



ANNUAL STATEMENT

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

GREAT AMERICAN CASUALTY INSURANCE COMPANY

NAIC Group Code.....84, 84 (Current Period) (Prior Period)	NAIC Company Code..... 39896	Employer's ID Number..... 61-0983091
Organized under the Laws of OHIO	State of Domicile or Port of Entry OHIO	Country of Domicile US
Incorporated/Organized..... February 17, 1981	Commenced Business..... March 3, 1983	
Statutory Home Office	301 E Fourth Street..... Cincinnati OH US 45202 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	
Main Administrative Office	301 E Fourth Street..... Cincinnati OH US..... 45202 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	513-369-5000 <i>(Area Code) (Telephone Number)</i>
Mail Address	301 E Fourth Street..... Cincinnati OH US 45202 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>	
Primary Location of Books and Records	301 E Fourth Street..... Cincinnati OH US 45202 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	513-369-5000 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address	www.GreatAmericanInsurance.com	
Statutory Statement Contact	Robert James Schwartz <i>(Name)</i> BSchwartz@GAIC.com <i>(E-Mail Address)</i>	513-369-5092 <i>(Area Code) (Telephone Number) (Extension)</i> 513-369-3873 <i>(Fax Number)</i>

OFFICERS

Name	Title	Name	Title
1. Donald Dumford Larson	President	2. Eve Cutler Rosen #	Senior Vice President, General Counsel & Secretary
3. Robert James Schwartz	Vice President & Controller	4. John Linn Doellman	Vice President & Actuary
Ronald James Brichler	Executive Vice President	Gary John Gruber	Executive Vice President
Aaron Beasy Latto #	Senior Vice President	David John Witzgall	Senior Vice President, Chief Financial Officer & Treasurer
Annette Denise Gardner	Vice President & Assistant Treasurer	John William Tholen #	Vice President
Stephen Charles Beraha	Assistant Vice President & Assistant Secretary	Kathleen Joan Brown	Assistant Vice President
Howard Kim Baird	Assistant Treasurer	Robert Jude Zbacnik	Assistant Treasurer

DIRECTORS

Ronald James Brichler	Gary John Gruber	Donald Dumford Larson	Vito Charles Peraino
Michael David Pierce	Eve Cutler Rosen	Piyush Kumar Singh	Michael Eugene Sullivan Jr.
David John Witzgall			

State of..... Ohio
County of..... Hamilton

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.

Donald D. Larson

(Signature)

Donald Dumford Larson
President

(Title)

Eve Cutler Rosen

(Signature)

Eve Cutler Rosen
Senior Vice President, General Counsel & Secretary

(Title)

Robert James Schwartz

(Signature)

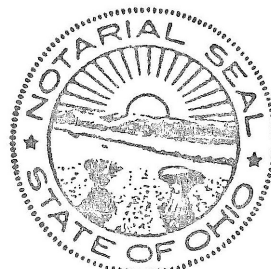
Robert James Schwartz
Vice President & Controller

(Title)

Subscribed and sworn to before me
This 8th day of February, 2013

Janice A. Meyer

Notary Public, State of Ohio
My Commission Expires 11-08-2016



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....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF ALABAMA 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	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	210
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	250
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	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	460

19.6A

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF FLORIDA 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	0	0	0	0	0	0	0	146
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	219
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	33
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	19
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	5
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	445
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	91
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	9
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	23
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	9
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	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	1,000

19.FL

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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....84 NAIC Company Code....39896

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	0	0	0	0	0	0	0	321
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	696
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	71
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	39
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	10
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	425
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	283
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	6
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	760
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	192
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	46
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	673
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	129
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	5
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	167
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	(56)	1,438	0	0	11	0	11
19.2 Other private passenger auto liability.....	0	0	0	0	0	(518)	15,006	0	0	123	0	51
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	51
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	486
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	20
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	727
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	158
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	75
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	161
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	176
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	25
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	33
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	67
35. TOTALS (a).....	0	0	0	0	0	(573)	16,444	0	0	134	0	5,863

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	67
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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	67

(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....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF INDIANA 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	0	0	0	0	0	0	0	54
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	82
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	12
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	7
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	2
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	139
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	94
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	30
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	129
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	39
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	2
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	52
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	8
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	144
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	3
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	221
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	112
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	53
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	78
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	95
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	15
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	10
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	20
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,402

19'IN

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	20
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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	20

(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....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF KENTUCKY 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	0	0	0	0	0	0	0	6
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	15
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	2
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	1
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	25
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	17
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	2
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	27
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	5
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	13
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	23
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	7
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	9
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	1
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	1
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	15
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	27
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	1
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	40
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	20
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	9
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	14
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	17
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	3
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	2
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	4
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	304

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	4
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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	4

(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.KY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF LOUISIANA 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	0	0	0	0	0	0	0	53
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	79
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	11
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	7
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	2
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	137
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	93
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	151
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	30
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	126
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	39
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	2
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	51
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	8
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	147
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	3
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	217
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	10
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	20
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	1,184

19.LLA

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	20
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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	20

