	0.0	0.0				0	0
10. 2011.....	0	0	0	0.0	0.0	0.0				0	0
11. 2012.....	0	0	0	0.0	0.0	0.0				0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

**SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported- Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
2. 2011.....	.....	.....	.....0	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
3. 2012.....	.....	.....	.....0	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
4. Totals....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
2. 2011...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
3. 2012...	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
4. Totals..	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....0	.....0
2. 2011	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
3. 2012	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....	.....	.....	.....0	.....0
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....0	.....0

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported-Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....(3).....	.....(3).....	.....2.....	.....2.....	.....	.....	.....	.....0.....	.....XXX.....
2. 2011.....	.....337.....	.....1.....	.....336.....	.....192.....	.....	.....5.....	.....	.....	.....37.....	.....29.....	.....234.....	.....130.....
3. 2012.....	.....	.....	.....0.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
4. Totals....XXX.....XXX.....XXX.....189.....(3).....7.....2.....37.....0.....29.....234.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
2. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
3. 2012.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
4. Totals....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....	.....0.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....0.....	.....0.....
2. 2011	.....234.....	.....0.....	.....234.....	.....69.4.....	.....0.0.....	.....69.6.....	.....	.....	.....	.....0.....	.....0.....
3. 2012	.....0.....	.....0.....	.....0.....	.....0.0.....	.....0.0.....	.....0.0.....	.....	.....	.....	.....0.....	.....0.....
4. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0.....	.....0.....	.....XXX.....	.....0.....	.....0.....

**Sch. P-Pt. 1K
NONE**

**Sch. P-Pt. 1L
NONE**

**Sch. P-Pt. 1M
NONE**

**Sch. P-Pt. 1N
NONE**

**Sch. P-Pt. 1O
NONE**

**Sch. P-Pt. 1P
NONE**

**Sch. P-Pt. 1R-Sn. 1
NONE**

**Sch. P-Pt. 1R-Sn. 2
NONE**

**Sch. P-Pt. 1S
NONE**

**Sch. P-Pt. 1T
NONE**

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	One Year	Two Year
1. Prior.....	30	19	19	18	18	18	19	19	19	19	.0	1
2. 2003.....	24	23	23	23	23	23	23	23	23	23	.0	0
3. 2004.....	XXX	13	14	14	14	14	14	14	14	14	.0	0
4. 2005.....	XXX	XXX	3	1	1		.0	.0	.0	.0	(0)	0
5. 2006.....	XXX	XXX	XXX				.0				.0	0
6. 2007.....	XXX	XXX	XXX	XXX							.0	0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	(0) 1

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	1,424	1,576	1,582	1,581	1,589	1,594	1,589	1,588	1,589	1,589	.0	1
2. 2003.....	1,075	1,037	1,031	1,030	1,029	1,023	1,021	1,020	1,020	1,020	.0	(0)
3. 2004.....	XXX	595	591	584	581	573	567	564	563	563	.0	(1)
4. 2005.....	XXX	XXX	361	350	342	330	322	318	315	315	.0	(2)
5. 2006.....	XXX	XXX	XXX	360	354	338	327	323	320	320	.0	(3)
6. 2007.....	XXX	XXX	XXX	XXX	412	416	403	392	388	388	.0	(4)
7. 2008.....	XXX	XXX	XXX	XXX	XXX	371	367	350	346	346	.0	(4)
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	358	337	336	336	.0	(1)
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	387	402	402	.0	15
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	427	427	.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	.0 0

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	106	134	134	135	134	144	144	144	144	144	.0	(0)
2. 2003.....	138	150	151	152	150	149	149	149	149	149	.0	(0)
3. 2004.....	XXX	118	120	120	120	121	120	120	120	120	.0	(0)
4. 2005.....	XXX	XXX	19	23	19	16	16	16	15	15	.0	(0)
5. 2006.....	XXX	XXX	XXX	25	24	23	20	19	18	18	.0	(0)
6. 2007.....	XXX	XXX	XXX	XXX	22	19	18	17	17	17	.0	(1)
7. 2008.....	XXX	XXX	XXX	XXX	XXX	20	18	15	15	15	.0	(0)
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	30	27	26	26	.0	(1)
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	33	33	.0	(2)
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	33	.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	.0 (4)

**SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....											.0	0
2. 2003.....											.0	0
3. 2004.....	XXX										.0	0
4. 2005.....	XXX	XXX									.0	0
5. 2006.....	XXX	XXX	XXX								.0	0
6. 2007.....	XXX	XXX	XXX	XXX							.0	0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	.0 0

