



QUARTERLY STATEMENT

As of September 30, 2013
of the Condition and Affairs of the

JAMES RIVER INSURANCE COMPANY

NAIC Group Code.....3494, 3494 (Current Period) (Prior Period)	NAIC Company Code..... 12203	Employer's ID Number..... 22-2824607
Organized under the Laws of OHIO	State of Domicile or Port of Entry OHIO	Country of Domicile US
Incorporated/Organized..... June 30, 1987	Commenced Business..... September 11, 1987	
Statutory Home Office	52 EAST GAY STREET..... COLUMBUS OH US 43215 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	6641 WEST BROAD STREET, SUITE 300..... RICHMOND VA US (Street and Number) (City or Town, State, Country and Zip Code)	(804) 289-2700 (Area Code) (Telephone Number)
Mail Address	P.O. BOX 27648..... RICHMOND VA US (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	6641 WEST BROAD STREET, SUITE 300..... RICHMOND VA US (Street and Number) (City or Town, State, Country and Zip Code)	(804) 289-2700 (Area Code) (Telephone Number)
Internet Web Site Address		
Statutory Statement Contact	BRUCE EDWARD SHORT (Name) Bruce.Short@jamesriverins.com (E-Mail Address)	(804) 289-2150 (Area Code) (Telephone Number) (Extension) (804) 420-1059 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. RICHARD JOHN SCHMITZER	President	2. DEBORAH PACE THORSVIK	Treasurer & Controller
3. PAMELA LLULL KNOWLES	Secretary	4.	
OTHER			
GREGG THOMAS DAVIS	Chairman of the Board	BRUCE EDWARD SHORT	Senior Vice President, Chief Financial Officer

DIRECTORS OR TRUSTEES

BRUCE EDWARD SHORT	RICHARD JOHN SCHMITZER	JOHN GORDON CLARKE	GREGG THOMAS DAVIS
RICHARD HAMILTON SEWARD			

State of..... Virginia
County of..... Henrico

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

(Signature)	(Signature)	(Signature)
RICHARD JOHN SCHMITZER	DEBORAH PACE THORSVIK	PAMELA LLULL KNOWLES
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Treasurer & Controller	Secretary
(Title)	(Title)	(Title)

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

JAMES RIVER INSURANCE COMPANY
ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1. Bonds.....	204,739,481		204,739,481	248,587,153
2. Stocks:				
2.1 Preferred stocks.....	34,966,535		34,966,535	33,428,791
2.2 Common stocks.....	28,729,275		28,729,275	23,982,623
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....(884,853)), cash equivalents (\$.....7,912,500) and short-term investments (\$.....24,684,294).....	31,711,941		31,711,941	20,992,654
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....			0	
9. Receivables for securities.....	21,484		21,484	
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	300,168,716	0	300,168,716	326,991,221
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	2,320,718		2,320,718	2,763,059
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	86,330,008	1,164,510	85,165,498	104,133,174
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums.....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	(11,808,789)		(11,808,789)	36,326,098
16.2 Funds held by or deposited with reinsured companies.....	145,712,283		145,712,283	3,407,705
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	240,584
18.2 Net deferred tax asset.....	8,806,838	2,570,330	6,236,508	6,458,738
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....	24,201		24,201	91,882
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	0	0	0	39,195
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	531,553,975	3,734,840	527,819,135	480,451,656
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	531,553,975	3,734,840	527,819,135	480,451,656

DETAILS OF WRITE-INS

1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Assumed insurance receivable.....			0	39,195
2502.			0	
2503.			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	39,195

JAMES RIVER INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$.....11,366,664).....	84,516,548	87,442,895
2. Reinsurance payable on paid losses and loss adjustment expenses.....	(1,135,110)	
3. Loss adjustment expenses.....	43,010,429	54,883,102
4. Commissions payable, contingent commissions and other similar charges.....		
5. Other expenses (excluding taxes, licenses and fees).....		
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....		
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	2,370,198	
7.2 Net deferred tax liability.....		
8. Borrowed money \$.....0 and interest thereon \$.....0.....		12,503,819
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$....84,077,231 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act.....	17,454,234	17,379,226
10. Advance premium.....		
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	41,182,299	86,644,682
13. Funds held by company under reinsurance treaties.....	168,754,479	
14. Amounts withheld or retained by company for account of others.....		
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified).....	2,059,000	2,059,000
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....	3,931,976	2,375,479
20. Derivatives.....		
21. Payable for securities.....	5,026,350	
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	4,624,346	3,825,433
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	371,794,749	267,113,636
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	371,794,749	267,113,636
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	3,547,500	3,547,500
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....	134,601,871	134,601,871
35. Unassigned funds (surplus).....	17,875,015	75,188,649
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36).....	156,024,386	213,338,020
38. Totals (Page 2, Line 28, Col. 3).....	527,819,135	480,451,656

DETAILS OF WRITE-INS		
2501. Other liabilities.....	33,229	6,440
2502. Deferred ceding commission.....	3,794,697	3,271,993
2503. Excise tax payable.....	796,420	547,000
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	4,624,346	3,825,433
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

JAMES RIVER INSURANCE COMPANY
STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$137,315,910).....	126,862,611	105,585,358	144,840,763
1.2 Assumed..... (written \$43,313,504).....	26,283,271	70,823,447	95,780,577
1.3 Ceded..... (written \$154,466,857).....	127,058,333	146,322,054	199,101,232
1.4 Net..... (written \$26,162,557).....	26,087,549	30,086,751	41,520,108
DEDUCTIONS:			
2. Losses incurred (current accident year \$12,050,663):			
2.1 Direct.....	29,505,711	32,843,791	41,918,892
2.2 Assumed.....	8,841,260	70,387,546	107,498,293
2.3 Ceded.....	33,615,798	92,786,373	135,454,995
2.4 Net.....	4,731,173	10,444,964	13,962,190
3. Loss adjustment expenses incurred.....	5,723,621	8,664,121	11,589,236
4. Other underwriting expenses incurred.....	12,540,316	10,722,396	10,525,180
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	22,995,110	29,831,481	36,076,606
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	3,092,439	255,270	5,443,502
INVESTMENT INCOME			
9. Net investment income earned.....	11,197,730	13,637,312	18,036,566
10. Net realized capital gains (losses) less capital gains tax of \$3,147,021.....	5,844,467	2,425,813	4,751,023
11. Net investment gain (loss) (Lines 9 + 10).....	17,042,197	16,063,125	22,787,589
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$0 amount charged off \$331,930).....	(331,930)	(118,879)	(149,749)
13. Finance and service charges not included in premiums.....			
14. Aggregate write-ins for miscellaneous income.....	(31,544)	(14,073)	(16,794)
15. Total other income (Lines 12 through 14).....	(363,474)	(132,952)	(166,543)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	19,771,162	16,185,443	28,064,548
17. Dividends to policyholders.....			
18. Net income after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	19,771,162	16,185,443	28,064,548
19. Federal and foreign income taxes incurred.....	3,314,749	4,470,218	5,574,875
20. Net income (Line 18 minus Line 19) (to Line 22).....	16,456,413	11,715,225	22,489,673
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	213,338,020	216,013,691	216,013,691
22. Net income (from Line 20).....	16,456,413	11,715,225	22,489,673
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$(1,450,162).....	(2,833,382)	2,890,899	2,587,138
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(455,608)	1,053,604	(706,092)
27. Change in nonadmitted assets.....	(481,057)	(108,981)	1,704,609
28. Change in provision for reinsurance.....			249,000
29. Change in surplus notes.....			
30. Surplus (contributed to) withdrawn from protected cells.....			
31. Cumulative effect of changes in accounting principles.....			
32. Capital changes:			
32.1 Paid in.....			
32.2 Transferred from surplus (Stock Dividend).....			
32.3 Transferred to surplus.....			
33. Surplus adjustments:			
33.1 Paid in.....			
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			
35. Dividends to stockholders.....	(70,000,000)		(29,000,000)
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	(57,313,634)	15,550,747	(2,675,671)
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	156,024,386	231,564,438	213,338,020
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401. Miscellaneous.....	(31,544)	(14,073)	(16,794)
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	(31,544)	(14,073)	(16,794)
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

