



ANNUAL STATEMENT

For the Year Ended December 31, 2014
of the Condition and Affairs of the

Infinity Assurance Insurance Company

NAIC Group Code.....3495, 3495
(Current Period) (Prior Period)

Organized under the Laws of Ohio
Incorporated/Organized..... June 3, 1980

Statutory Home Office

Main Administrative Office

Mail Address

Primary Location of Books and Records

Internet Web Site Address

Statutory Statement Contact

NAIC Company Code..... 39497

State of Domicile or Port of Entry Ohio

1400 Provident Tower, One East Fourth Street..... Cincinnati OH 45202
(Street and Number) (City or Town, State, Country and Zip Code)

3700 Colonnade Parkway, Suite 600..... Birmingham AL 35243-3216 205-870-4000
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

P.O. Box 830189..... Birmingham AL 35283-0189
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

3700 Colonnade Parkway, Suite 600..... Birmingham AL 35243-3216 205-870-4000
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

www.infinityauto.com

Rachelle Shealy Talley
(Name)
rachelle.talley@ipacc.com
(E-Mail Address)

Employer's ID Number..... 75-1227771

Country of Domicile US

Commenced Business..... July 11, 1980

205-803-8326
(Area Code) (Telephone Number) (Extension)

205-803-8080
(Fax Number)

POLICYHOLDER SERVICES AND CLAIM REPORTING: 1-800-477-5056

OFFICERS

Name	Title	Name	Title
Glen Nelson Godwin	President & CEO	Samuel James Simon	Senior Vice President & Secretary
Amy Kay Jordan	Vice President & Treasurer/Controller		

OTHER

Troy Perry Ballard	Assistant Treasurer	Mary Linn Clark	Assistant Treasurer
Vicki Windham Daniell	Assistant Treasurer	Ralph Allen Gravelle	Senior Vice President & CIO
Timothy Michael Kelly	Assistant Treasurer	James Henry Romaker	Assistant Secretary
Mitchell Silverman	Assistant Secretary	Roger Smith	Senior Vice President & CFO

DIRECTORS OR TRUSTEES

James Randall Gober	Glen Nelson Godwin	Amy Kay Jordan	Scott Christopher Pitrone
James Henry Romaker	Samuel James Simon	Roger Smith	

State of..... Alabama
County of..... Jefferson

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.

Glen Nelson Godwin	Samuel James Simon	Amy Kay Jordan
President & CEO	Senior Vice President & Secretary	Vice President & Treasurer/Controller

Subscribed and sworn to before me

This 23rd day of February, 2015

a. Is this an original filing?

b. If no

1. State the amendment number

2. Date filed

3. Number of pages attached

Yes [X] No []

My Commission Expires April 15, 2017

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14 Data)



NAIC Group Code.....3495 NAIC Company Code....39497

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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....	10,239,026	11,330,474		4,019,120	6,868,878	9,087,794	9,352,578	375,607	238,019	1,226,144	1,308,732	165,489
19.2 Other private passenger auto liability.....	24,949,842	27,560,398		9,415,247	22,761,060	23,595,448	14,804,458	323,935	100,334	1,436,739	3,159,103	403,408
19.3 Commercial auto no-fault (personal injury protection).....					5	37	32	(1)	(1)			
19.4 Other commercial auto liability.....					5			1	1			
21.1 Private passenger auto physical damage.....	11,384,500	12,522,579		4,373,744	8,099,383	7,898,605	176,374	70,281	66,772	186,022	1,438,772	184,011
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....0	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	46,573,368	51,413,451	0	17,808,111	37,729,331	40,581,884	24,333,442	769,823	405,125	2,848,905	5,906,607	752,908

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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 \$.594,359.
(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.....3495 NAIC Company Code....39497

BUSINESS IN THE STATE OF **GEORGIA** 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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												417
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												417
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
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	834

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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.....3495 NAIC Company Code....39497