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....											.0	0
2. 2003.....											.0	0
3. 2004.....	XXX										.0	0
4. 2005.....	XXX	XXX									.0	0
5. 2006.....	XXX	XXX	XXX								.0	0
6. 2007.....	XXX	XXX	XXX	XXX							.0	0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	.0 0

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	One Year	Two Year
1. Prior.....											.0	0
2. 2003.....											.0	0
3. 2004.....	XXX										.0	0
4. 2005.....	XXX	XXX									.0	0
5. 2006.....	XXX	XXX	XXX								.0	0
6. 2007.....	XXX	XXX	XXX	XXX							.0	0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											.0	0

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....											.0	0
2. 2003.....											.0	0
3. 2004.....	XXX										.0	0
4. 2005.....	XXX	XXX									.0	0
5. 2006.....	XXX	XXX	XXX								.0	0
6. 2007.....	XXX	XXX	XXX	XXX							.0	0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											.0	0

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER & MACHINERY)

1. Prior.....											.0	0
2. 2003.....											.0	0
3. 2004.....	XXX										.0	0
4. 2005.....	XXX	XXX									.0	0
5. 2006.....	XXX	XXX	XXX								.0	0
6. 2007.....	XXX	XXX	XXX	XXX							.0	0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											.0	0

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	27	30	30	30	30	30	30	30	30	30	.0	0
2. 2003.....	6	4	4	4	4	4	4	4	4	4	.0	(0)
3. 2004.....	XXX	3	3	3	3	2	2	2	2	2	.0	0
4. 2005.....	XXX	XXX			1	1	1	1	1	1	.0	0
5. 2006.....	XXX	XXX	XXX				0	0	0	0	.0	0
6. 2007.....	XXX	XXX	XXX	XXX							.0	0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											.0	0

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....											.0	0
2. 2003.....											.0	0
3. 2004.....	XXX										.0	0
4. 2005.....	XXX	XXX									.0	0
5. 2006.....	XXX	XXX	XXX								.0	0
6. 2007.....	XXX	XXX	XXX	XXX							.0	0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											.0	0

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	One Year	Two Year
1. Prior....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	(0)	0
2. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
3. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
4. Totals											(0)	0

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	12	12	0	(1)
2. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	197	197	0	XXX
3. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
4. Totals											0	(1)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior....	XXX	XXX	XXX	XXX	NONE							0	0
2. 2011....	XXX	XXX	XXX	XXX	NONE				XXX			0	XXX
3. 2012....	XXX	XXX	XXX	XXX	NONE				XXX	XXX		XXX	XXX
4. Totals											0	0	

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior....	XXX	XXX	XXX	XXX	NONE							0	0
2. 2011....	XXX	XXX	XXX	XXX	NONE				XXX			0	XXX
3. 2012....	XXX	XXX	XXX	XXX	NONE				XXX	XXX		XXX	XXX
4. Totals											0	0	

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior....											0	0	
2. 2003....											0	0	
3. 2004....	XXX										0	0	
4. 2005....	XXX	XXX									0	0	
5. 2006....	XXX	XXX	XXX								0	0	
6. 2007....	XXX	XXX	XXX	XXX	NONE							0	0
7. 2008....	XXX	XXX	XXX	XXX	XXX						0	0	
8. 2009....	XXX	XXX	XXX	XXX	XXX	XXX					0	0	
9. 2010....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0	
10. 2011....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX	
11. 2012....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	
12. Totals											0	0	