(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....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF MISSOURI 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	0	0	0	0	0	0	0	0
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	0
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	0
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	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	0

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	0
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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.MO

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

19.OH

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	0	0	0	0	0	0	0	12
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	18
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	3
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	8
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	30
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	9
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	13
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	2
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	36
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	1
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	51
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	26
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	13
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	21
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	2
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	5
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	250

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	5
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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	5

(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....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

19.TN

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	0	0	0	0	0	0	0	24
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	37
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	5
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	3
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	1
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	63
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	43
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	4
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	70
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	14
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	33
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	58
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	18
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	1
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	20
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other private passenger auto liability.....	0	0	0	0	0	0	0	0	0	0	0	4
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	68
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	2
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	100
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	35
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	43
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	7
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	5
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	9
35. TOTALS (a).....	0	0	0	0	0	0	0	0	0	0	0	664

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	9
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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	9

(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....84 NAIC Company Code....39896

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

19.TX

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	0	0	0	0	0	0	0	24
2.1 Allied lines.....	0	0	0	0	0	0	0	0	0	0	0	36
2.2 Multiple peril crop.....	0	0	0	0	0	0	0	0	0	0	0	5
2.3 Federal flood.....	0	0	0	0	0	0	0	0	0	0	0	0
3. Farmowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	3
4. Homeowners multiple peril.....	0	0	0	0	0	0	0	0	0	0	0	1
5.1 Commercial multiple peril (non-liability portion).....	0	0	0	0	0	0	0	0	0	0	0	61
5.2 Commercial multiple peril (liability portion).....	0	0	0	0	0	0	0	0	0	0	0	37
6. Mortgage guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean marine.....	0	0	0	0	0	0	0	0	0	0	0	0
9. Inland marine.....	0	0	0	0	0	0	0	0	0	0	0	67
10. Financial guaranty.....	0	0	0	0	0	0	0	0	0	0	0	0
11. Medical professional liability.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake.....	0	0	0	0	0	0	0	0	0	0	0	13
13. Group accident and health (b).....	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (group and individual).....	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Collectively renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Non-cancelable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Guaranteed renewable A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Other accident only.....	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0	0	0	0
15.7 All other A&H (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal employees health benefits program premium (b).....	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other liability-occurrence.....	0	0	0	0	0	0	0	0	0	0	0	57
17.2 Other liability-claims-made.....	0	0	0	0	0	0	0	0	0	0	0	18
17.3 Excess workers' compensation.....	0	0	0	0	0	0	0	0	0	0	0	1
18. Products liability.....	0	0	0	0	0	0	0	0	0	0	0	23
19.1 Private passenger auto no-fault (personal injury protection).....	0	0	0	0	0	(56)	1,438	0	0	11	0	1
19.2 Other private passenger auto liability.....	0	0	0	0	0	(518)	15,006	0	0	123	0	4
19.3 Commercial auto no-fault (personal injury protection).....	0	0	0	0	0	0	0	0	0	0	0	37
19.4 Other commercial auto liability.....	0	0	0	0	0	0	0	0	0	0	0	66
21.1 Private passenger auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	1
21.2 Commercial auto physical damage.....	0	0	0	0	0	0	0	0	0	0	0	98
22. Aircraft (all perils).....	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity.....	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety.....	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and theft.....	0	0	0	0	0	0	0	0	0	0	0	34
27. Boiler and machinery.....	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit.....	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty.....	0	0	0	0	0	0	0	0	0	0	0	4
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	9
35. TOTALS (a).....	0	0	0	0	0	(573)	16,444	0	0	134	0	599

DETAILS OF WRITE-INS

3401. Collateral protection.....	0	0	0	0	0	0	0	0	0	0	0	9
3402. Supplemental unemployment.....	0	0	0	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	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	9

(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 Affiliates-U.S. Intercompany Pooling																				
31-0501234	16691....	Great American Insurance Company.....	OH.....		0	0	0	0	0	2	16	0	0	0	0	18	0	0	18	0
0199999		Total Authorized Affiliates - U.S. Intercompany Pooling.....			0	0	0	0	0	2	16	0	0	0	0	18	0	0	18	0
0499999		Total Authorized Affiliates.....			0	0	0	0	0	2	16	0	0	0	0	18	0	0	18	0
0999999		Total Authorized.....			0	0	0	0	0	2	16	0	0	0	0	18	0	0	18	0
2899999		Total Authorized, Unauthorized and Certified.....			0	0	0	0	0	2	16	0	0	0	0	18	0	0	18	0
9999999		Totals.....			0	0	0	0	0	2	16	0	0	0	0	18	0	0	18	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) N/A See Note 26 to Financial Statements.....	0.0	0
(2)	0.0	0
(3)	0.0	0
(4)	0.0	0
(5)	0.0	0