BUSINESS IN GRAND TOTAL 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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....					137,760	(66,730)	2,039,067	8,648	5,108	39,406		
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....	10,258,105	11,351,185		4,026,319	6,875,744	9,094,512	9,363,737	375,607	238,934	1,227,730	1,310,482	166,592
19.2 Other private passenger auto liability.....	25,228,200	28,010,864		9,479,735	23,552,192	23,675,708	15,258,217	410,630	36,575	1,536,366	3,186,308	417,020
19.3 Commercial auto no-fault (personal injury protection).....					5	37	32	(1)	(1)			
19.4 Other commercial auto liability.....					5			1	1			
21.1 Private passenger auto physical damage.....	11,557,825	12,838,118		4,409,086	8,241,133	8,015,538	175,661	74,181	56,676	189,505	1,455,894	191,820
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....0	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	47,044,130	52,200,167	0	17,915,140	38,806,839	40,719,065	26,836,714	869,066	337,293	2,993,007	5,952,684	775,432

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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 \$.603,149.
(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.....3495 NAIC Company Code....39497

BUSINESS IN THE STATE OF ILLINOIS 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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....	194,749	347,545		31,906	485,712	(29,077)	348,230	23,093	(77,796)	75,676	19,465	5,136
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	142,687	274,961		22,180	123,266	96,638	311	3,485	(10,186)	2,567	14,264	3,764
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	337,436	622,506	0	54,086	608,978	67,561	348,541	26,578	(87,982)	78,243	33,729	8,900

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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 \$.2,377.
(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.....3495 NAIC Company Code....39497

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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....					(2,033)	(14,419)	12,479	55,861	52,799	2,007		(1,548)
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....					(5,440)	(4,638)	(143)					(1,548)
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
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	(7,473)	(19,057)	12,336	55,861	52,799	2,007	0	(3,096)

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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.....3495 NAIC Company Code....39497

BUSINESS IN THE STATE OF NEW JERSEY 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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												300
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....					(995)	(995)						300
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
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	(995)	(995)	0	0	0	0	0	600

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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.....3495 NAIC Company Code....39497

BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....					137,760	(66,730)	2,039,067	8,648	5,108	39,406		
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												1,743
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												1,743
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....0	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....0	0	0	0	0	137,760	(66,730)	2,039,067	8,648	5,108	39,406	0	3,486

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page.....0	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	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.....3495 NAIC Company Code....39497

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....	177	256			(164)	24	(37)	5	18	1,226		
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....					(11)	3	(2)					
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	177	256	0	0	(175)	27	0	(39)	5	18	1,226	

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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 \$.5.
(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.....3495 NAIC Company Code....39497

BUSINESS IN THE STATE OF PENNSYLVANIA 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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....	19,079	20,711		7,199	6,866	6,718	11,159		915	1,586	1,750	1,103
19.2 Other private passenger auto liability.....	84,999	93,625		32,582	121,108	91,125	68,057	7,113	9,706	15,533	7,793	4,913
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	31,662	37,868		13,162	23,824	24,635	1,857	325	330	915	2,904	1,831
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	135,740	152,204	0	52,943	151,798	122,478	81,073	7,438	10,951	18,034	12,447	7,847

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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 \$.6,200.
(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.....3495 NAIC Company Code....39497

BUSINESS IN THE STATE OF SOUTH CAROLINA 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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....	(1,567)	9,040			186,345	32,795	24,969	628	(48,431)	6,406	(71)	355
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....	(1,024)	2,710			1,095	1,304	(2,741)	90	(238)	1	(46)	232
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	(2,591)	11,750	0	0	187,440	34,099	22,228	718	(48,669)	6,407	(117)	587

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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 \$.208.
(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.....3495 NAIC Company Code....39497

BUSINESS IN THE STATE OF **TEXAS** 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.....												
2.1 Allied lines.....												
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
3. Farmowners multiple peril.....												
4. Homeowners multiple peril.....												
5.1 Commercial multiple peril (non-liability portion).....												
5.2 Commercial multiple peril (liability portion).....												
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....												
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium (b).....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....												
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....												1,070
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....												
21.1 Private passenger auto physical damage.....												1,070
21.2 Commercial auto physical damage.....												
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....												
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
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	2,140

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
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.