**Sch. P-Pt. 2N
NONE**

**Sch. P-Pt. 2O
NONE**

**Sch. P-Pt. 2P
NONE**

**Sch. P-Pt. 2R-Sn. 1
NONE**

**Sch. P-Pt. 2R-Sn. 2
NONE**

**Sch. P-Pt. 2S
NONE**

**Sch. P-Pt. 2T
NONE**

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012		
1. Prior.....	000	4	18	18	18	18	18	19	19	19	3	
2. 2003.....	13	20	23	23	23	23	23	23	23	23	17	2
3. 2004.....	XXX	9	14	14	14	14	14	14	14	14	10	2
4. 2005.....	XXX	XXX					0	0	0	0	0	0
5. 2006.....	XXX	XXX	XXX									
6. 2007.....	XXX	XXX	XXX	XXX								
7. 2008.....	XXX	XXX	XXX	XXX	XXX							
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	000	722	1,497	1,540	1,555	1,579	1,581	1,583	1,589	1,589	240	152
2. 2003.....	361	630	975	1,003	1,013	1,017	1,019	1,019	1,020	1,020	199	91
3. 2004.....	XXX	211	493	535	554	560	561	563	563	563	121	63
4. 2005.....	XXX	XXX	137	255	295	308	313	314	315	315	80	70
5. 2006.....	XXX	XXX	XXX	146	261	300	311	315	320	320	79	69
6. 2007.....	XXX	XXX	XXX	XXX	178	326	362	375	388	388	95	79
7. 2008.....	XXX	XXX	XXX	XXX	XXX	165	285	319	346	346	86	72
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	154	271	336	336	87	67
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	182	402	402	89	75
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	427	427	70	78
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	000	56	130	134	134	144	144	144	144	144	24	15
2. 2003.....	42	85	145	148	149	149	149	149	149	149	23	17
3. 2004.....	XXX	43	112	115	118	119	119	119	120	120	14	7
4. 2005.....	XXX	XXX	5	11	13	14	15	15	15	15	3	1
5. 2006.....	XXX	XXX	XXX	7	13	16	17	18	18	18	3	1
6. 2007.....	XXX	XXX	XXX	XXX	6	11	13	15	17	17	3	1
7. 2008.....	XXX	XXX	XXX	XXX	XXX	6	11	13	15	15	3	1
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	9	17	26	26	3	2
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	33	33	4	2
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	33	4	3
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	000										0	0
2. 2003.....												
3. 2004.....	XXX											
4. 2005.....	XXX	XXX										
5. 2006.....	XXX	XXX	XXX									
6. 2007.....	XXX	XXX	XXX	XXX								
7. 2008.....	XXX	XXX	XXX	XXX	XXX							
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000											
2. 2003.....												
3. 2004.....	XXX											
4. 2005.....	XXX	XXX										
5. 2006.....	XXX	XXX	XXX									
6. 2007.....	XXX	XXX	XXX	XXX								
7. 2008.....	XXX	XXX	XXX	XXX	XXX							
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012			
1. Prior.....	.000												
2. 2003.....													
3. 2004.....	XXX												
4. 2005.....	XXX	XXX											
5. 2006.....	XXX	XXX	XXX										
6. 2007.....	XXX	XXX	XXX	XXX									
7. 2008.....	XXX	XXX	XXX	XXX	XXX								
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	.000												
2. 2003.....													
3. 2004.....	XXX												
4. 2005.....	XXX	XXX											
5. 2006.....	XXX	XXX	XXX										
6. 2007.....	XXX	XXX	XXX	XXX									
7. 2008.....	XXX	XXX	XXX	XXX	XXX								
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	.000										XXX	XXX
2. 2003.....											XXX	XXX
3. 2004.....	XXX										XXX	XXX
4. 2005.....	XXX	XXX									XXX	XXX
5. 2006.....	XXX	XXX	XXX								XXX	XXX
6. 2007.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2008.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	.000	9	29	30	30	30	30	30	30	30		
2. 2003.....			4	4	4	4	4	4	4	4		
3. 2004.....	XXX	(1)	2	2	2	2	2	2	2	2		
4. 2005.....	XXX	XXX			1	1	1	1	1	1		
5. 2006.....	XXX	XXX	XXX				0	0	0	0		
6. 2007.....	XXX	XXX	XXX	XXX								
7. 2008.....	XXX	XXX	XXX	XXX	XXX							
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....	.000											
2. 2003.....												
3. 2004.....	XXX											
4. 2005.....	XXX	XXX										
5. 2006.....	XXX	XXX	XXX									
6. 2007.....	XXX	XXX	XXX	XXX								
7. 2008.....	XXX	XXX	XXX	XXX	XXX							
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012		
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	0	0	XXX	XXX
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	12	12	68	43
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	197	197	80	50
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	NONE			000			XXX	XXX		
2. 2011.....	XXX	XXX	XXX	XXX				XXX	XXX	XXX			XXX	XXX
3. 2012.....	XXX	XXX	XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	NONE			000			XXX	XXX		
2. 2011.....	XXX	XXX	XXX	XXX				XXX	XXX	XXX			XXX	XXX
3. 2012.....	XXX	XXX	XXX	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000				NONE							XXX	XXX
2. 2003.....										XXX	XXX		
3. 2004.....	XXX									XXX	XXX		
4. 2005.....	XXX	XXX								XXX	XXX		
5. 2006.....	XXX	XXX	XXX							XXX	XXX		
6. 2007.....	XXX	XXX	XXX	XXX						XXX	XXX		
7. 2008.....	XXX	XXX	XXX	XXX						XXX	XXX		
8. 2009.....	XXX	XXX	XXX	XXX						XXX	XXX		
9. 2010.....	XXX	XXX	XXX	XXX						XXX	XXX		
10. 2011.....	XXX	XXX	XXX	XXX						XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX						XXX	XXX		