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) Great American Insurance Company.....	18	0	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
(2)	0	0	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
(3)	0	0	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
(4)	0	0	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
(5)	0	0	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).....	13,368,972	0	13,368,972
2. Premiums and considerations (Line 15).....	0	0	0
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	0	0	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....	0	0	0
5. Other assets.....	164,914	0	164,914
6. Net amount recoverable from reinsurers.....	0	18,400	18,400
7. Protected cell assets (Line 27).....	0	0	0
8. Totals (Line 28).....	13,533,886	18,400	13,552,286
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	0	18,400	18,400
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	450	0	450
11. Unearned premiums (Line 9).....	0	0	0
12. Advance premiums (Line 10).....	0	0	0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....	0	0	0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	0	0	0
15. Funds held by company under reinsurance treaties (Line 13).....	0	0	0
16. Amounts withheld or retained by company for account of others (Line 14).....	0	0	0
17. Provision for reinsurance (Line 16).....	0	0	0
18. Other liabilities.....	0	0	0
19. Total liabilities excluding protected cell business (Line 26).....	450	18,400	18,850
20. Protected cell liabilities (Line 27).....	0	0	0
21. Surplus as regards policyholders (Line 37).....	13,533,436	XXX	13,533,436
22. Totals (Line 38).....	13,533,886	18,400	13,552,286

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

If yes, give full explanation:

See Note 26 to the Financial Statements.

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

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

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

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

**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**

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

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

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

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

**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**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**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

Sch. P-Pt. 3A

NONE

Sch. P-Pt. 3B

NONE

Sch. P-Pt. 3C

NONE

Sch. P-Pt. 3D

NONE

Sch. P-Pt. 3E

NONE

Sch. P-Pt. 3F-Sn. 1

NONE

Sch. P-Pt. 3F-Sn. 2

NONE

Sch. P-Pt. 3G

NONE

Sch. P-Pt. 3H-Sn. 1

NONE

Sch. P-Pt. 3H-Sn. 2

NONE

Sch. P-Pt. 3I

NONE

Sch. P-Pt. 3J

NONE

Sch. P-Pt. 3K

NONE

Sch. P-Pt. 3L

NONE

Sch. P-Pt. 3M

NONE

**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**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**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**

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

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

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

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

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

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

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

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

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

**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

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

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

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

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

GREAT AMERICAN CASUALTY INSURANCE COMPANY

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 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)? \$.....0
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 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[X]
- 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.....	0	0
1.602	2003.....	0	0
1.603	2004.....	0	0
1.604	2005.....	0	0
1.605	2006.....	0	0
1.606	2007.....	0	0
1.607	2008.....	0	0
1.608	2009.....	0	0
1.609	2010.....	0	0
1.610	2011.....	0	0
1.611	2012.....	0	0
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 \$.....0
- 5.2 Surety \$.....0
6. Claim count information is reported per claim or per claimant. (Indicate which).
 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.
This Company participates in a pooling agreement. (See Note 26).