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held by or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7							
Affiliates - U. S. Intercompany Pooling														
31-0943862..	22268.....	Infinity Insurance Company.....	IN.....	1,348	75	289	364	3	92	585		N.....		
0199999.	Affiliates - U. S. Intercompany Pooling.....			1,348	75	289	364	3	92	585	0	0	0	0
0899999.	Total Affiliates.....			1,348	75	289	364	3	92	585	0	0	0	0
9999999.	Totals.....			1,348	75	289	364	3	92	585	0	0	0	0

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1	2	3	4	5	6
ID Number	NAIC Company Code	Name of Company	Date of Contract	Original Premium	Reinsurance Premium

NONE

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable on									Reinsurance Payable		18	19
						7	8	9	10	11	12	13	14	15	16	17		
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Contracts Ceding 75% or More of Direct Premiums Written	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Cols. 7 thru 14 Totals	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Col. 15-[16+17]	Funds Held By Company Under Reinsurance Treaties
Authorized Affiliates-U.S. Intercompany Pooling																		
31-0943862.	22268...	Infinity Insurance Company.....	IN.....	.....	.....47,044	1	.....	.....12,340	3,073	12,457	4,221	17,915	307	50,314	(2)	.....	.....50,316	.....
0199999.		Total Authorized Affiliates - U.S. Intercompany Pooling.....			47,044	1	0	12,340	3,073	12,457	4,221	17,915	307	50,314	(2)	0	50,316	0
0899999.		Total Authorized Affiliates.....			47,044	1	0	12,340	3,073	12,457	4,221	17,915	307	50,314	(2)	0	50,316	0
Authorized Other U.S. Unaffiliated Insurers																		
75-0784127.	33014...	Transport Insurance Company.....	OH.....	.....	.....	.....	.....	.....1,635	.....	.....404	203	.....	.....	.....2,242	.....	.....	.....2,242	.....
0999999.		Total Authorized Other U.S. Unaffiliated Insurers.....			0	0	0	1,635	0	404	203	0	0	2,242	0	0	2,242	0
1399999.		Total Authorized.....			47,044	1	0	13,975	3,073	12,861	4,424	17,915	307	52,556	(2)	0	52,558	0
4099999.		Total Authorized, Unauthorized and Certified.....			47,044	1	0	13,975	3,073	12,861	4,424	17,915	307	52,556	(2)	0	52,558	0
9999999.		Totals.....			47,044	1	0	13,975	3,073	12,861	4,424	17,915	307	52,556	(2)	0	52,558	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	2	3
Name of Reinsurer	Commission Rate	Ceded Premium
(1)		
(2)		
(3)		
(4)		
(5)		

Note B: Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 99999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1	2	3	4	
Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated	
(1) Infinity Insurance Company.....	50,314	47,044	Yes ☒	No ☐
(2) Transport Insurance Company.....	2,242	.....	Yes ☐	No ☒
(3) .....	.....	.....	Yes ☐	No ☐
(4) .....	.....	.....	Yes ☐	No ☐
(5) .....	.....	.....	Yes ☐	No ☐

SCHEDULE F - PART 4

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							12 Percentage Overdue Col. 10 / Col. 11	13 Percentage More Than 120 Days Overdue Col. 9 / Col. 11
				5 Current	Overdue					11 Total Due Cols. 5 + 10		
					6 1 to 29 Days	7 30 to 90 Days	8 91 to 120 Days	9 Over 120 Days	10 Total Overdue Cols. 6 + 7 + 8 + 9			
Authorized Affiliates-U.S. Intercompany Pooling												
31-0943862..	22268.....	Infinity Insurance Company.....	IN.....	1	.....	.....	.....	.....	.....0	1	0.0	0.0
0199999.	Total Authorized - Affiliates - U.S. Intercompany Pooling.....			1	0	0	0	0	0	1	0.0	0.0
0899999.	Total Authorized - Affiliates.....			1	0	0	0	0	0	1	0.0	0.0
1399999.	Total Authorized.....			1	0	0	0	0	0	1	0.0	0.0
4099999.	Total Authorized, Unauthorized and Certified.....			1	0	0	0	0	0	1	0.0	0.0
9999999.	Totals.....			1	0	0	0	0	0	1	0.0	0.0