**Sch. P-Pt. 3N
NONE**

**Sch. P-Pt. 3O
NONE**

**Sch. P-Pt. 3P
NONE**

**Sch. P-Pt. 3R-Sn. 1
NONE**

**Sch. P-Pt. 3R-Sn. 2
NONE**

**Sch. P-Pt. 3S
NONE**

**Sch. P-Pt. 3T
NONE**

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
1. Prior.....	11	4					0			
2. 2003.....	6	1								
3. 2004.....	XXX	2								
4. 2005.....	XXX	XXX	3	1			0			
5. 2006.....	XXX	XXX	XXX				0			
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	316	267	27	10	4	4	1	1		
2. 2003.....	334	160	20	9	7	3	1	1		
3. 2004.....	XXX	176	39	14	14	8	3	1		
4. 2005.....	XXX	XXX	90	36	23	14	6	2		
5. 2006.....	XXX	XXX	XXX	89	42	20	9	4		
6. 2007.....	XXX	XXX	XXX	XXX	101	45	23	9		
7. 2008.....	XXX	XXX	XXX	XXX	XXX	94	44	14		
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	98	27		
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	85		
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	21	35	2				0	0		
2. 2003.....	41	31	2	3	1		0	0		
3. 2004.....	XXX	29	3	1	1	1	0	0		
4. 2005.....	XXX	XXX	9	6	3	1	0	0		
5. 2006.....	XXX	XXX	XXX	12	6	4	2	0		
6. 2007.....	XXX	XXX	XXX	XXX	11	4	2	1		
7. 2008.....	XXX	XXX	XXX	XXX	XXX	9	4	1		
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	13	4		
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15		
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX	NONE						
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX	NONE						
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	12	13					0	0		
2. 2003.....	6	4					0	0		
3. 2004.....	XXX	4	1	1	1		0	0		
4. 2005.....	XXX	XXX					0			
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.23		
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2003.....										
3. 2004.....	XXX									
4. 2005.....	XXX	XXX								
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**Sch. P-Pt. 4N
NONE**