JAMES RIVER INSURANCE COMPANY
CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	918,241	31,235,668	60,318,726
2. Net investment income.....	10,680,567	11,931,279	16,679,404
3. Miscellaneous income.....	(363,474)	(132,952)	(166,543)
4. Total (Lines 1 through 3).....	11,235,334	43,033,995	76,831,587
5. Benefit and loss related payments.....	102,145,908	21,572,802	65,367,344
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	30,136,610	20,598,896	24,197,031
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	3,850,988	7,894,845	8,651,613
10. Total (Lines 5 through 9).....	136,133,506	50,066,543	98,215,988
11. Net cash from operations (Line 4 minus Line 10).....	(124,898,172)	(7,032,548)	(21,384,400)
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	172,173,399	87,163,508	143,819,364
12.2 Stocks.....	2,236,973	28,591,942	28,591,942
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	636		96
12.7 Miscellaneous proceeds.....	5,026,350	759,000	
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	179,437,358	116,514,450	172,411,402
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	118,789,554	94,521,466	129,662,523
13.2 Stocks.....	12,396,598	8,341,334	9,455,670
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....	21,484		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	131,207,636	102,862,800	139,118,193
14. Net increase (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	48,229,722	13,651,650	33,293,209
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....	(12,500,000)		12,500,000
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....	70,000,000		29,000,000
16.6 Other cash provided (applied).....	169,887,737	3,386,846	1,510,798
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	87,387,737	3,386,846	(14,989,202)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	10,719,287	10,005,948	(3,080,393)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	20,992,654	24,073,047	24,073,047
19.2 End of period (Line 18 plus Line 19.1).....	31,711,941	34,078,995	20,992,654

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

20.0001			
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NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of James River Insurance Company ("the Company") are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for purposes of determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' ("NAIC") *Accounting Practices and Procedures Manual* has been adopted as a component of prescribed or permitted practices by the state of Ohio.

The accompanying financial statements contain no differences as a result of practices prescribed or permitted by Ohio that differ from the NAIC's *Accounting Practices and Procedures Manual*.

Note 2 - Accounting Changes and Corrections of Errors

No significant change.

Note 3 - Business Combinations and Goodwill

Not applicable.

Note 4 - Discontinued Operations

Not applicable.

Note 5 - Investments

D. Loan-Backed Securities

(1) Prepayment assumptions for Mortgage-Backed Securities, Collateralized Mortgage Obligations and Other Structured Securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity including the time of year (seasonality), current levels of interest rates (refinancing incentive), economic activity (including housing turnover) and term and age of the underlying collateral (burnout, seasoning). On an ongoing basis, the rate of prepayment is monitored and the model is calibrated to reflect actual experience, market factors and viewpoint.

(2-3) At September 30, 2013, the Company held no securities with a recognized other-than-temporary impairment.

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss:

a. The aggregate amount of unrealized losses:

1. Less than 12 months	\$ 81,299
2. 12 months or longer	\$ 0

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 months	\$7,991,801
2. 12 months or longer	\$ 0

(5) Impairments are based on periodic analytical reviews. Analysis relies on actual collateral performance measurements including, but not limited to prepayment rates, default rates, delinquencies, and loss severity sourced through third party data providers.

E. Repurchase Agreements

The Company invests in repurchase agreements with term limits of no more than 30 days. The Company's investment policy requires that the collateral securing the repurchase agreement have a market value of no less than 102% of the repurchase amount. Repurchase agreements are classified as Cash Equivalents.

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

NOTES TO FINANCIAL STATEMENTS

Note 7 - Investment Income

No significant change.

Note 8 - Derivative Instruments

Not applicable.

Note 9 - Income Taxes

No significant change.

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

The Company terminated the quota share reinsurance agreement with its wholly owned subsidiary, James River Casualty Company ("JRCC"), effective January 1, 2013. See note 23 for details.

The Company entered into an intercompany reinsurance pooling arrangement ("the pooling") with its Unites States affiliated insurance carriers, effective January 1, 2013. See note 26 for details.

Note 11 - Debt

Not applicable.

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

Not applicable.

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

No significant change.

Note 14 - Contingencies

No significant change.

Note 15 - Leases

Not applicable.

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

Not applicable.

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

Not applicable.

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

Not applicable.

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

Not applicable.

NOTES TO FINANCIAL STATEMENTS

Note 20 - Fair Value

A. Inputs Used for Assets and Liabilities Measured at Fair Value

(1) Fair Values for Items Measured and Reported at Fair Value by Levels 1, 2 and 3

For statutory accounting, certain investments are carried at fair value, while others may periodically be carried at fair value based on certain factors such as the NAIC’s lower of cost or market rule or an impairment. Assets recorded at fair value are categorized based on an evaluation of the various inputs used to measure the fair value.

Three levels of inputs are used to measure fair value:

- (a) Level 1: Quoted prices in active markets for identical assets,
- (b) Level 2: Indirect observable inputs, including prices for similar assets and market corroborated inputs, and
- (c) Level 3: Unobservable inputs reflecting assumptions that market participants would use, including assumptions about risk.

Supporting documentation received from pricing vendors detailing the inputs, models and processes used in the vendor’s evaluation process is used to determine the appropriate fair value hierarchy. Documentation from each pricing vendor is reviewed and monitored periodically to ensure they are consistent with pricing policy procedures. Market information obtained from brokers with respect to security valuations is also considered in the pricing hierarchy.

	Level 1	Level 2	Level 3	Total
Bonds – Industrial & Misc.	\$ 5,342,372	\$ 21,168,413	\$ 2,090,065	\$ 28,600,850
Perpetual Preferred Stock – Industrial & Misc.	0	22,882,216	0	22,882,216
Common Stock – Industrial & Misc.	7,246,651	734,100	0	7,980,751
Common Stock – Mutual Funds	5,617,920	0	0	5,617,920
Total Common Stocks	12,864,571	734,100	0	13,598,671
Total Assets at Fair Value	\$ 18,206,943	\$ 44,784,729	\$ 2,090,065	\$ 65,081,737

The Company held no liabilities measured at fair value as of September 30, 2013. There were no transfers between Level 1 and Level 2 for assets held at September 30, 2013.

(2) Rollforward of Level 3 Fair Value Measurements Above:

	Bond – Industrial & Misc.	Total Level 3
Beginning Balance at January 1, 2013	\$ 6,083,034	\$ 6,083,034
Transfers into Level 3 (a)	735,150	735,150
Transfers into Level 3 (b)	1,411,865	1,411,865
Transfers out of Level 3 (a)	(265,862)	(265,862)
Transfers out of Level 3 (b)	(3,302,404)	(3,302,404)
Total Gains and (Losses) included in Net Income	(24,310)	(24,310)
Total Gains and (Losses) included in Surplus	66,099	66,099
Purchases	0	0
Sales	(2,613,507)	(2,613,507)
Ending Balance at September 30, 2013	\$ 2,090,065	\$ 2,090,065

- (a) Measurement basis changed from amortized cost to fair value based on NAIC designation.
- (b) Transfers due to a change in observability of inputs used to determine fair value.

(3) Policy on Transfers Into and Out of Level 3

Transfers in and out of Level 3 are recognized based on the beginning of the reporting period.

(4) Input and Techniques Used for Level 2 and Level 3 Fair Values

Fair value measurements for fixed income and equity securities are based on values either published by the NAIC’s Securities Valuation Office (SVO) or from an external pricing source. Under certain circumstances, if neither an SVO price nor vendor price is available, a price may be obtained from a broker. Short-term securities and cash equivalents are valued at amortized cost.