Sch. F-Pt. 5
NONE

Sch. F-Pt. 6-Section 1
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).....	6,807,562		6,807,562
2. Premiums and considerations (Line 15).....	90,330		90,330
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	1,429	(1,429)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	74,825		74,825
6. Net amount recoverable from reinsurers.....		52,745,520	52,745,520
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	6,974,146	52,744,091	59,718,237
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	728,527	34,333,458	35,061,985
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	29,822	493,616	523,438
11. Unearned premiums (Line 9).....	584,540	17,915,140	18,499,680
12. Advance premiums (Line 10).....			0
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	(1,877)	1,877	0
15. Funds held by company under reinsurance treaties (Line 13).....			0
16. Amounts withheld or retained by company for account of others (Line 14).....			0
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....	18,255		18,255
19. Total liabilities excluding protected cell business (Line 26).....	1,359,267	52,744,091	54,103,358
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	5,614,879	XXX	5,614,879
22. Totals (Line 38).....	6,974,146	52,744,091	59,718,237

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:

For pooling information see Note 26 in the Notes to Financial Statements. Other reinsurers included in the restatement are shown on Schedule F, Part 3.

Sch. H-Pt. 1
NONE

Sch. H-Pt. 2
NONE

Sch. H-Pt. 3
NONE

Sch. H-Pt. 4
NONE

Sch. H-Pt. 5
NONE

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0		0					0	XXX.....
2. 2005.....	6	5	1	2	2	0				0	0	0
3. 2006.....	1	1	0								0	
4. 2007.....			0								0	
5. 2008.....			0								0	
6. 2009.....	0		0								0	
7. 2010.....			0								0	
8. 2011.....			0								0	
9. 2012.....			0								0	
10. 2013.....			0								0	
11. 2014.....			0								0	
12. Totals.....	XXX.....	XXX.....	XXX.....	3	2	0	0	0	0	0	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	0		1		0				0			2	0
2. 2005....	0								0			0	0
3. 2006....			0		0							0	
4. 2007....												0	
5. 2008....												0	
6. 2009....												0	
7. 2010....												0	
8. 2011....												0	
9. 2012....												0	
10. 2013....												0	
11. 2014....												0	
12. Totals...	0	0	1	0	0	0	0	0	0	0	0	2	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	2	0
2. 2005..	3	2	0	42.5	48.1	14.2			0.10	0	0
3. 2006..	0	0	0	1.5	0.0	0.0			0.10	0	0
4. 2007..	0	0	0	0.0	0.0	0.0			0.10	0	0
5. 2008..	0	0	0	0.0	0.0	0.0			0.10	0	0
6. 2009..	0	0	0	0.0	0.0	0.0			0.10	0	0
7. 2010..	0	0	0	0.0	0.0	0.0			0.10	0	0
8. 2011..	0	0	0	0.0	0.0	0.0			0.10	0	0
9. 2012..	0	0	0	0.0	0.0	0.0			0.10	0	0
10. 2013..	0	0	0	0.0	0.0	0.0			0.10	0	0
11. 2014..	0	0	0	0.0	0.0	0.0			0.10	0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	2	1