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
Members														
0.....		0.....	31-1544320	0.....	0000944707	NYSE.....	American Financial Group, Inc.....	OH.....	UIP.....		Ownership.....0.000		0.....
0.....		0.....	31-6549738	0.....	0.....		American Financial Capital Trust II.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	16-6543606	0.....	0.....		American Financial Capital Trust III.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	16-6543609	0.....	0.....		American Financial Capital Trust IV.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	31-0996797	0.....	0.....		American Financial Enterprises, Inc.....	CT.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	31-0828578	0.....	0.....		American Money Management Corporation.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	27-1577326	0.....	0.....		American Real Estate Capital Company, LLC.....	OH.....	NIA.....	American Money Management Corporation.....	Ownership.....	...80.000	American Financial Group, Inc.....	0.....
0.....		0.....	27-2829629	0.....	0.....		MidMarket Capital Partners, LLC.....	DE.....	NIA.....	American Money Management Corporation.....	Ownership.....	...65.000	American Financial Group, Inc.....	0.....
0.....		0.....	41-2112001	0.....	0.....		APU Holding Company.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	23-6000765	0.....	0.....		American Premier Underwriters, Inc.....	PA.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	23-6297584	0.....	0.....		The Associates of the Jersey Company.....	NJ.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	37-1094159	0.....	0.....		Cal Coal, Inc.....	IL.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	95-2802826	0.....	0.....		Great Southwest Corporation.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	35-6001691	0.....	0.....		The Indianapolis Union Railway Company.....	IN.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	13-6400464	0.....	0.....		Lehigh Valley Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	46-1665396	0.....	0.....		Pennsylvania Lehigh Oil & Gas Holdings LLC.....	PA.....	NIA.....	Lehigh Valley Railroad Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	20-1548213	0.....	0.....		Magnolia Alabama Holdings, Inc.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	20-1574094	0.....	0.....		Magnolia Alabama Holdings LLC.....	AL.....	NIA.....	Magnolia Alabama Holdings, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	46-1852532	0.....	0.....		Michigan Oil & Gas Holdings, LLC.....	MI.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	46-1480078	0.....	0.....		Ohio Oil & Gas Holdings, LLC.....	OH.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	13-6021353	0.....	0.....		The Owasco River Railway, Inc.....	NY.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	31-1236926	0.....	0.....		PCC Real Estate, Inc.....	NY.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	76-0080537	0.....	0.....		PCC Technical Industries, Inc.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	31-1388401	0.....	0.....		PCC Maryland Realty Corp.....	MD.....	NIA.....	PCC Technical Industries, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	06-1209709	0.....	0.....		Penn Central Energy Management Company.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	23-1537928	0.....	0.....		Penn Towers, Inc.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	23-6000766	0.....	0.....		Pennsylvania-Reading Seashore Lines.....	NJ.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...66.670	American Financial Group, Inc.....	0.....
0.....		0.....	23-6207599	0.....	0.....		Pittsburgh and Cross Creek Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...83.000	American Financial Group, Inc.....	0.....
0.....		0.....	23-1707450	0.....	0.....		Terminal Realty Penn Co.....	DC.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	23-1675796	0.....	0.....		Waynesburg Southern Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	0.....	0.....	0.....		GAI Insurance Company, Ltd.....	BMU.....	IA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	31-1446308	0.....	0.....		Hangar Acquisition Corp.....	OH.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	0.....	0.....	0.....		Lease & Loan Insurance Services Limited.....	GBR.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	91-1242743	0.....	0.....		Premier Lease & Loan Services Insurance Agency, Inc.....	WA.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0.....		0.....	91-1508644	0.....	0.....		Premier Lease & Loan Services of Canada, Inc.....	WA.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0084.....	American Financial Group, Inc.....	22179.....	95-2801326	0.....	0.....		Republic Indemnity Company of America.....	CA.....	IA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0084	American Financial Group, Inc.	43753	31-1054123	0	0		Republic Indemnity Company of California	CA	IA	Republic Indemnity Company of America	Ownership	100.000	American Financial Group, Inc.	0
0		0	31-1262960	0	0		Risico Management Corporation	DE	NIA	APU Holding Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	31-0823725	0	0		Dixie Terminal Corporation	OH	NIA	American Financial Group, Inc	Ownership	100.000	American Financial Group, Inc.	0
0		0	31-1733037	0	0		Flextech Holding Co., Inc.	OH	NIA	American Financial Group, Inc	Ownership	100.000	American Financial Group, Inc.	0
0		0	98-0606803	0	0		GAI Holding Bermuda Ltd	BMU	NIA	American Financial Group, Inc	Ownership	100.000	American Financial Group, Inc.	0
0		0	98-0556144	0	0		GAI Indemnity, Ltd.	GBR	IA	GAI Holding Bermuda Ltd.	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Marketform Group Limited	GBR	NIA	GAI Holding Bermuda Ltd.	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Marketform Holdings Limited	GBR	NIA	Marketform Group Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Caduceus Underwriting Limited	GBR	IA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	98-0412245	0	0		Lavenham Underwriting Limited	GBR	IA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Marketform Limited	GBR	NIA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Gabinete Marketform SL	ESP	NIA	Marketform Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Marketform Australia Pty Limited	AUS	NIA	Marketform Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Studio Marketform SRL	ITA	NIA	Marketform Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Marketform Management Services Limited	GBR	NIA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Marketform Managing Agency Limited	GBR	NIA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	98-0431601	0	0		Sampford Underwriting Limited	GBR	IA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	0	0	0		Marketform Trust Company Limited	GBR	NIA	Marketform Group Limited	Ownership	100.000	American Financial Group, Inc.	0
0		0	06-1356481	0	0		Great American Financial Resources, Inc	DE	NIA	American Financial Group, Inc	Ownership	100.000	American Financial Group, Inc.	1
0		0	31-1475936	0	0		AAG Holding Company, Inc	OH	NIA	Great American Financial Resources, Inc	Ownership	100.000	American Financial Group, Inc.	0
0		0	58-646032	0	0		Great American Financial Statutory Trust IV	CT	NIA	AAG Holding Company, Inc	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	63312	13-1935920	0	0		Great American Life Insurance Company	OH	IA	AAG Holding Company, Inc	Ownership	100.000	American Financial Group, Inc.	0
0		0	45-2969767	0	0		Aerielle IP Holdings, LLC	OH	NIA	Great American Life Insurance Company	Ownership	62.500	American Financial Group, Inc.	2
0		0	26-4391696	0	0		Aerielle, LLC	DE	NIA	Great American Life Insurance Company	Ownership	62.500	American Financial Group, Inc.	2
0084	American Financial Group, Inc.	93661	31-1021738	0	0		Annuity Investors Life Insurance Company	OH	IA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	27-4078277	0	0		Bay Bridge Marina Hemingway's Restaurant, LLC	MD	NIA	Great American Life Insurance Company	Ownership	85.000	American Financial Group, Inc.	0
0		0	27-0513333	0	0		Bay Bridge Marina Management, LLC	MD	NIA	Great American Life Insurance Company	Ownership	85.000	American Financial Group, Inc.	0
0		0	20-1246122	0	0		Brothers Management, LLC	FL	NIA	Great American Life Insurance Company	Ownership	99.000	American Financial Group, Inc.	0
0		0	45-3988240	0	0		FT Liquidation, LLC	OH	NIA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	20-4604276	0	0		GALIC - Bay Bridge Marina, LLC	MD	NIA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	45-5565693	0	0		GALIC-Sorrento, LLC	FL	NIA	Great American Life Insurance Company	Ownership	65.000	American Financial Group, Inc.	2
0		0	45-3829557	0	0		GALIC - Stoneleigh, LLC	FL	NIA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	31-1391777	0	0		GALIC Brothers, Inc	OH	NIA	Great American Life Insurance Company	Ownership	80.000	American Financial Group, Inc.	0
0		0	45-1144095	0	0		GALIC Pointe, LLC	FL	NIA	Great American Life Insurance Company	Ownership	65.000	American Financial Group, Inc.	2
0		0	26-3260520	0	0		Manhattan National Holding Corporation	OH	NIA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	67083	45-0252531	0	0		Manhattan National Life Insurance Company	IL	IA	Manhattan National Holding Corporation	Ownership	100.000	American Financial Group, Inc.	0
0		0	52-2179330	0	0		Skipjack Marina Corp	MD	NIA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	0