**Sch. P-Pt. 4O
NONE**

**Sch. P-Pt. 4P
NONE**

**Sch. P-Pt. 4R-Sn. 1
NONE**

**Sch. P-Pt. 4R-Sn. 2
NONE**

**Sch. P-Pt. 4S
NONE**

**Sch. P-Pt. 4T
NONE**

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	3						0	0		
2. 2003.....	14	17	17	17	17	17	17	17	17	17
3. 2004.....	XXX	10	10	10	10	10	10	10	10	10
4. 2005.....	XXX	XXX						0	0	0
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	1	1					0	0		
2. 2003.....	4						0	0		
3. 2004.....	XXX	2					0	0		
4. 2005.....	XXX	XXX					0	0		
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	4		(1)				0		(0)	
2. 2003.....	18	19	19	19	19	19	19	19	19	19
3. 2004.....	XXX	14	12	12	12	12	12	12	12	12
4. 2005.....	XXX	XXX					0	0	0	0
5. 2006.....	XXX	XXX	XXX							
6. 2007.....	XXX	XXX	XXX	XXX						
7. 2008.....	XXX	XXX	XXX	XXX	XXX					
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	116	44	6	2			0	0		
2. 2003.....	126	191	197	199	199	199	199	199	199	199
3. 2004.....	XXX	91	114	119	121	121	121	121	121	121
4. 2005.....	XXX	XXX	50	74	79	80	80	80	80	80
5. 2006.....	XXX	XXX	XXX	50	74	78	79	79	79	79
6. 2007.....	XXX	XXX	XXX	XXX	61	89	93	94	95	95
7. 2008.....	XXX	XXX	XXX	XXX	XXX	55	78	81	82	86
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	54	76	81	87
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	88	89
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70	70
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	79	33	3				0	0		
2. 2003.....	67	16	2	1			0	0		
3. 2004.....	XXX	30	5	2	1		0	0		
4. 2005.....	XXX	XXX	17	5	2		0	0		
5. 2006.....	XXX	XXX	XXX	27	5	1	0	0		1
6. 2007.....	XXX	XXX	XXX	XXX	28	5	2	1		
7. 2008.....	XXX	XXX	XXX	XXX	XXX	24	4	1		3
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	22	4		6
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26		
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	99	26	(24)	(1)			0	0	(0)	
2. 2003.....	246	297	290	291	290	290	290	290	290	290
3. 2004.....	XXX	173	182	184	185	184	184	184	184	184
4. 2005.....	XXX	XXX	127	149	151	150	151	151	151	151
5. 2006.....	XXX	XXX	XXX	136	148	148	149	149	149	150
6. 2007.....	XXX	XXX	XXX	XXX	160	173	174	174	175	175
7. 2008.....	XXX	XXX	XXX	XXX	XXX	140	150	151	151	161
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	135	145	145	160
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	156	164	164
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	148	148
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	10	3					0	(0)		
2. 2003.....	16	23	23	23	23	23	23	23	23	23
3. 2004.....	XXX	13	14	14	14	14	14	14	14	14
4. 2005.....	XXX	XXX	2	3	3	3	3	3	3	3
5. 2006.....	XXX	XXX	XXX	2	3	3	3	3	3	3
6. 2007.....	XXX	XXX	XXX	XXX	2	3	3	3	3	3
7. 2008.....	XXX	XXX	XXX	XXX	XXX	2	3	3	3	3
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	2	3	3	3
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	4	4
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	5	3					0			
2. 2003.....	11	4					0			
3. 2004.....	XXX	7					0			
4. 2005.....	XXX	XXX	1				0			
5. 2006.....	XXX	XXX	XXX	1			0			
6. 2007.....	XXX	XXX	XXX	XXX	1		0			
7. 2008.....	XXX	XXX	XXX	XXX	XXX	1	0			
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	1			
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1		
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....	6	1	(3)				0	(0)		
2. 2003.....	39	44	40	40	40	40	40	40	40	40
3. 2004.....	XXX	27	21	21	21	21	21	21	21	21
4. 2005.....	XXX	XXX	4	4	4	4	4	4	4	4
5. 2006.....	XXX	XXX	XXX	4	4	4	4	4	4	4
6. 2007.....	XXX	XXX	XXX	XXX	4	4	4	4	4	4
7. 2008.....	XXX	XXX	XXX	XXX	XXX	4	4	4	4	4
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	5	6	6	6
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	6	6
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	7
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**Sch. P-Pt. 5D-Sn. 1
NONE**