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported- Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(1).....	0.....	0.....	(0).....	0.....		0.....	(1).....	XXX.....
2. 2005.....	583.....	6.....	577.....	308.....	6.....	14.....	1.....	78.....		3.....	393.....	151.....
3. 2006.....	577.....	4.....	573.....	304.....	1.....	16.....	0.....	84.....		3.....	404.....	149.....
4. 2007.....	636.....	2.....	634.....	366.....	2.....	19.....	0.....	74.....		4.....	458.....	175.....
5. 2008.....	555.....	2.....	553.....	324.....	0.....	18.....	0.....	70.....		4.....	412.....	152.....
6. 2009.....	511.....	1.....	509.....	312.....		18.....		64.....		3.....	394.....	146.....
7. 2010.....	562.....	1.....	561.....	378.....		20.....		66.....		5.....	464.....	170.....
8. 2011.....	638.....	1.....	637.....	425.....		19.....		71.....		5.....	515.....	188.....
9. 2012.....	751.....	1.....	750.....	489.....		15.....		79.....		5.....	583.....	216.....
10. 2013.....	835.....	1.....	834.....	470.....		9.....		80.....		5.....	559.....	218.....
11. 2014.....	838.....	1.....	837.....	269.....		3.....		49.....		3.....	320.....	196.....
12. Totals.....	XXX.....	XXX.....	XXX.....	3,644.....	9.....	150.....	2.....	716.....	0.....	41.....	4,500.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	10.....	8.....	0.....	0.....	.....	.....	......0.....	0.....	0.....	0.....	.....	......2.....	0.....
2. 2005....	0.....	.....	......0.....	0.....	0.....	.....	......0.....	0.....	0.....	.....	.....	......0.....	0.....
3. 2006....	0.....	0.....	0.....	0.....	0.....	.....	......0.....	0.....	0.....	.....	......0.....	0.....	0.....
4. 2007....	0.....	.....	......0.....	0.....	0.....	.....	......0.....	(0).....	0.....	.....	......0.....	1.....	0.....
5. 2008....	0.....	.....	......0.....	.....	......0.....	.....	......0.....	.....	......0.....	.....	......0.....	2.....	0.....
6. 2009....	1.....	.....	......1.....	.....	......0.....	.....	......0.....	.....	......0.....	.....	......0.....	3.....	0.....
7. 2010....	4.....	.....	......2.....	.....	......1.....	.....	......0.....	.....	......2.....	.....	......0.....	9.....	1.....
8. 2011....	8.....	.....	......4.....	.....	......3.....	.....	......1.....	.....	......3.....	.....	......0.....	19.....	1.....
9. 2012....	18.....	.....	......13.....	.....	......5.....	.....	......3.....	.....	......8.....	.....	......0.....	48.....	2.....
10. 2013....	50.....	.....	......47.....	.....	......9.....	.....	......7.....	.....	......14.....	.....	......0.....	127.....	6.....
11. 2014....	126.....	.....	......152.....	.....	......10.....	.....	......13.....	.....	......37.....	.....	......2.....	338.....	28.....
12. Totals...	218.....	8.....	220.....	0.....	30.....	0.....	25.....	0.....	65.....	0.....	3.....	549.....	38.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	2.....	0.....
2. 2005..	400.....	7.....	393.....	68.7.....	121.4.....	68.1.....	.....	.....	......0.10.....	0.....	0.....
3. 2006..	405.....	1.....	404.....	70.2.....	22.7.....	70.5.....	.....	.....	......0.10.....	0.....	0.....
4. 2007..	460.....	2.....	458.....	72.4.....	97.7.....	72.3.....	.....	.....	......0.10.....	1.....	0.....
5. 2008..	413.....	0.....	413.....	74.5.....	6.5.....	74.7.....	.....	.....	......0.10.....	1.....	1.....
6. 2009..	397.....	0.....	397.....	77.7.....	0.0.....	77.9.....	.....	.....	......0.10.....	2.....	1.....
7. 2010..	473.....	0.....	473.....	84.2.....	0.0.....	84.4.....	.....	.....	......0.10.....	6.....	3.....
8. 2011..	534.....	0.....	534.....	83.7.....	0.0.....	83.9.....	.....	.....	......0.10.....	12.....	7.....
9. 2012..	631.....	0.....	631.....	84.0.....	0.0.....	84.2.....	.....	.....	......0.10.....	31.....	17.....
10. 2013..	686.....	0.....	686.....	82.1.....	0.0.....	82.2.....	.....	.....	......0.10.....	97.....	30.....
11. 2014..	658.....	0.....	658.....	78.5.....	0.0.....	78.6.....	.....	.....	......0.10.....	278.....	60.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	429.....	119.....

SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported- Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0		0		0			0	...XXX.....
2. 2005.....	35	3	32	16	1	0	0	2		0	17	4
3. 2006.....	34	3	31	19	1	0	0	2		0	21	4
4. 2007.....	31	2	29	17	2	1	0	3		0	19	4
5. 2008.....	31	2	29	16	2	1	0	2		0	17	4
6. 2009.....	38	3	35	22	2	1	0	3		0	25	6
7. 2010.....	45	3	42	26	1	1	0	3		0	29	7
8. 2011.....	50	4	46	26	1	1	0	3		0	30	9
9. 2012.....	58	5	53	34	2	1	0	4		0	37	9
10. 2013.....	67	6	62	32	2	1	0	4		0	35	10
11. 2014.....	80	8	72	19	1	0		3		0	21	10
12. Totals.....	XXX.....	XXX.....	XXX.....	229	14	8	1	28	0	2	250	...XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	0		0	0			0	0	0	0		0	0
2. 2005....	0		(0)	(0)	0		0	0	0	0		0	0
3. 2006....					0							0	
4. 2007....					0							0	
5. 2008....	0				0				0			0	0
6. 2009....	0		0		0		0		0		0	0	0
7. 2010....	0		0		0		0		0		0	1	0
8. 2011....	1	0	0		0		0		0		0	2	0
9. 2012....	3	0	1		1		0		1		0	6	0
10. 2013....	8	1	2		2		0		2		0	13	0
11. 2014....	18	2	17		2		1		4		0	40	2
12. Totals...	31	3	20	0	5	0	2	0	7	0	0	62	2