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SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0		0	74-2180806	0	0		United Teacher Associates, Ltd.	TX	NIA	AAG Holding Company, Inc.	Ownership	100.000	American Financial Group, Inc.	1
0084	American Financial Group, Inc.	63479	58-0869673	0	0		United Teacher Associates Insurance Company	TX	IA	United Teacher Associates, Ltd.	Ownership	100.000	American Financial Group, Inc.	0
0		0	31-1422717	0	0		AAG Insurance Agency, Inc.	KY	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	34-1017531	0	0		Ceres Group, Inc.	DE	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	34-1880408	0	0		Ceres Administrators, L.L.C.	DE	NIA	Ceres Group, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	34-1947043	0	0		Ceres Sales, LLC	DE	NIA	Ceres Group, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	34-1920479	0	0		HealthMark Sales, LLC	DE	NIA	Ceres Sales, LLC	Ownership	100.000	American Financial Group, Inc.	0
0		0	47-0717079	0	0		Continental General Corporation	NE	NIA	Ceres Group, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	71404	47-0463747	0	0		Continental General Insurance Company	OH	IA	Continental General Corporation	Ownership	100.000	American Financial Group, Inc.	0
0		0	47-0562685	0	0		Continental Print & Photo Co.	NE	NIA	Continental General Corporation	Ownership	100.000	American Financial Group, Inc.	0
0		0	34-1947042	0	0		QQAgency of Texas, Inc.	TX	NIA	Ceres Group, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	31-1395344	0	0		Great American Advisors, Inc.	OH	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	42-1575938	0	0		Great American Holding, Inc.	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	27-3062314	0	0		Agricultural Services, LLC	OH	NIA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	45-4110027	0	0		Unites States Commodities Producers LLC	MT	NIA	Agricultural Services, LLC	Ownership	75.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	14084	27-4395897	0	0		Livestock Market Enhancement Risk Retention Group	NV	IA	Unites States Commodities Producers LLC	Ownership	1.000	American Financial Group, Inc.	2
0		0	27-2354685	0	0		United States Livestock Producers, LLC	NV	NIA	Agricultural Services, LLC	Ownership	75.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	14084	27-4395897	0	0		Livestock Market Enhancement Risk Retention Group	NV	IA	United States Livestock Producers, LLC	Ownership	99.000	American Financial Group, Inc.	2
0084	American Financial Group, Inc.	35351	31-0912199	0	0		American Empire Surplus Lines Insurance Company	DE	IA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	37990	31-0973761	0	0		American Empire Insurance Company	OH	IA	American Empire Surplus Lines Insurance Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	59-1671722	0	0		American Empire Underwriters, Inc.	TX	NIA	American Empire Insurance Company	Ownership	100.000	American Financial Group, Inc.	0
0		0		0	0		GAI Australia Pty Ltd.	AUS	NIA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0		0	0		Great American International Insurance Limited	IRL	IA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	23418	73-0556513	0	0		Mid-Continent Casualty Company	OH	IA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	15380	73-1406844	0	0		Mid-Continent Assurance Company	OH	IA	Mid-Continent Casualty Company	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	13794	38-3803661	0	0		Mid-Continent Excess and Surplus Insurance Company	DE	IA	Mid-Continent Casualty Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	30-0571535	0	0		Mid-Continent Specialty Insurance Services, Inc.	OK	NIA	Mid-Continent Casualty Company	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	23426	73-0773259	0	0		Oklahoma Surety Company	OH	IA	Mid-Continent Casualty Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	98-0627464	0	0		Premier International Insurance Company	TCA	IA	Great American Holding, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0084	American Financial Group, Inc.	16691	31-0501234	0	0		Great American Insurance Company	OH	UDP	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	0
0		0	45-2969767	0	0		Aerielle IP Holdings, LLC	OH	NIA	Great American Insurance Company	Ownership	37.500	American Financial Group, Inc.	2
0		0	26-4391696	0	0		Aerielle, LLC	DE	NIA	Great American Insurance Company	Ownership	37.500	American Financial Group, Inc.	2
0		0	31-1463075	0	0		American Signature Underwriters, Inc.	OH	NIA	Great American Insurance Company	Ownership	100.000	American Financial Group, Inc.	0
0		0	59-2840291	0	0		Brothers Property Corporation	OH	NIA	Great American Insurance Company	Ownership	80.000	American Financial Group, Inc.	0
0		0	20-5173494	0	0		Brothers Le Pavillon, LLC	DE	NIA	Brothers Property Corporation	Ownership	100.000	American Financial Group, Inc.	0
0		0	20-5173589	0	0		Brothers Le Pavillon (SPE), LLC	DE	NIA	Brothers Le Pavillon, LLC	Ownership	100.000	American Financial Group, Inc.	0