**Sch. P-Pt. 5D-Sn. 2
NONE**

**Sch. P-Pt. 5D-Sn. 3
NONE**

**Sch. P-Pt. 5E-Sn. 1
NONE**

**Sch. P-Pt. 5E-Sn. 2
NONE**

**Sch. P-Pt. 5E-Sn. 3
NONE**

**Sch. P-Pt. 5F-Sn. 1A
NONE**

**Sch. P-Pt. 5F-Sn. 2A
NONE**

**Sch. P-Pt. 5F-Sn. 3A
NONE**

**Sch. P-Pt. 5F-Sn. 1B
NONE**

**Sch. P-Pt. 5F-Sn. 2B
NONE**

**Sch. P-Pt. 5F-Sn. 3B
NONE**

**Sch. P-Pt. 5H-Sn. 1A
NONE**

**Sch. P-Pt. 5H-Sn. 2A
NONE**

**Sch. P-Pt. 5H-Sn. 3A
NONE**

**Sch. P-Pt. 5H-Sn. 1B
NONE**

**Sch. P-Pt. 5H-Sn. 2B
NONE**

**Sch. P-Pt. 5H-Sn. 3B
NONE**

Sch. P-Pt. 5R-Sn. 1A
NONE

Sch. P-Pt. 5R-Sn. 2A
NONE

Sch. P-Pt. 5R-Sn. 3A
NONE

Sch. P-Pt. 5R-Sn. 1B
NONE

Sch. P-Pt. 5R-Sn. 2B
NONE

Sch. P-Pt. 5R-Sn. 3B
NONE

Sch. P-Pt. 5T-Sn. 1
NONE

Sch. P-Pt. 5T-Sn. 2
NONE

Sch. P-Pt. 5T-Sn. 3
NONE

SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....	278	278	278	278	278	278	278	278	278	278	278
3. 2004.....	XXX	284	284	284	284	284	284	284	284	284	284
4. 2005.....	XXX	XXX	35	35	35	35	35	35	35	35	35
5. 2006.....	XXX	XXX	XXX	34	34	34	34	34	34	34	34
6. 2007.....	XXX	XXX	XXX	XXX	31	31	31	31	31	31	31
7. 2008.....	XXX	XXX	XXX	XXX	XXX	31	31	31	31	31	31
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	38	38	38	38	38
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45	45	45	45
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50	50	50
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prems.(P-Pt 1).....	278	284	35	34	31	31	38	45	50	XXX	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....	23	23	23	23	23	23	23	23	23	23	23
3. 2004.....	XXX	27	27	27	27	27	27	27	27	27	27
4. 2005.....	XXX	XXX	3	3	3	3	3	3	3	3	3
5. 2006.....	XXX	XXX	XXX	3	3	3	3	3	3	3	3
6. 2007.....	XXX	XXX	XXX	XXX	2	2	2	2	2	2	2
7. 2008.....	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2	2
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3	3	3
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3	3
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prems.(P-Pt 1).....	23	27	3	3	2	2	3	3	4	XXX	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....											0
3. 2004.....	XXX										0
4. 2005.....	XXX	XXX									0
5. 2006.....	XXX	XXX	XXX								0
6. 2007.....	XXX	XXX	XXX	XXX							0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prems.(P-Pt 1).....											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....											0
3. 2004.....	XXX										0
4. 2005.....	XXX	XXX									0
5. 2006.....	XXX	XXX	XXX								0
6. 2007.....	XXX	XXX	XXX	XXX							0
7. 2008.....	XXX	XXX	XXX	XXX	XXX						0
8. 2009.....	XXX	XXX	XXX	XXX	XXX	XXX					0
9. 2010.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
11. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Prems.(P-Pt 1).....											XXX

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....											0
3. 2004.....	.XXX										0
4. 2005.....	.XXX	.XXX									0
5. 2006.....	.XXX	.XXX	.XXX								0
6. 2007.....	.XXX	.XXX	.XXX	.XXX							0
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX						0
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					0
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				0
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			0
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		0
12. Total.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0
13. Earned Prems.(P-Pt 1).....											.XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....											0
3. 2004.....	.XXX										0
4. 2005.....	.XXX	.XXX									0
5. 2006.....	.XXX	.XXX	.XXX								0
6. 2007.....	.XXX	.XXX	.XXX	.XXX							0
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX						0
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					0
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				0
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			0
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		0
12. Total.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0
13. Earned Prems.(P-Pt 1).....											.XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....	.7	.7	.7	.7	.7	.7	.7	.7	.7	.7	7
3. 2004.....	.XXX	.13	.13	.13	.13	.13	.13	.13	.13	.13	13
4. 2005.....	.XXX	.XXX									0
5. 2006.....	.XXX	.XXX	.XXX								0
6. 2007.....	.XXX	.XXX	.XXX	.XXX							0
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX						0
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					0
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				0
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			0
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		0
12. Total.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0
13. Earned Prems.(P-Pt 1).....	.7	.13									.XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	
1. Prior.....											0
2. 2003.....	.1	.1	.1	.1	.1	.1	.1	.1	.1	.1	1
3. 2004.....	.XXX	.5	.5	.5	.5	.5	.5	.5	.5	.5	5
4. 2005.....	.XXX	.XXX									0
5. 2006.....	.XXX	.XXX	.XXX								0
6. 2007.....	.XXX	.XXX	.XXX	.XXX							0
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX						0
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX					0
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				0
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			0
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		0
12. Total.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0
13. Earned Prems.(P-Pt 1).....	.1	.5									.XXX