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2005..	19	1	18	54.5	48.1	55.1			0.10	0	0
3. 2006..	22	1	21	64.6	43.2	66.6			0.10	0	0
4. 2007..	21	2	19	67.0	108.1	64.2			0.10	0	0
5. 2008..	18	2	17	59.4	91.3	57.2			0.10	0	0
6. 2009..	27	2	25	70.7	58.5	71.7			0.10	0	0
7. 2010..	32	2	30	69.6	46.8	71.4			0.10	1	0
8. 2011..	33	1	32	65.7	26.8	69.1			0.10	1	1
9. 2012..	45	2	42	77.7	49.5	80.2			0.10	4	2
10. 2013..	50	3	48	74.4	45.2	77.1			0.10	9	4
11. 2014..	64	3	61	80.1	37.1	84.6			0.10	33	7
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	48	14

**SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0				0	XXX.....
2. 2005.....			0								0	
3. 2006.....			0								0	
4. 2007.....			0								0	
5. 2008.....			0								0	
6. 2009.....			0								0	
7. 2010.....			0								0	
8. 2011.....			0								0	
9. 2012.....			0								0	
10. 2013.....			0								0	
11. 2014.....			0								0	
12. Totals.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior....	2	2	0	0	.....	.....	.....0	0	0	0	.....	.....0	0
2. 2005....												0	.....
3. 2006....												0	.....
4. 2007....												0	.....
5. 2008....												0	.....
6. 2009....												0	.....
7. 2010....												0	.....
8. 2011....												0	.....
9. 2012....												0	.....
10. 2013....												0	.....
11. 2014....												0	.....
12. Totals...	2	2	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27	28	29 Direct and Assumed	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
		Ceded	Net		Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2005.	0	0	0	0.0	0.0	0.0			0.10	0	0
3. 2006.	0	0	0	0.0	0.0	0.0			0.10	0	0
4. 2007.	0	0	0	0.0	0.0	0.0			0.10	0	0
5. 2008.	0	0	0	0.0	0.0	0.0			0.10	0	0
6. 2009.	0	0	0	0.0	0.0	0.0			0.10	0	0
7. 2010.	0	0	0	0.0	0.0	0.0			0.10	0	0
8. 2011.	0	0	0	0.0	0.0	0.0			0.10	0	0
9. 2012.	0	0	0	0.0	0.0	0.0			0.10	0	0
10. 2013.	0	0	0	0.0	0.0	0.0			0.10	0	0
11. 2014.	0	0	0	0.0	0.0	0.0			0.10	0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