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SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0		0	25-1754638	0	0		Brothers Pennsylvanian Corporation.....	PA.....	NIA.....	Brothers Property Corporation.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	59-2840294	0	0		Brothers Property Management Corporation.....	OH.....	NIA.....	Brothers Property Corporation.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	20-4498054	0	0		Crescent Centre Apartments.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	1
0		0	31-1277904	0	0		Crop Managers Insurance Agency, Inc.....	KS.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	31-0589001	0	0		Dempsey & Siders Agency, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	31-1341668	0	0		Eden Park Insurance Brokers, Inc.....	CA.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0		0	0		El Aguila, Compañia de Seguros, S.A. de C.V.....	MEX.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0		0	0		Financidora de Primas Condor, S.A. de C.V.....	MEX.....	NIA.....	El Aguila, Compañia de Seguros, S.A. de C.V.....	Ownership.....	99.000	American Financial Group, Inc.....	0
0		0	39-1404033	0	0		Farmers Crop Insurance Alliance, Inc.....	KS.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	13-3628555	0	0		FCIA Management Company, Inc.....	NY.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0		0	0		Foreign Credit Insurance Association.....	NY.....	OTH.....	Great American Insurance Company.....	Management.....	0.000	American Financial Group, Inc.....	3
0		0	31-1753938	0	0		GAI Warranty Company.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	31-1765544	0	0		GAI Warranty Company of Florida.....	FL.....	NIA.....	GAI Warranty Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0		0	0		GAI Warranty Company of Canada Inc.....	CAN.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	45-5565693	0	0		GALIC-Sorrento, LLC.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	35.000	American Financial Group, Inc.....	2
0		0	45-1144095	0	0		GALIC Pointe, LLC.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	35.000	American Financial Group, Inc.....	2
0		0	61-1329718	0	0		Global Premier Finance Company.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	74-2693636	0	0		Great American Agency of Texas, Inc.....	TX.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	26832	95-1542353	0	0		Great American Alliance Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	26344	15-6020948	0	0		Great American Assurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	39896	61-0983091	0	0		Great American Casualty Insurance Company.....	OH.....		Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	31-1228726	0	0		Great American Claims Services, Inc.....	DE.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	10646	36-4079497	0	0		Great American Contemporary Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	37532	31-0954439	0	0		Great American E & S Insurance Company.....	DE.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	41858	31-1036473	0	0		Great American Fidelity Insurance Company.....	DE.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	31-1652643	0	0		Great American Insurance Agency, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	22136	13-5539046	0	0		Great American Insurance Company of New York.....	NY.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	38024	31-0974853	0	0		Great American Lloyd's Insurance Company.....	TX.....	IA.....	Great American Insurance Company.....	Other.....	0.000	American Financial Group, Inc.....	4
0		0	31-1073664	0	0		Great American Lloyd's, Inc.....	TX.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	31-0856644	0	0		Great American Management Services, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	38580	31-1288778	0	0		Great American Protection Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	31-0918893	0	0		Great American Re Inc.....	DE.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	31135	31-1209419	0	0		Great American Security Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0084	American Financial Group, Inc.....	33723	31-1237970	0	0		Great American Spirit Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0		0	0		Insurance (GB) Limited.....	GBR.....	IA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	59-1263251	0	0		Key Largo Group, Inc.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	100.000	American Financial Group, Inc.....	0
0		0	34-1607394	0	0001301106	NASDAQ	National Interstate Corporation.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	51.900	American Financial Group, Inc.....	0