When published prices from the SVO are not available, the Company relies predominately on external pricing sources that have been evaluated and approved by the investment manager’s pricing policy committee. Generally, external pricing service vendors use a pricing methodology involving the market approach, including pricing models, which use prices and relevant market information regarding a particular security or securities with similar characteristics to establish a valuation.

NOTES TO FINANCIAL STATEMENTS

Investments for which external sources are not available or are determined by the investment manager not to be representative of fair value are recorded at fair value as determined by the investment manager. In determining the fair value of such investments, the investment manager considers one or more of the following factors: type of security held, convertibility or exchangeability of the security, redeemability of the security (including timing of such redemptions), application of industry accepted valuation models, recent trading activity, liquidity, estimates of liquidation value, purchase cost, and prices received for securities with similar terms of the same issuer or similar issuers. At September 30, 2013, there were no investments for which external sources were unavailable to determine fair value.

- (5) Derivative Fair Values
- Not applicable.

- B. Other Fair Value Disclosures
- Not applicable.

- C. Fair Values for All Financial Instruments by Levels 1, 2, and 3

The table below reflects the fair values and admitted values of all admitted assets and liabilities that are financial instruments excluding those accounted for under the equity method (subsidiaries). The fair values are also categorized into the three-level fair value hierarchy as described above in Note 20A.

	<u>Fair Value</u>	<u>Admitted Value</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Not Practical (Carrying Value)</u>
Bonds	\$208,837,733	\$204,739,481	\$23,829,143	\$175,579,267	\$9,429,323	\$0
Preferred Stocks	35,265,815	34,966,535	0	35,265,815	0	0
Common Stocks	13,598,671	13,598,671	12,864,571	734,100	0	0
Cash Equivalents & Short-Term Investments	32,596,794	32,596,794	24,684,294	7,912,500	0	0
Total Assets	\$290,299,013	\$285,901,481	\$61,378,008	\$219,491,682	\$9,429,323	\$0

- D. Financial Instruments for which Not Practical to Determine Fair Values
- Not applicable.

Note 21 - Other Items

No significant change.

Note 22 - Events Subsequent

Not applicable.

Note 23 - Reinsurance

The quota share reinsurance agreement with JRCC was terminated effective January 1, 2013. A cash settlement of \$1,879,360 was paid and JRCC agreed to release the Company from any further liability. No earned premiums or incurred losses were recorded as a result of the termination. A decrease in underwriting expenses incurred of \$148,401 was recorded relating to ceding commissions.

Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not applicable.

NOTES TO FINANCIAL STATEMENTS

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

The following table provides an analysis of the change in loss and loss adjustment expense (LAE) reserves net of reinsurance recoverables for the indicated periods (in thousands):

	September 30, 2013	December 31, 2012
Balance at beginning of period	\$ 142,326	\$ 151,417
Loss and loss adjustment expense incurred:		
Current accident year	21,646	33,857
Prior accident years	(11,191)	(8,306)
	10,455	25,551
Loss and loss adjustment expense payments made for:		
Current accident year	1,708	2,471
Prior accident years	23,546	32,171
	25,254	34,642
Balance at end of period	\$ 127,527	\$ 142,326

Reserves for incurred losses and LAE attributable to insured events of prior years, decreased by approximately \$11.2 million in 2013, resulting primarily from products liability and other liability lines of business. This change is the result of an ongoing analysis of recent development trends and additional information regarding individual claims.

Note 26 - Intercompany Pooling Arrangements

The Company entered into an intercompany reinsurance pooling arrangement ("the pooling") with its Unites States affiliated insurance carriers (see below), effective January 1, 2013. All lines of business are subject to the pooling net of any outside reinsurance coverage carried by the participants. Net business includes business in force on January 1, 2013 and all business written subsequent to that date. The pooling provides for proportionate sharing of premiums earned, losses and loss adjustment expenses incurred, and underwriting expenses incurred.

The participation percentages are as follows:

Stonewood National Insurance Company (lead company)	NAIC #31925	13%
James River Insurance Company	NAIC #12203	75%
Stonewood Insurance Company	NAIC #11828	6%
James River Casualty Company	NAIC #13685	5%
Stonewood General Insurance Company	NAIC #35211	1%

As a result of the pooling, the amount due to Stonewood National Insurance Company is \$2,994,517 as of September 30, 2013.

Note 27 - Structured Settlements

Not applicable.

Note 28 - Health Care Receivables

Not applicable.

Note 29 - Participating Policies

Not applicable.

Note 30 - Premium Deficiency Reserves

No significant change.

Note 31 - High Deductibles

Not applicable.

NOTES TO FINANCIAL STATEMENTS

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

Not applicable.

Note 33 - Asbestos/Environmental Reserves

No significant change.

Note 34 - Subscriber Savings Accounts

Not applicable.

Note 35 - Multiple Peril Crop Insurance

No significant change.

Note 36 - Financial Guaranty Insurance

Not applicable.

JAMES RIVER INSURANCE COMPANY
GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES - GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☒ No ☐
- 1.2

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

Yes ☒ No ☐
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒
- 2.2

If yes, date of change:

.....
- 3.1

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒
- 3.2

If the response to 3.1 is yes, provide a brief description of those changes.

- 4.1

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

Yes ☐ No ☒
- 4.2

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

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

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes ☐ No ☒ N/A ☐
-
-

- 6.1

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

12/31/2009.....
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2009.....
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

8/6/2010.....
- 6.4

By what department or departments?
Ohio Department of Insurance

- 6.5

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

Yes ☐ No ☐ N/A ☒
- 6.6

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

Yes ☐ No ☐ N/A ☒
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒
- 7.2

If yes, give full information:

- 8.1

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

Yes ☐ No ☒
- 8.2

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

- 8.3

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

Yes ☐ No ☒
- 8.4

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

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

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes ☒ No ☐
- 9.11

If the response to 9.1 is No, please explain:

- 9.2

Has the code of ethics for senior managers been amended?

Yes ☐ No ☒
- 9.21

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

- 9.3

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

Yes ☐ No ☒
- 9.31

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

PART 1 - FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes ☒ No ☐
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$.....0

PART 1 - INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes []No [X]

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

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

\$.....0

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

\$.....0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes [X]No []

14.2 If yes, please complete the following:

	1	2
	Prior Year-End	Current Quarter
	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
14.21 Bonds.....	\$0	\$0
14.22 Preferred Stock.....	\$0	\$0
14.23 Common Stock.....	\$15,270,827	\$15,130,604
14.24 Short-Term Investments.....	\$0	\$0
14.25 Mortgage Loans on Real Estate.....	\$0	\$0
14.26 All Other.....	\$0	\$0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$15,270,827	\$15,130,604
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above.....	\$0	\$0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes []No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes []No []

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$.....0

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$.....0

16.3 Total payable for securities lending reporting on the liability page:

\$.....0

17. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [X]No []

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

1	2
Name of Custodian(s)	Custodian Address
U. S. Bank, N.A.	1025 Connecticut Avenue, N.W., Suite 517, Washington, DC 20036
U. S. Bank, N.A.	One Federal St., Third Floor, Boston, Massachusetts 02110

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes []No [X]

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

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

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

1	2	3
Central Registration Depository	Name(s)	Address
N/A	General Re - New England Asset Management	76 Batterson Park Road, Farmington, CT 06032
N/A	Angelo, Gordon & Co.	245 Park Ave., New York, NY 10167

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

Yes [X]No []

18.2 If no, list exceptions:

JAMES RIVER INSURANCE COMPANY
GENERAL INTERROGATORIES (continued)

PART 2

PROPERTY & CASUALTY INTERROGATORIES

1.

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?
If yes, attach an explanation.
The Company entered into an intercompany pooling arrangement effective Jan 1, 2013 with a 75% participation.

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

2.

Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?
If yes, attach an explanation.