Sch. P-Pt. 6H-Sn. 1B

NONE

Sch. P-Pt. 6H-Sn. 2B

NONE

Sch. P-Pt. 6M-Sn. 1

NONE

Sch. P-Pt. 6M-Sn. 2

NONE

Sch. P-Pt. 6N-Sn. 1

NONE

Sch. P-Pt. 6N-Sn. 2

NONE

Sch. P-Pt. 6O-Sn. 1

NONE

Sch. P-Pt. 6O-Sn. 2

NONE

Sch. P-Pt. 6R-Sn. 1A

NONE

Sch. P-Pt. 6R-Sn. 2A

NONE

Sch. P-Pt. 6R-Sn. 1B

NONE

Sch. P-Pt. 6R-Sn. 2B

NONE

Sch. P-Pt. 7A-Sn. 1

NONE

Sch. P-Pt. 7A-Sn. 2

NONE

Sch. P-Pt. 7A-Sn. 3

NONE

Sch. P-Pt. 7A-Sn. 4

NONE

Sch. P-Pt. 7A-Sn. 5

NONE

Sch. P-Pt. 7B-Sn. 1

NONE

Sch. P-Pt. 7B-Sn. 2

NONE

Sch. P-Pt. 7B-Sn. 3

NONE

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported At Year End (\$000 Omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	.XXX									
4. 2005.....	.XXX	.XXX								
5. 2006.....	.XXX	.XXX	.XXX							
6. 2007.....	.XXX	.XXX	.XXX	.XXX						
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	.XXX									
4. 2005.....	.XXX	.XXX								
5. 2006.....	.XXX	.XXX	.XXX							
6. 2007.....	.XXX	.XXX	.XXX	.XXX						
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 6

Years in Which Policies Were Issued	Incurred Adjustable Commissions Reported At Year End (\$000 Omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	.XXX									
4. 2005.....	.XXX	.XXX								
5. 2006.....	.XXX	.XXX	.XXX							
6. 2007.....	.XXX	.XXX	.XXX	.XXX						
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments At Year End (\$000 Omitted)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior.....										
2. 2003.....										
3. 2004.....	.XXX									
4. 2005.....	.XXX	.XXX								
5. 2006.....	.XXX	.XXX	.XXX							
6. 2007.....	.XXX	.XXX	.XXX	.XXX						
7. 2008.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2009.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2010.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2011.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2012.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims-Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims-Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
 If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions.
- 1.2 What is the total amount of the reserve for that provision (DDR reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No []
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No []
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A []
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior.....	.....	.....
1.602	2003.....	.....	.....
1.603	2004.....	.....	.....
1.604	2005.....	.....	.....
1.605	2006.....	.....	.....
1.606	2007.....	.....	.....
1.607	2008.....	.....	.....
1.608	2009.....	.....	.....
1.609	2010.....	.....	.....
1.610	2011.....	.....	.....
1.611	2012.....	.....	.....
1.612	Totals.....	.....0	.....0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for: (in thousands of dollars)
- 5.1 Fidelity
- 5.2 Surety

6. Claim count information is reported per claim or per claimant. (Indicate which). PER CLAIMANT
- If not the same in all years, explain in Interrogatory 7.

- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [X] No []
- 7.2 An extended statement may be attached.

Effective, December 31, 2011, the Company is a party to a reinsurance agreement with Infinity Insurance Company (NAIC #22268) whereby the Company cedes 100% of its liability with respect to all insurance business written or assumed by the Company through December 31, 2011.

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	Direct Business Only					6 Totals
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama.....AL						0
2. Alaska.....AK						0
3. Arizona.....AZ						0
4. Arkansas.....AR						0
5. California.....CA						0
6. Colorado.....CO						0
7. Connecticut.....CT						0
8. Delaware.....DE						0
9. District of Columbia.....DC						0
10. Florida.....FL						0
11. Georgia.....GA						0
12. Hawaii.....HI						0
13. Idaho.....ID						0
14. Illinois.....IL						0
15. Indiana.....IN						0
16. Iowa.....IA						0
17. Kansas.....KS						0
18. Kentucky.....KY						0
19. Louisiana.....LA						0
20. Maine.....ME						0
21. Maryland.....MD						0
22. Massachusetts.....MA						0
23. Michigan.....MI						0
24. Minnesota.....MN						0
25. Mississippi.....MS						0
26. Missouri.....MO						0
27. Montana.....MT						0
28. Nebraska.....NE						0
29. Nevada.....NV						0
30. New Hampshire.....NH						0
31. New Jersey.....NJ						0
32. New Mexico.....NM						0
33. New York.....NY						0
34. North Carolina.....NC						0
35. North Dakota.....ND						0
36. Ohio.....OH						0
37. Oklahoma.....OK						0
38. Oregon.....OR						0
39. Pennsylvania.....PA						0
40. Rhode Island.....RI						0
41. South Carolina.....SC						0
42. South Dakota.....SD						0
43. Tennessee.....TN						0
44. Texas.....TX						0
45. Utah.....UT						0
46. Vermont.....VT						0
47. Virginia.....VA						0
48. Washington.....WA						0
49. West Virginia.....WV						0
50. Wisconsin.....WI						0
51. Wyoming.....WY						0
52. American Samoa.....AS						0
53. Guam.....GU						0
54. Puerto Rico.....PR						0
55. US Virgin Islands.....VI						0
56. Northern Mariana Islands.....MP						0
57. Canada.....CAN						0
58. Aggregate Other Alien.....OT						0
59. Totals.....	0	0	0	0	0	0