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SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0		0	34-1899058	0	0		American Highways Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	31-1548235	0	0		Explorer RV Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	98-0191335	0	0		Hudson Indemnity, Ltd.....	CYM.....	IA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	66-0660039	0	0		Hudson Management Group, Ltd.....	VIR.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	34-1607396	0	0		National Interstate Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	36-4670968	0	0		Commercial For Hire Transportation Purchasing Group.....	SC.....	NIA.....	National Interstate Insurance Agency, Inc.....	Management.....0.000	American Financial Group, Inc.....	0.....
0084	American Financial Group, Inc.....	32620	34-1607395	0	0		National Interstate Insurance Company.....	OH.....	IA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0084	American Financial Group, Inc.....	11051	99-0345306	0	0		National Interstate Insurance Company of Hawaii, Inc.....	OH.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0084	American Financial Group, Inc.....	41106	95-3623282	0	0		Triumphe Casualty Company.....	OH.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	43-1415856	0	0		Vanliner Group, Inc.....	DE.....	NIA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	43-1254631	0	0		TransProtection Service Company.....	MO.....	NIA.....	Vanliner Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0084	American Financial Group, Inc.....	21172	86-0114294	0	0		Vanliner Insurance Company.....	MO.....	IA.....	Vanliner Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0		0	0		Vanliner Reinsurance Limited.....	BMU.....	IA.....	Vanliner Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	20-5546054	0	0		Safety Claims and Litigation Services, LLC.....	MT.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0		0	0		Penn Central U.K. Limited.....	GBR.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	27-2226948	0	0		Pinecrest Place LLC.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	871850814	0	0		PLLS Canada Insurance Brokers Inc.....	CAN.....	NIA.....	Great American Insurance Company.....	Ownership.....	...49.000	American Financial Group, Inc.....	0.....
0		0	31-1293064	0	0		Professional Risk Brokers, Inc.....	IL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	72-1331800	0	0		Strategic Comp Holdings, L.L.C.....	LA.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	36-4517754	0	0		Strategic Comp Services, L.L.C.....	LA.....	NIA.....	Strategic Comp Holdings, L.L.C.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	32-0050970	0	0		Strategic Comp, L.L.C.....	LA.....	NIA.....	Strategic Comp Holdings, L.L.C.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	31-0686194	0	0		One East Fourth, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	31-0883227	0	0		Pioneer Carpet Mills, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	31-1737792	0	0		Superior NWN of Ohio, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	31-1119320	0	0		TEJ Holdings, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....
0		0	31-0728327	0	0		Three East Fourth, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc.....	0.....

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Asterisk	Explanation
1	Another affiliated company owns 1% or less of the shares.
2	The entity is owned by more than one company within the AFG Group.
3	Great American Insurance Company is the majority member of the Association
4	Beneficial interest and indirect control is established by trust agreements between Great American Insurance Company and each of the underwriters of the Company.

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	31-1544320	American Financial Group, Inc.	175,000,000	0	0	0	112,347,608	0		0	287,347,608	0
00000	41-2112001	APU Holding Company	20,000,000	0	0	0	0	0		0	20,000,000	0
00000		GAI Insurance Company, Ltd.	(5,000,000)	0	0	0	0	0		0	(5,000,000)	0
22179	95-2801326	Republic Indemnity Company of America	(12,500,000)	0	0	0	0	0	*	0	(12,500,000)	(26,128,425)
43753	31-1054123	Republic Indemnity Company of California	(2,500,000)	0	0	0	0	0	*	0	(2,500,000)	0
00000		Lloyd's Syndicate 2468 (United Kingdom)	0	0	0	0	0	0		0	0	(3,104,000)
00000	98-0412245	Lavenham Underwriting Limited	0	0	0	0	0	0		0	0	11,632,124
00000	98-0431601	Sampford Underwriting Limited	0	0	0	0	0	0		0	0	12,381,893
00000	31-1475936	AAG Holding Company, Inc.	0	(60,147,872)	0	0	0	0		0	(60,147,872)	0
63312	13-1935920	Great American Life Insurance Company	1,885,155	50,789,156	0	0	(112,347,608)	0		0	(59,673,297)	25,057,661
00000	36-3383108	Consolidated Financial Corporation	(1,885,155)	0	0	0	0	0		0	(1,885,155)	0
00000		GALIC - Sorrento, LLC	0	13,670,529	0	0	0	0		0	13,670,529	0
00000	45-1144095	GALIC Pointe, LLC	0	500,000	0	0	0	0		0	500,000	0
00000	20-3568924	Loyal American Holding Corporation	0	(59,952,628)	0	0	0	0		0	(59,952,628)	0
65722	63-0343428	Loyal American Life Insurance Company	12,435,975	49,393,882	0	0	0	0		0	61,829,857	0
00000	45-4121852	GALAC Holding Company	(7,044,302)	8,248,382	0	0	0	0		0	1,204,080	0
62200	95-2496321	Great American Life Assurance Company	(5,391,673)	2,404,000	0	0	0	0		0	(2,987,673)	0
63479	58-0869673	United Teacher Associates Insurance Company	0	0	0	0	0	0		0	0	(25,057,661)
88366	59-2760189	American Retirement Life Insurance Company	0	54,236	0	0	0	0		0	54,236	0
00000	34-1017531	Ceres Group, Inc.	0	(3,320)	0	0	0	0		0	(3,320)	0
65269	75-2305400	United Benefit Life Insurance Company	0	3,320	0	0	0	0		0	3,320	0
00000	42-1575938	Great American Holding, Inc.	91,826,280	(50,000)	0	0	0	0		0	91,776,280	0
00000	27-2354685	United States Livestock Producers, LLC	0	(65,300)	0	0	0	0		0	(65,300)	0
14084	27-4395897	Livestock Market Enhancement Risk Retention Group	0	65,300	0	0	0	0		0	65,300	0
35351	31-0912199	American Empire Surplus Lines Insurance Company	(7,000,000)	0	0	0	0	0	*	0	(7,000,000)	8,633,000
37990	31-0973761	American Empire Insurance Company	(3,000,000)	0	0	0	0	0	*	0	(3,000,000)	2,000
00000		Great American International Insurance Limited (Ireland)	(1,826,280)	0	0	0	0	0		0	(1,826,280)	6,677,000
23418	73-0556513	Mid-Continent Casualty Company	0	(80,000,000)	0	0	0	0	*	0	(80,000,000)	(4,353,000)
00000		Premier International Insurance Company (Turks and Caicos)	0	50,000	0	0	0	0		0	50,000	0
16691	31-0501234	Great American Insurance Company	(145,809,400)	(32,009,685)	0	0	0	0	*	0	(177,819,085)	(1,965,017)
00000	13-3628555	FCIA Management Company, Inc.	(110,600)	0	0	0	0	0		0	(110,600)	0
00000	31-1765544	GAI Warranty Company of Florida	0	0	0	0	0	0		0	0	5,929,000
37532	31-0954439	Great American E & S Insurance Company	0	10,000,000	0	0	0	0	*	0	10,000,000	0
41858	31-1036473	Great American Fidelity Insurance Company	0	10,000,000	0	0	0	0	*	0	10,000,000	0
38024	31-0974853	Great American Lloyd's Insurance Company	0	0	0	0	0	0		0	0	2,403,000
00000		Insurance (GB) Limited (United Kingdom)	0	0	0	0	0	0		0	0	194,000
00000	59-1263251	Key Largo Group, Inc.	(100,000)	(150,000)	0	0	0	0		0	(250,000)	0
00000	34-1607394	National Interstate Corporation	35,520,000	0	0	0	0	0		0	35,520,000	0
00000	98-0191335	Hudson Indemnity, Ltd (Cayman Islands)	0	0	0	0	0	0		0	0	(205,006,000)
32620	34-1607395	National Interstate Insurance Company	(39,300,000)	0	0	0	0	0	*	0	(39,300,000)	181,317,000
11051	99-0345306	National Interstate Insurance Company of Hawaii, Inc.	(1,100,000)	0	0	0	0	0	*	0	(1,100,000)	8,067,000