Yes [] No [X]

3.1

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

Yes [] No [X]

3.2

If yes, give full and complete information thereto:

4.1

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

Yes [] No [X]

4.2

If yes, complete the following schedule:

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

5.

Operating Percentages:

5.1

A&H loss percent

0.0 %

5.2

A&H cost containment percent

0.0 %

5.3

A&H expense percent excluding cost containment expenses

0.0 %

6.1

Do you act as a custodian for health savings accounts?

Yes [] No [X]

6.2

If yes, please provide the amount of custodial funds held as of the reporting date.

0

6.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]

6.4

If yes, please provide the amount of funds administered as of the reporting date.

0

JAMES RIVER INSURANCE COMPANY

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Is Insurer Authorized? (YES or NO)
Affiliates				
31925.....	4-1019055.....	Stonewood National Insurance Company.....	OH.....	YES.....
All Other Insurers				
00000.....	AA-1129000.....	Lloyd's Syndicate Number 3000.....	UK.....	YES.....
00000.....	AA-1120116.....	Lloyd's Syndicate Number 3902.....	UK.....	YES.....

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

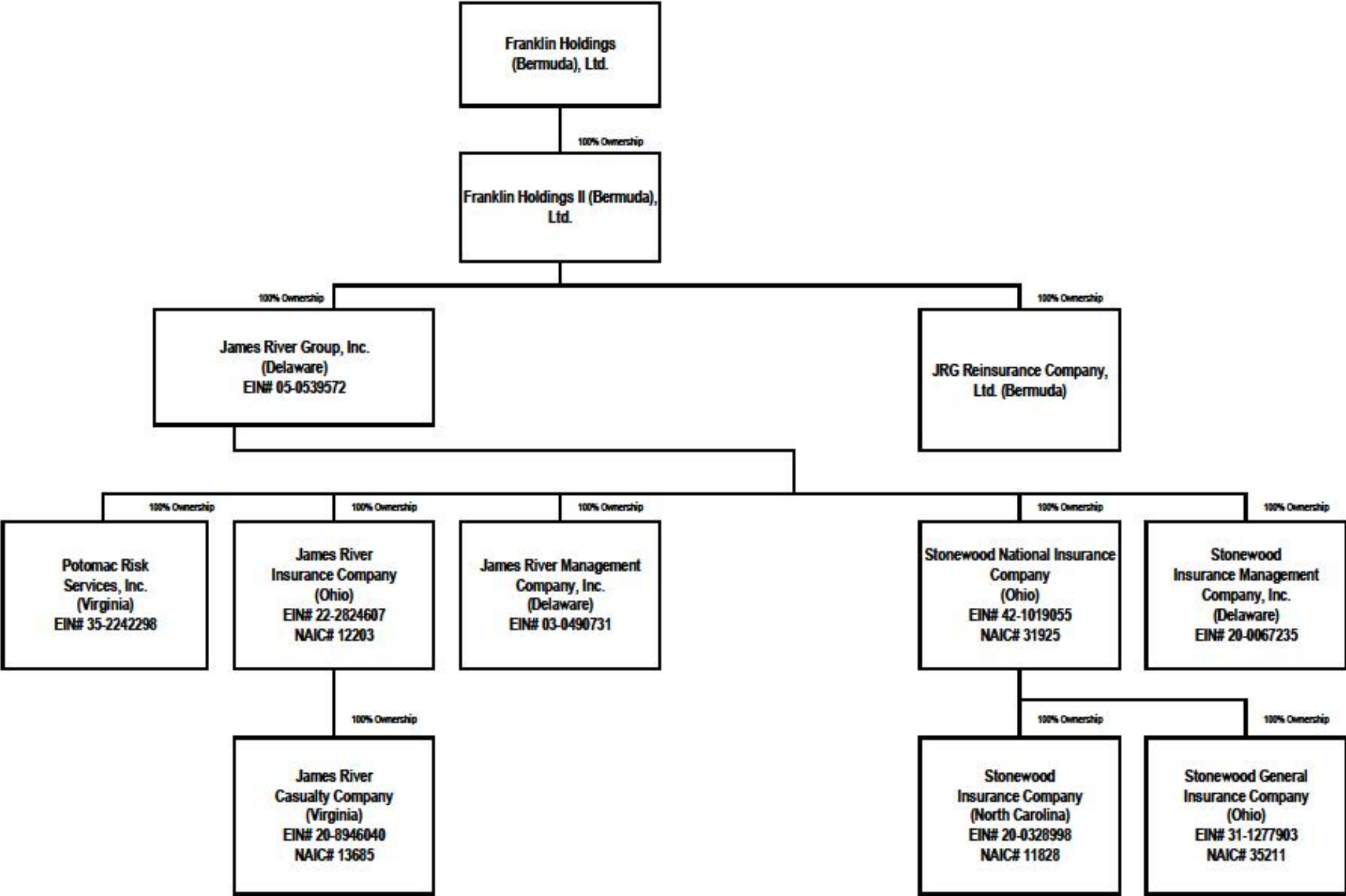
		1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
			2	3	4	5	6	7
States, Etc.		Active Status	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date
1.	Alabama.....	AL.....E.....	1,760,243	1,212,945	99,475	42,748	3,499,111	2,627,228
2.	Alaska.....	AK.....E.....	346,266	313,239	55,000		552,856	462,681
3.	Arizona.....	AZ.....E.....	2,744,190	2,454,965	17,952	1,727,348	5,745,800	5,487,527
4.	Arkansas.....	AR.....E.....	1,022,918	888,930	79,515	33,199	1,624,057	1,669,071
5.	California.....	CA.....E.....	44,222,854	36,025,368	8,554,699	6,723,688	84,796,279	74,992,090
6.	Colorado.....	CO.....E.....	2,236,769	1,653,178	3,152,832	79,187	3,731,592	5,371,034
7.	Connecticut.....	CT.....E.....	1,264,562	2,597,337	86,930	(105,307)	4,535,198	2,906,211
8.	Delaware.....	DE.....E.....	257,638	195,203		271,731	546,476	462,535
9.	District of Columbia.....	DC.....E.....	242,490	203,655			378,442	416,723
10.	Florida.....	FL.....E.....	10,746,526	7,524,943	1,038,666	1,645,630	14,712,085	16,148,287
11.	Georgia.....	GA.....E.....	2,169,244	1,856,931	1,653,465	831,052	3,872,854	4,117,360
12.	Hawaii.....	HI.....E.....	391,071	389,037	275		1,053,726	1,035,917
13.	Idaho.....	ID.....E.....	378,425	351,765		342,341	911,558	982,411
14.	Illinois.....	IL.....E.....	4,554,703	4,569,761	160,018	125,959	11,070,445	10,191,069
15.	Indiana.....	IN.....E.....	1,069,229	1,059,899	375,932	(7,126)	2,500,346	4,233,448
16.	Iowa.....	IA.....E.....	469,028	398,913			706,712	811,532
17.	Kansas.....	KS.....E.....	583,806	501,974	225,000		1,077,915	1,026,644
18.	Kentucky.....	KY.....E.....	638,431	498,033	(688)	19,595	1,030,717	1,292,570
19.	Louisiana.....	LA.....E.....	3,357,542	2,960,897	1,782,247	434,648	6,716,019	9,555,849
20.	Maine.....	ME.....E.....	130,335	156,535			291,304	310,669
21.	Maryland.....	MD.....E.....	1,526,629	965,588	209,000	1,002	2,741,903	3,120,811
22.	Massachusetts.....	MA.....E.....	2,048,721	1,629,714	65,944	668,524	3,934,155	3,856,698
23.	Michigan.....	MI.....E.....	1,150,455	1,008,373	200,600		2,811,612	2,497,006
24.	Minnesota.....	MN.....E.....	1,131,633	975,413	10,000	145,000	1,901,153	1,960,142
25.	Mississippi.....	MS.....E.....	354,658	703,837	500	262,016	1,079,556	1,374,218
26.	Missouri.....	MO.....E.....	1,591,574	2,626,940	84,750	901,379	5,238,564	6,844,712
27.	Montana.....	MT.....E.....	398,228	293,868			803,050	553,677
28.	Nebraska.....	NE.....E.....	715,358	752,675	450,000	81,000	1,242,709	1,877,041
29.	Nevada.....	NV.....E.....	1,929,807	1,764,002	212,575	2,191,071	5,027,987	3,794,805
30.	New Hampshire.....	NH.....E.....	517,478	223,983	2,342	10,722	843,525	518,934
31.	New Jersey.....	NJ.....E.....	4,964,611	3,118,071	755,276	756,232	8,047,316	8,699,008
32.	New Mexico.....	NM.....E.....	423,732	508,176		484,595	753,801	1,055,604
33.	New York.....	NY.....E.....	11,014,707	9,189,875	738,843	1,363,380	24,344,564	21,576,531
34.	North Carolina.....	NC.....E.....	1,330,570	1,459,296	54,500	218,500	5,299,081	5,235,610
35.	North Dakota.....	ND.....E.....	259,817	235,106			1,020,626	591,615
36.	Ohio.....	OH.....L.....						
37.	Oklahoma.....	OK.....E.....	2,082,110	1,251,822	26,808	982,671	2,745,816	3,223,179
38.	Oregon.....	OR.....E.....	733,940	828,346	(5,293)	155,866	1,645,553	2,030,488
39.	Pennsylvania.....	PA.....E.....	3,255,426	3,159,286	504,350	162,551	7,491,192	10,488,536
40.	Rhode Island.....	RI.....E.....	278,306	304,487	110,000	995,000	737,958	873,629
41.	South Carolina.....	SC.....E.....	837,126	704,536	63,950	44,900	1,816,734	1,926,633
42.	South Dakota.....	SD.....E.....	134,995	122,957			189,781	216,151
43.	Tennessee.....	TN.....E.....	1,661,253	1,778,438	18,959	206,087	3,825,317	3,404,724
44.	Texas.....	TX.....E.....	11,756,251	10,088,217	2,740,583	3,071,815	19,985,858	23,432,989
45.	Utah.....	UT.....E.....	1,111,419	824,063	22,662	643	1,677,642	1,495,644
46.	Vermont.....	VT.....E.....	37,670	43,105			66,616	81,056
47.	Virginia.....	VA.....E.....	2,095,189	1,793,082	13,620	203,000	4,319,369	3,414,546
48.	Washington.....	WA.....E.....	2,855,553	2,453,080	264,900	296,640	7,461,840	5,712,628
49.	West Virginia.....	WV.....E.....	1,152,633	1,053,242		20,753	1,809,633	1,496,898
50.	Wisconsin.....	WI.....E.....	708,857	783,151	2,606,000	14,374	1,406,500	3,000,457
51.	Wyoming.....	WY.....E.....	648,888	161,901			977,544	408,560
52.	American Samoa.....	AS.....N.....						
53.	Guam.....	GU.....N.....						
54.	Puerto Rico.....	PR.....E.....						
55.	US Virgin Islands.....	VI.....E.....	22,046	19,975			122,411	164,426
56.	Northern Mariana Islands.....	MP.....N.....						
57.	Canada.....	CAN.....N.....						
58.	Aggregate Other Alien.....	OT.....XXX.....	0	0	0	0	0	0
59.	Totals.....	(a).....1.....	137,315,910	116,638,113	26,432,187	25,402,414	270,722,858	269,027,812