NONE

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 *
Members														
		00000.....					Franklin Holdings, Ltd.....	BMU.....	UIP.....					
		00000.....					Franklin Holdings II, Ltd.....	BMU.....	UIP.....	Franklin Holdings, Ltd.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	05-0539572				James River Group, Inc.....	DE.....	UIP.....	Franklin Holdings II, Ltd.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	AA-3190958				JRG Reinsurance Company, Ltd.....	BMU.....	IA.....	Franklin Holdings II, Ltd.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	35-2242298				Potomac Risk Services, Inc.....	VA.....	NIA.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	12203.....	22-2824607				James River Insurance Company.....	OH.....	IA.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	03-0490731				James River Management Company.....	DE.....	NIA.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	13685.....	20-8946040				James River Casualty Company.....	VA.....	IA.....	James River Insurance Company.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	31925.....	42-1019055				Stonewood National Insurance Company.....	OH.....	UDP.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
		00000.....	20-0067235				Stonewood Insurance Management Co.....	DE.....	NIA.....	James River Group, Inc.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	11828.....	20-0328998				Stonewood Insurance Company.....	NC.....	IA.....	Stonewood National Insurance Company.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	
3494.....	James River Insurance Group.....	35211.....	31-1277903				Stonewood General Insurance Company.....	OH.....		Stonewood National Insurance Company.....	Ownership.....	...100.000	Franklin Holdings, Ltd.....	

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000.....	05-0539572.....	James River Group, Inc.....	29,000,000	(36,355,542)			7,917,701			12,503,819	13,065,978	
12203.....	22-2824607.....	James River Insurance Company.....	(29,000,000)				(31,052,875)	(7,826,608)		(12,503,819)	(80,383,302)	226,353,918
00000.....	03-0490731.....	James River Management Company, Inc.....					23,273,227				23,273,227	
13685.....	20-8946040.....	James River Casualty Company.....					(405,134)	479,779			74,645	2,027,761
11828.....	20-0328998.....	Stonewood Insurance Company.....					(6,730,929)	9,025,380			2,294,451	47,131,900
00000.....	20-0067235.....	Stonewood Insurance Management Company, Inc.....					6,730,929				6,730,929	
31925.....	42-1019055.....	Stonewood National Insurance Company.....		36,355,542			250,117				36,605,659	
35211.....	31-1277903.....	Stonewood General Insurance Company.....					16,964				16,964	
00000.....	AA-3190958.....	JRG Reinsurance Company, Ltd.....						(1,678,551)			(1,678,551)	(275,513,579)
9999999.....	Control Totals.....		0	0	0	0	0	0	XXX	0	0	0

Stonewood General Insurance Company 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 being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

1. Will an actuarial opinion be filed by March 1?
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?
3. Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?
4. Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?

Responses

WAIVED

YES

YES

YES

APRIL FILING

5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?
6. Will the Management's Discussion and Analysis be filed by April 1?
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?

YES

YES

YES

MAY FILING

8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1?

YES

JUNE FILING

9. Will an audited financial report be filed by June 1?
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?

SEE EXPLANATION

SEE EXPLANATION

AUGUST FILING

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?

SEE EXPLANATION

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

MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?
24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
25. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?
26. 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?
27. 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?

SEE EXPLANATION

NO

NO

NO

NO

NO

SEE EXPLANATION

NO

WAIVED

YES

NO

NO

NO

SEE EXPLANATION

SEE EXPLANATION

SEE EXPLANATION

SEE EXPLANATION

APRIL FILING

28. Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?
29. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?
30. Will the Accident and Health Policy Experience Exhibit be filed by April 1?
31. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?
32. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?

NO

NO

NO

NO

NO

AUGUST FILING

33. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

SEE EXPLANATION

Annual Statement for the year 2012 of the **Stonewood General Insurance Company**
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 being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

EXPLANATIONS:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
9. Company has requested waiver.
10. Company has requested waiver.
11. Company has requested waiver.
12. Company does not meet requirements.
- 13.
- 14.
- 15.
- 16.
- 17.
18. Does not apply
- 19.
- 20.
- 21.
- 22.
- 23.
- 24.
25. A request for relief has not been requested.
26. A request for relief has not been requested.
27. A request for relief has not been requested.

BAR CODE:



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

28.



29.



30.



31.



32.



33. Company does not meet the minimum premium requirements for filing.



**Overflow Page
NONE**

**Overflow Page
NONE**

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