Sch. P-Pt. 1E
NONE

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

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

Sch. P-Pt. 1G
NONE

SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....		0.....					0.....	XXX.....
2. 2005.....			0.....	1.....		0.....					1.....	
3. 2006.....			0.....	0.....							0.....	
4. 2007.....			0.....								0.....	
5. 2008.....			0.....								0.....	
6. 2009.....			0.....								0.....	
7. 2010.....			0.....								0.....	
8. 2011.....			0.....								0.....	
9. 2012.....			0.....								0.....	
10. 2013.....			0.....								0.....	
11. 2014.....			0.....								0.....	
12. Totals.....	XXX.....	XXX.....	XXX.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	0.....											0.....	
2. 2005....												0.....	
3. 2006....												0.....	
4. 2007....												0.....	
5. 2008....												0.....	
6. 2009....												0.....	
7. 2010....												0.....	
8. 2011....												0.....	
9. 2012....												0.....	
10. 2013....												0.....	
11. 2014....												0.....	
12. Totals...	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32	33		35	36 Loss Expenses Unpaid
							Loss	Loss Expense		Losses Unpaid	
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0.....	0.....
2. 2005..	1.....	0.....	1.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
3. 2006..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
4. 2007..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
5. 2008..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
6. 2009..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
7. 2010..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
8. 2011..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
9. 2012..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
10. 2013..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
11. 2014..	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....			0.10.....	0.....	0.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2005.....			0								0	
3. 2006.....			0								0	
4. 2007.....			0								0	
5. 2008.....			0								0	
6. 2009.....			0								0	
7. 2010.....			0								0	
8. 2011.....			0								0	
9. 2012.....			0								0	
10. 2013.....			0								0	
11. 2014.....			0								0	
12. Totals.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....												0	
2. 2005.....												0	
3. 2006.....												0	
4. 2007.....												0	
5. 2008.....												0	
6. 2009.....												0	
7. 2010.....												0	
8. 2011.....												0	
9. 2012.....												0	
10. 2013.....												0	
11. 2014.....												0	
12. Totals...	0	0	0	0	0	0	0	0	0	0	0	0	0

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32	33		35	36 Loss Expenses Unpaid
							Loss	Loss Expense		Losses Unpaid	
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2005.	0	0	0	0.0	0.0	0.0				0	0
3. 2006.	0	0	0	0.0	0.0	0.0				0	0
4. 2007.	0	0	0	0.0	0.0	0.0				0	0
5. 2008.	0	0	0	0.0	0.0	0.0				0	0
6. 2009.	0	0	0	0.0	0.0	0.0				0	0
7. 2010.	0	0	0	0.0	0.0	0.0				0	0
8. 2011.	0	0	0	0.0	0.0	0.0				0	0
9. 2012.	0	0	0	0.0	0.0	0.0				0	0
10. 2013.	0	0	0	0.0	0.0	0.0				0	0
11. 2014.	0	0	0	0.0	0.0	0.0				0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

**SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	.....	.....	.....0	.....	.....	.....	.....	.....0	XXX.....
2. 2013.....	.....	.....	.....0	.....	.....	.....	.....	.....	.....	.....	.....0	XXX.....
3. 2014.....	.....	.....	.....0	.....	.....	.....	.....	.....	.....	.....	.....0	XXX.....
4. Totals....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding-Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0											0	0
2. 2013.....												0	
3. 2014.....												0	
4. Totals.....	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2013.	0	0	0	0.0	0.0	0.0			0.10	0	0
3. 2014.	0	0	0	0.0	0.0	0.0			0.10	0	0
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(1)		3		0		3	2	XXX.....
2. 2013.....	410.....	3.....	407.....	229		2		38		65	269	189
3. 2014.....	419.....	3.....	416.....	229		1		33		43	263	172
4. Totals.....	XXX.....	XXX.....	XXX.....	457	0	6	0	71	0	112	534	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	(2)	.....	.....1	0	0	.....	.....1	0	0	0	2	1	0
2. 2013....	(3)	.....	.....2	.....	.....0	.....	.....2	.....	.....1	.....	.....3	2	0
3. 2014....	(12)	.....	.....33	.....	.....1	.....	.....3	.....	.....13	.....	.....27	38	4
4. Totals...	(16)	0	36	0	2	0	6	0	14	0	32	41	4

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	(1)	2
2. 2013..	270.....	0.....	270.....	66.0	0.0	66.5	.....	.....	.....0.10	(1)	3
3. 2014..	301.....	0.....	301.....	71.7	0.0	72.2	.....	.....	.....0.10	21	17
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	19	21

Sch. P-Pt. 1K
NONE

Sch. P-Pt. 1L
NONE

Sch. P-Pt. 1M
NONE

Sch. P-Pt. 1N
NONE

Sch. P-Pt. 1O
NONE

Sch. P-Pt. 1P
NONE

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

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

Sch. P-Pt. 1S
NONE

Sch. P-Pt. 1T
NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	One Year	Two Year
1. Prior.....	1				1	1	2	2	2	4	2	2
2. 2005.....	3	1	1		0	0	0	0	0	0	0	0
3. 2006.....	XXX				0					0	0	0
4. 2007.....	XXX	XXX									0	0
5. 2008.....	XXX	XXX	XXX								0	0
6. 2009.....	XXX	XXX	XXX	XXX							0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											2	2