DETAILS OF WRITE-INS

58001.	XXX.....						
58002.	XXX.....						
58003.	XXX.....						
58998. Summary of remaining write-ins for Line 58 from overflow page....	XXX.....	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....	XXX.....	0	0	0	0	0	0

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

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART



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

JAMES RIVER INSURANCE COMPANY
PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....	713,655	1,113,383	156.0	(21.5)
2. Allied lines.....	5,404,397	(1,365,009)	(25.3)	0.1
3. Farmowners multiple peril.....			0.0	
4. Homeowners multiple peril.....			0.0	
5. Commercial multiple peril.....			0.0	
6. Mortgage guaranty.....			0.0	
8. Ocean marine.....			0.0	
9. Inland marine.....	55,232	(24,563)	(44.5)	11.8
10. Financial guaranty.....			0.0	
11.1. Medical professional liability - occurrence.....	87,118	38,011	43.6	92.7
11.2. Medical professional liability - claims-made.....	5,914,251	1,253,660	21.2	35.1
12. Earthquake.....	1,250,112	(202,027)	(16.2)	4.7
13. Group accident and health.....			0.0	
14. Credit accident and health.....			0.0	
15. Other accident and health.....			0.0	
16. Workers' compensation.....			0.0	
17.1. Other liability-occurrence.....	67,117,302	18,561,587	27.7	45.6
17.2. Other liability-claims made.....	14,792,607	770,658	5.2	(4.8)
17.3. Excess workers' compensation.....			0.0	
18.1. Products liability-occurrence.....	23,574,525	7,551,695	32.0	33.8
18.2. Products liability-claims made.....	7,377,055	1,476,289	20.0	11.8
19.1, 19.2. Private passenger auto liability.....			0.0	
19.3, 19.4. Commercial auto liability.....	576,356	332,026	57.6	
21. Auto physical damage.....			0.0	
22. Aircraft (all perils).....			0.0	
23. Fidelity.....			0.0	
24. Surety.....			0.0	
26. Burglary and theft.....			0.0	
27. Boiler and machinery.....			0.0	
28. Credit.....			0.0	
29. International.....			0.0	
30. Warranty.....			0.0	
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.0	
35. Totals.....	126,862,610	29,505,710	23.3	31.1
DETAILS OF WRITE-INS				
3401.			0.0	
3402.			0.0	
3403.			0.0	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.0	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.0	

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....	158,374	900,275	716,573
2. Allied lines.....	1,328,343	7,012,113	5,740,027
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....			
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....	10,184	69,678	45,698
10. Financial guaranty.....			
11.1. Medical professional liability - occurrence.....	43,420	100,766	122,761
11.2. Medical professional liability - claims made.....	1,941,199	6,109,982	6,316,339
12. Earthquake.....	195,364	936,281	864,593
13. Group accident and health.....			
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1. Other liability-occurrence.....	23,421,314	70,976,508	57,368,398
17.2. Other liability-claims made.....	5,223,136	14,868,442	14,753,782
17.3. Excess workers' compensation.....			
18.1. Products liability-occurrence.....	8,565,857	27,358,339	22,453,887
18.2. Products liability-claims made.....	2,317,047	7,274,307	8,256,055
19.1 19.2. Private passenger auto liability.....			
19.3 19.4. Commercial auto liability.....	1,316,997	1,709,219	
21. Auto physical damage.....			
22. Aircraft (all perils).....			
23. Fidelity.....			
24. Surety.....			
26. Burglary and theft.....			
27. Boiler and machinery.....			
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	44,521,235	137,315,910	116,638,113
DETAILS OF WRITE-INS			
3401.			
3402.			
3403.			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2013 Loss and LAE Payments on Claims Reported as of Prior Year-End	2013 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2013 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/Deficiency (Cols. 11 + 12)
1. 2010 + Prior.....	14,563	60,425	74,988	7,689	1,240	8,929	10,971	558	42,844	54,373	4,097	(15,783)	(11,686)
2. 2011.....	7,106	14,894	22,000	4,950	379	5,329	3,736	281	11,845	15,862	1,580	(2,389)	(809)
3. Subtotals 2011 + Prior.....	21,669	75,319	96,988	12,639	1,619	14,258	14,707	839	54,689	70,235	5,677	(18,172)	(12,495)
4. 2012.....	9,177	20,425	29,602	(7,156)	708	(6,448)	19,939	744	16,671	37,354	3,606	(2,302)	1,304
5. Subtotals 2012 + Prior.....	30,846	95,744	126,590	5,483	2,327	7,810	34,646	1,583	71,360	107,589	9,283	(20,474)	(11,191)
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	1,708	1,708	XXX.....	2,705	17,233	19,938	XXX.....	XXX.....	XXX.....
7. Totals.....	30,846	95,744	126,590	5,483	4,035	9,518	34,646	4,288	88,593	127,527	9,283	(20,474)	(11,191)
8. Prior Year-End's Surplus As Regards Policyholders	213,338										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. ....30.1 %	2. ....(21.4)%	3. ....(8.8)%
												Col. 13, Line 7 Line 8	
												4. ....(5.2)%	

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

Explanation:

- 1.
- 2.
- 3.
- 4.