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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)
41106	95-3623282	Triumphe Casualty Company	(1,600,000)	.0	.0	.0	.0	.0	*	0	(1,600,000)	182,000
21172	86-0114294	Vanliner Insurance Company	(18,000,000)	.0	.0	.0	.0	.0	*	0	(18,000,000)	5,361,000
00000	27-2226948	Pinecrest Place LLC	.0	200,000	.0	.0	.0	.0	.	0	200,000	.0
00000	31-1293064	Professional Risk Brokers, Inc	(4,500,000)	.0	.0	.0	.0	.0	.	0	(4,500,000)	.0
00000	72-1331800	Strategic Comp Holdings, L.L.C.	.0	7,000,000	.0	.0	.0	.0	.	0	7,000,000	.0
9999999	Control Totals		.0	.0	.0	.0	.0	.0	XXX	0	.0	2,222,575

Pooling Information

NAIC Code	Name of Insurer	Pooling %	NAIC Code	Name of Insurer	Pooling %
35351	American Empire Surplus Lines Insurance Company	90.00%	16691	Great American Insurance Company	100.00%
37990	American Empire Insurance Company	10.00%	22136	Great American Insurance Company of New York	0.00%
			26832	Great American Alliance Insurance Company	0.00%
23418	Mid-Continent Casualty Company	94.00%	26344	Great American Assurance Company	0.00%
15380	Mid-Continent Assurance Company	3.00%	39896	Great American Casualty Insurance Company	0.00%
23426	Oklahoma Surety Company	3.00%	10646	Great American Contemporary Insurance Company	0.00%
13794	Mid-Continent Excess and Surplus Insurance Company	0.00%	37532	Great American E&S Insurance Company	0.00%
			41858	Great American Fidelity Insurance Company	0.00%
22179	Republic Indemnity Company of America	97.00%	38580	Great American Protection Insurance Company	0.00%
43753	Republic Indemnity Company of California	3.00%	31135	Great American Security Insurance Company	0.00%
			33723	Great American Spirit Insurance Company	0.00%
32620	National Interstate Insurance Company	70.00%			
21172	Vanliner Insurance Company	26.00%			
11051	National Interstate Insurance Company of Hawaii, Inc	2.00%			
41106	Triumphe Casualty Company	2.00%			

99.1

Annual Statement for the year 2012 of the **GREAT AMERICAN CASUALTY 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

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

APRIL FILING

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

MAY FILING

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

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

AUGUST FILING

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES
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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?	NO
13. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
22. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
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?	NO
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?	NO
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?	NO

APRIL FILING

28. Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?	NO
29. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
30. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
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?	NO
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

AUGUST FILING

33. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
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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:

BAR CODE:

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GREAT AMERICAN CASUALTY 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.

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