Bar Code:



JAMES RIVER INSURANCE COMPANY
Overflow Page for Write-Ins

NONE

JAMES RIVER INSURANCE COMPANY
SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	305,998,567	326,729,168
2. Cost of bonds and stocks acquired.....	131,186,146	139,118,193
3. Accrual of discount.....	1,310,141	2,345,737
4. Unrealized valuation increase (decrease).....	(4,285,587)	3,834,379
5. Total gain (loss) on disposals.....	8,990,852	7,728,683
6. Deduct consideration for bonds and stocks disposed of.....	174,410,372	172,411,306
7. Deduct amortization of premium.....	354,456	926,773
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other than temporary impairment recognized.....		419,514
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	268,435,291	305,998,567
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	268,435,291	305,998,567

SCHEDULE D - PART 1B

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

Q102		1	2	3	4	5	6	7	8
		Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
	BONDS								
	1. Class 1 (a).....	109,822,394	723,991,479	728,886,417	36,936	155,359,461	109,822,394	104,964,392	130,601,492
	2. Class 2 (a).....	19,862,991	5,026,350		(10,339)	19,873,173	19,862,991	24,879,002	47,231,051
	3. Class 3 (a).....	24,813,329	2,324,524	3,415,041	374,089	27,807,266	24,813,329	24,096,901	28,265,629
	4. Class 4 (a).....	66,203,416	24,665,161	15,178,518	(326,714)	64,831,608	66,203,416	75,363,345	60,167,606
	5. Class 5 (a).....	8,680,807	665,018	1,317,546	4,356	5,868,942	8,680,807	8,032,635	5,187,974
	6. Class 6 (a).....								
	7. Total Bonds.....	229,382,937	756,672,532	748,797,522	78,328	273,740,450	229,382,937	237,336,275	271,453,752
	PREFERRED STOCK								
	8. Class 1.....					15,142,813			14,393,750
	9. Class 2.....	26,474,356			(1,567,341)	9,266,088	26,474,356	24,907,015	8,975,521
	10. Class 3.....	10,059,520				10,059,520	10,059,520	10,059,520	10,059,520
	11. Class 4.....								
	12. Class 5.....								
	13. Class 6.....								
	14. Total Preferred Stock.....	36,533,876	0	0	(1,567,341)	34,468,421	36,533,876	34,966,535	33,428,791
	15. Total Bonds and Preferred Stock.....	265,916,813	756,672,532	748,797,522	(1,489,013)	308,208,871	265,916,813	272,302,810	304,882,543

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$.....7,912,500; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

JAMES RIVER INSURANCE COMPANY
SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....	24,684,294	XXX.....	24,684,294	1,733	.....

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	12,149,099	16,062,603
2. Cost of short-term investments acquired.....	160,525,043	44,571,933
3. Accrual of discount.....	493	.....
4. Unrealized valuation increase (decrease).....	.....	.....
5. Total gain (loss) on disposals.....	242	.....
6. Deduct consideration received on disposals.....	147,990,583	48,485,437
7. Deduct amortization of premium.....	.....	.....
8. Total foreign exchange change in book/adjusted carrying value.....	.....	.....
9. Deduct current year's other than temporary impairment recognized.....	.....	.....
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	24,684,294	12,149,099
11. Deduct total nonadmitted amounts.....	.....	.....
12. Statement value at end of current period (Line 10 minus Line 11).....	24,684,294	12,149,099

Sch. DB-Pt A-Verification
NONE

Sch. DB-Pt B-Verification
NONE

Sch. DB-Pt C-Sn 1
NONE

Sch. DB-Pt C-Sn 2
NONE

Sch. DB-Verification
NONE

JAMES RIVER INSURANCE COMPANY

SCHEDULE E- VERIFICATION

Cash Equivalents

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	10,717,500	10,106,747
2. Cost of cash equivalents acquired.....	2,234,801,591	2,080,439,332
3. Accrual of discount.....	15	720
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....	394	96
6. Deduct consideration received on disposals.....	2,237,607,000	2,079,829,395
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/ adjusted carrying value.....		
9. Deduct current year's other than temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	7,912,500	10,717,500
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	7,912,500	10,717,500

Sch. A-Pt 2
NONE

Sch. A-Pt 3
NONE

Sch. B-Pt 2
NONE

Sch. B-Pt 3
NONE

Sch. BA-Pt 2
NONE

Sch. BA-Pt 3
NONE

SCHEDULE D - PART 3

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

1			2	3	4	5	6	7	8	9	10
CUSIP Identification			Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - Industrial and Miscellaneous											
00828K	AF	2	AFFINION GROUP INC TL B.....		03/19/2013	RBS SECURITIES INC.....		456,299	467,400		4FE.....
04930B	AF	9	ATLAS ENERGY LP TL B.....		07/22/2013	DEUTSCHE BANK.....		564,957	570,664		4FE.....
05542U	AB	3	BBTS BORROWER TL B.....		07/12/2013	UBS WARBURG.....		445,632	445,632		5FE.....
11221M	AB	7	BRONCO MIDSTREAM TL B.....		08/14/2013	BARCLAYS CAPITAL.....		1,809,720	1,828,000		4FE.....
14041N	DB	4	CAPITAL ONE MULTI-ASSET EXECUT 06-A11 A1.....		07/09/2013	BARCLAYS CAPITAL.....		3,833,156	3,850,000	755	1FE.....
14041N	DL	2	CAPITAL ONE MULTI-ASSET EXECUT 07-A2 A2.....		07/11/2013	BARCLAYS CAPITAL.....		3,226,514	3,250,000	24	1FE.....
14173V	AE	3	ONEX CARESTREAM HEALTH TL B.....		06/05/2013	CREDIT SUISSE FIRST BOSTON.....		1,345,510	1,366,000		4FE.....
22764Y	AH	8	CROSSMARK HOLDINGS TL B.....		08/09/2013	BANK OF AMERICA.....		560,185	563,000		4FE.....
32007U	AL	3	FIRST DATA CORP TL 2018.....		06/28/2013	VARIOUS.....		1,762,550	1,795,952		4FE.....
38113G	AC	2	GOLDEN NUGGET TL B.....		08/30/2013	CAPITALIZED INTEREST.....		737	737		5FE.....
38113G	AF	5	GOLDEN NUGGET INC TL DD.....		08/30/2013	CAPITALIZED INTEREST.....		411	411		5FE.....
42718H	AC	1	HERFF JONES INC TL B.....		06/27/2013	VARIOUS.....		2,384,727	2,405,085		4FE.....
49387T	AJ	5	KIK CUSTOM PRODUCTS TL.....		08/13/2013	CREDIT SUISSE FIRST BOSTON.....		1,075,742	1,095,552		4FE.....
60001P	AB	3	CSM BAKERY SUPPLIES TL B.....		06/19/2013	VARIOUS.....		2,554,098	2,578,761		4FE.....
60001P	AD	9	MILL US ACQ (CSM BAKERY) 2LN TL.....		09/09/2013	MORGAN STANLEY & CO.....		218,238	221,000		5FE.....
64887R	AB	0	TRIDENT USA HEALTH TLL B.....		08/12/2013	CITIGROUP GLOBAL MARKETS.....		1,344,949	1,354,610		4FE.....
68234P	AC	3	ONE CALL MEDICAL INC TL B.....		07/09/2013	JEFFERIES & COMPANY INC.....		1,013,760	1,024,000		4FE.....
749607	AC	1	RLI CORP.....		09/26/2013	STIFEL-HANIFEN DIVIS.....		5,026,350	5,000,000		2FE.....
78004N	AC	5	ROYAL ADHESIVES TL B.....		07/26/2013	MORGAN STANLEY & CO.....		1,378,991	1,392,921		4FE.....
78413D	AB	4	SMART & FINAL INC.....		06/28/2013	MORGAN STANLEY & CO.....		467,280	472,000		4FE.....
85849G	AB	6	STEINWAY MUSICAL 1LN TL.....		09/12/2013	BANK OF AMERICA.....		405,363	407,400		4FE.....
87263E	AJ	7	TPF II LC LLC TL.....		08/16/2013	GOLDMAN SACHS.....		821,925	843,000		4FE.....
89421H	AG	1	TRAVELPORT LLC TL B.....		06/28/2013	CREDIT SUISSE FIRST BOSTON.....		1,905,715	1,918,565		4FE.....
90290H	AB	8	USIC (OPE) HOLDINGS INC.....		07/26/2013	DEUTSCHE BANK.....		608,940	612,000		4FE.....
90290P	AB	0	US RENAL CARE INC TL B.....		08/08/2013	VARIOUS.....		1,467,374	1,481,057		4FE.....
92553J	AL	0	VEYANCE TECHNOLOGIES TL.....		03/19/2013	CITIGROUP GLOBAL MARKETS.....		420,783	420,258		4FE.....
93316U	AD	9	WALTER ENERGY INC TL B.....		06/17/2013	DEUTSCHE BANK.....		366,200	366,200		4FE.....
96811W	AD	8	WILDHORSE RESOURCES TL 2ND LIEN.....		07/29/2013	WELLS FARGO FINANCIAL.....		471,755	474,033		4FE.....
C9536D	AD	4	VANTAGE PIPELINE US TL B.....		08/19/2013	ROYAL BANK OF CANADA.....		1,680,328	1,688,771		3FE.....
C8843Q	AB	9	TERVITA CORP TL B.....	I.....	06/25/2013	RBC CAPITAL MARKETS.....		968,625	975,945		4FE.....
D1200Y	AC	1	SPRINGER SCIENCE TL B2.....	R.....	07/25/2013	CREDIT SUISSE FIRST BOSTON.....		509,713	528,200		4FE.....
Q3930A	AB	4	FORTESCUE METALS GROUP LTD TL.....	R.....	06/25/2013	CREDIT SUISSE FIRST BOSTON.....		644,197	647,434		3FE.....
3899999.			Total - Bonds - Industrial & Miscellaneous.....					39,740,724	40,044,588	779	XXX.....
8399997.			Total - Bonds - Part 3.....					39,740,724	40,044,588	779	XXX.....
8399999.			Total - Bonds.....					39,740,724	40,044,588	779	XXX.....
9999999.			Total - Bonds, Preferred and Common Stocks.....					39,740,724	XXX.....	779	XXX.....

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

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value At Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Desig- nation or Market Indicator (a)
8399997.	Total - Bonds - Part 4.....					26,504,421	26,549,517	25,990,227	9,188,518	78,794	47,304	0	126,098	0	26,194,820	0	309,602	309,602	471,408	XXX...	..XXX....
8399999.	Total - Bonds.....					26,504,421	26,549,517	25,990,227	9,188,518	78,794	47,304	0	126,098	0	26,194,820	0	309,602	309,602	471,408	XXX...	..XXX....
9999999.	Total - Bonds, Preferred and Common Stocks.....					26,504,421	XXX.....	25,990,227	9,188,518	78,794	47,304	0	126,098	0	26,194,820	0	309,602	309,602	471,408	XXX...	..XXX....

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

Sch. DB-Pt A-Sn 1
NONE

Sch. DB-Pt B-Sn 1
NONE

Sch. DB-Pt B-Sn 1B-Broker List
NONE

Sch. DB-Pt D-Sn 1
NONE

Sch. DB-Pt D-Sn 2
NONE

Sch. DL-Pt. 1
NONE

Sch. DL-Pt. 2
NONE

JAMES RIVER INSURANCE COMPANY
SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
KeyBank, N.A. Cleveland, OH.....					(1,457,585)	(2,471,059)	(3,248,638)	XXX..
Wells Fargo, N.A..... Richmond, VA.....					1,940,919	1,982,165	2,062,959	XXX..
U.S. Bank..... Boston, MA.....					19,311	.....	.....142,393	XXX..
Federal Home Loan Bank..... Cinnцинati, OH.....					150,653	150,654	158,433	XXX..
0199999. Total Open Depositories.....	...XXX.....	...XXX.....	0	0	653,298	(338,240)	(884,853)	XXX..
0399999. Total Cash on Deposit.....	...XXX.....	...XXX.....	0	0	653,298	(338,240)	(884,853)	XXX..
0599999. Total Cash.....	...XXX.....	...XXX.....	0	0	653,298	(338,240)	(884,853)	XXX..

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations							
KEYBANK NATIONAL ASSOCIATION REPO.....		09/30/2013	0.020	10/01/2013	7,912,500	4	2,929
3299999. Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations.....					7,912,500	4	2,929
3899999. Total - Industrial and Miscellaneous (Unaffiliated).....					7,912,500	4	2,929
Total Bonds							
7799999. Subtotals - Issuer Obligations.....					7,912,500	4	2,929
8399999. Subtotals - Bonds.....					7,912,500	4	2,929
8699999. Total - Cash Equivalents.....					7,912,500	4	2,929



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

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

Physicians - Including Surgeons and Osteopaths

			1	2	Direct Losses Paid		5	Direct Losses Unpaid		8
			Direct Premiums Written	Direct Premiums Earned	3 Amount	4 Number of Claims	Direct Losses Incurred	6 Amount Reported	7 Number of Claims	Direct Losses Incurred But Not Reported
States, Etc.										
1.	Alabama.....	AL	105,483	110,299			(4,211)	150,000	2	116,488
2.	Alaska.....	AK								
3.	Arizona.....	AZ	340,001	397,910			(71,291)	50,000	1	420,237
4.	Arkansas.....	AR	57,304	93,933			40,865	105,001	3	99,204
5.	California.....	CA	1,194,517	909,991	107,681	3	(58,128)	245,001	9	961,053
6.	Colorado.....	CO	94,958	85,676			11,737	1	1	90,483
7.	Connecticut.....	CT	105,267	84,500			(17,566)			89,241
8.	Delaware.....	DE	36,989	45,776			(11,946)			48,344
9.	District of Columbia.....	DC								
10.	Florida.....	FL	3,110	24,582			60			25,961
11.	Georgia.....	GA	244,983	274,759	650,000	1	605,750	35,101	4	290,176
12.	Hawaii.....	HI								
13.	Idaho.....	ID	4,681	6,559			(5,575)			6,927
14.	Illinois.....	IL	(28,975)	39,715			(28,588)			41,943
15.	Indiana.....	IN					(456)			
16.	Iowa.....	IA					(13,068)			
17.	Kansas.....	KS								
18.	Kentucky.....	KY	76,313	65,346			8,808	2,500	1	69,013
19.	Louisiana.....	LA	8,312	6,234			35			6,583
20.	Maine.....	ME								
21.	Maryland.....	MD	329,611	243,290			36,187	55,000	2	256,941
22.	Massachusetts.....	MA	(1,166)	4,447			1,411			4,697
23.	Michigan.....	MI	11,568	101,242			1,957			111,171
24.	Minnesota.....	MN	6,798	5,118			(5,968)			5,405
25.	Mississippi.....	MS	47,321	65,467			(8,536)	70,000	2	52,240
26.	Missouri.....	MO	29,336	17,169			10,716			18,132
27.	Montana.....	MT		981			(7,176)			1,036
28.	Nebraska.....	NE		2,244			62			2,370
29.	Nevada.....	NV		1,477			(30,968)			1,559
30.	New Hampshire.....	NH								
31.	New Jersey.....	NJ	53,820	60,620	4,000	1	42,502	50,000	1	117,762
32.	New Mexico.....	NM	28,840	18,745			(37,198)			19,507
33.	New York.....	NY		54,105			41,697	42,500	4	57,141
34.	North Carolina.....	NC	88,923	135,569			230,013	301,000	2	143,176
35.	North Dakota.....	ND	5,716	3,494			2,095			3,690
36.	Ohio.....	OH								
37.	Oklahoma.....	OK	285,669	171,202			144,503	60,001	4	180,808
38.	Oregon.....	OR	13,670	14,356			(6,384)			15,162
39.	Pennsylvania.....	PA								
40.	Rhode Island.....	RI								
41.	South Carolina.....	SC	11,726	25,182			2,830			26,595
42.	South Dakota.....	SD								
43.	Tennessee.....	TN	236,720	261,237			306,732	561,000	4	275,896
44.	Texas.....	TX	87,839	91,514			6,583	10,000	1	96,649
45.	Utah.....	UT	10,230	6,285			956			6,638
46.	Vermont.....	VT								
47.	Virginia.....	VA	180,597	214,104			83,244	163,001	7	226,118
48.	Washington.....	WA	5,144	6,667	5,000	1	(74,242)			7,041
49.	West Virginia.....	WV								
50.	Wisconsin.....	WI								
51.	Wyoming.....	WY	48,289	37,251			344			39,342
52.	American Samoa.....	AS								
53.	Guam.....	GU								
54.	Puerto Rico.....	PR								
55.	US Virgin Islands.....	VI								
56.	Northern Mariana Islands.....	MP								
57.	Canada.....	CAN								
58.	Aggregate Other Alien.....	OT	0	0	0	0	0	0	0	0
59.	Totals.....		3,723,594	3,687,046	766,681	6	1,197,786	1,900,106	48	3,934,729

DETAILS OF WRITE-INS

58001.								
58002.								
58003.								
58998.	Summary of remaining write-ins for Line 58 from overflow page.....	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 thru 58003+ 58998) (Line 58 above).....	0	0	0	0	0	0	0

Supplement A to Sch. T
NONE

Supplement A to Sch. T
NONE



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

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

Other Health Care Facilities

			Direct Losses Paid		5	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3	4		6	7	
States, Etc.			Amount	Number of Claims	Direct Losses Incurred	Amount Reported	Number of Claims	
1.	Alabama.....	AL.....	77,422	53,333	16,236			108,047
2.	Alaska.....	AK.....	4,013	2,240	(190)			4,360
3.	Arizona.....	AZ.....	56,228	60,773	(79,672)			120,784
4.	Arkansas.....	AR.....	9,714	12,189	5,622			25,357
5.	California.....	CA.....	599,500	607,006	271,225	81,501	6	1,210,976
6.	Colorado.....	CO.....	8,789	25,021	(18,028)			51,299
7.	Connecticut.....	CT.....	42,964	39,439	230,782	250,000	1	81,447
8.	Delaware.....	DE.....		3,740	2,232			7,278
9.	District of Columbia.....	DC.....	8,000	5,784	(2,273)			11,256
10.	Florida.....	FL.....	338,922	135,140	44,378	50,005	4	267,418
11.	Georgia.....	GA.....	27,055	53,872	143,614	11,636	2	120,951
12.	Hawaii.....	HI.....	4,852	3,106	(1,551)			6,044
13.	Idaho.....	ID.....	12,574	20,144	(26,476)			39,203
14.	Illinois.....	IL.....	87,752	79,213	87,134	235,001	5	178,531
15.	Indiana.....	IN.....	10,800	9,977	(35,151)			20,679
16.	Iowa.....	IA.....						
17.	Kansas.....	KS.....	18,158	12,664	(9,613)			24,646
18.	Kentucky.....	KY.....	13,610	10,157	(3,667)			19,767
19.	Louisiana.....	LA.....	8,445	19,751	(3,511)	10,000	1	38,440
20.	Maine.....	ME.....	18,393	18,106	(11,555)			36,452
21.	Maryland.....	MD.....	21,277	27,038	(39,269)	10,000	1	54,213
22.	Massachusetts.....	MA.....	35,161	45,980	5,110			90,701
23.	Michigan.....	MI.....	18,388	16,573	(24,590)			32,254
24.	Minnesota.....	MN.....	87,662	97,808	(128,234)			191,467
25.	Mississippi.....	MS.....	32,631	33,654	(26,177)			65,497
26.	Missouri.....	MO.....	14,253	29,960	10,258			62,592
27.	Montana.....	MT.....	5,355	4,685	(508)			10,726
28.	Nebraska.....	NE.....		1,122	1,152			2,183
29.	Nevada.....	NV.....	37,779	27,882	(18,579)	5,000	1	54,264
30.	New Hampshire.....	NH.....	11,710	5,911	6,230			12,719
31.	New Jersey.....	NJ.....	71,541	62,056	38,450	11,001	4	132,893
32.	New Mexico.....	NM.....	53,406	36,943	14,896	15,000	1	71,898
33.	New York.....	NY.....	38,096	47,750	(71,734)	25,000	2	106,497
34.	North Carolina.....	NC.....	46,479	45,407	(86,787)	5,000	1	88,371
35.	North Dakota.....	ND.....		356	(2,835)			692
36.	Ohio.....	OH.....						
37.	Oklahoma.....	OK.....	173,612	155,319	49,227	150,000	3	302,282
38.	Oregon.....	OR.....	10,954	17,224	(62,209)			33,521
39.	Pennsylvania.....	PA.....	24,340	64,381	(55,080)	216,000	5	129,214
40.	Rhode Island.....	RI.....		561	(1,667)			1,092
41.	South Carolina.....	SC.....			(27,245)			
42.	South Dakota.....	SD.....	13,271	11,785	(12,863)			22,936
43.	Tennessee.....	TN.....	42,376	30,992	27,584			60,317
44.	Texas.....	TX.....	55,452	79,754	(59,007)			155,218
45.	Utah.....	UT.....	56,081	38,170	10,396			77,159
46.	Vermont.....	VT.....	1,328	2,739	(3,887)			5,330
47.	Virginia.....	VA.....	71,321	65,747	(26,207)			127,957
48.	Washington.....	WA.....	77,380	75,255	11,814	1	1	168,879
49.	West Virginia.....	WV.....	4,456	3,177	(1,333)			6,184
50.	Wisconsin.....	WI.....	135,654	112,141	(17,481)	50,000	2	224,044
51.	Wyoming.....	WY.....		2,303	(25,078)	10,000	1	4,483
52.	American Samoa.....	AS.....						
53.	Guam.....	GU.....						
54.	Puerto Rico.....	PR.....						
55.	US Virgin Islands.....	VI.....						
56.	Northern Mariana Islands.....	MP.....						
57.	Canada.....	CAN.....						
58.	Aggregate Other Alien.....	OT.....	0	0	0	0	0	0
59.	Totals.....		2,487,154	2,314,328	93,883	1,135,145	41	4,668,518

DETAILS OF WRITE-INS

58001.	.....							
58002.	.....							
58003.	.....							
58998.	Summary of remaining write-ins for Line 58 from overflow page.....	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 thru 58003+ 58998) (Line 58 above).....	0	0	0	0	0	0	0

JAMES RIVER INSURANCE COMPANY
Overflow Page for Write-Ins

NONE