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

1. Prior.....	239	230	234	225	212	208	207	206	206	204	(2)	(2)
2. 2005.....	361	350	342	330	322	318	315	315	315	315	0	0
3. 2006.....	XXX	360	354	338	327	323	320	320	320	320	(0)	0
4. 2007.....	XXX	XXX	412	416	403	392	388	384	384	384	(1)	(0)
5. 2008.....	XXX	XXX	XXX	371	367	350	346	344	345	343	(2)	(1)
6. 2009.....	XXX	XXX	XXX	XXX	358	337	336	335	334	332	(2)	(3)
7. 2010.....	XXX	XXX	XXX	XXX	XXX	387	402	406	407	406	(2)	(0)
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	427	455	461	460	(1)	4
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	524	542	543	1	20
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	590	592	2	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	573	XXX	XXX
12. Totals											(6)	18

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

1. Prior.....	18	20	17	27	26	26	26	26	26	26	0	(0)
2. 2005.....	19	23	19	16	16	16	15	15	15	15	0	(0)
3. 2006.....	XXX	25	24	23	20	19	18	18	18	18	(0)	(0)
4. 2007.....	XXX	XXX	22	19	18	17	17	16	16	16	(0)	(0)
5. 2008.....	XXX	XXX	XXX	20	18	15	15	15	14	14	(0)	(0)
6. 2009.....	XXX	XXX	XXX	XXX	30	27	26	24	22	22	(0)	(1)
7. 2010.....	XXX	XXX	XXX	XXX	XXX	35	33	29	28	27	(1)	(2)
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	33	32	29	28	(1)	(4)
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	42	39	38	(1)	(4)
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53	42	(10)	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54	XXX	XXX
12. Totals											(13)	(13)

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

1. Prior.....											0	0
2. 2005.....											0	0
3. 2006.....	XXX										0	0
4. 2007.....	XXX	XXX									0	0
5. 2008.....	XXX	XXX	XXX								0	0
6. 2009.....	XXX	XXX	XXX	XXX							0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....											0	0
2. 2005.....											0	0
3. 2006.....	XXX										0	0
4. 2007.....	XXX	XXX									0	0
5. 2008.....	XXX	XXX	XXX								0	0
6. 2009.....	XXX	XXX	XXX	XXX							0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

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

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	One Year	Two Year
1. Prior.....											0	0
2. 2005.....											0	0
3. 2006.....	...XXX										0	0
4. 2007.....	...XXX	...XXX									0	0
5. 2008.....	...XXX	...XXX	...XXX								0	0
6. 2009.....	...XXX	...XXX	...XXX	...XXX							0	0
7. 2010.....	...XXX	...XXX	...XXX	...XXX	...XXX						0	0
8. 2011.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX					0	0
9. 2012.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX				0	0
10. 2013.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX			0	...XXX
11. 2014.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX		...XXX	...XXX
12. Totals											0	0

NONE

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

1. Prior.....											0	0
2. 2005.....											0	0
3. 2006.....	...XXX										0	0
4. 2007.....	...XXX	...XXX									0	0
5. 2008.....	...XXX	...XXX	...XXX								0	0
6. 2009.....	...XXX	...XXX	...XXX	...XXX							0	0
7. 2010.....	...XXX	...XXX	...XXX	...XXX	...XXX						0	0
8. 2011.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX					0	0
9. 2012.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX				0	0
10. 2013.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX			0	...XXX
11. 2014.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX		...XXX	...XXX
12. Totals											0	0

NONE

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

1. Prior.....											0	0
2. 2005.....											0	0
3. 2006.....	...XXX										0	0
4. 2007.....	...XXX	...XXX									0	0
5. 2008.....	...XXX	...XXX	...XXX								0	0
6. 2009.....	...XXX	...XXX	...XXX	...XXX							0	0
7. 2010.....	...XXX	...XXX	...XXX	...XXX	...XXX						0	0
8. 2011.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX					0	0
9. 2012.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX				0	0
10. 2013.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX			0	...XXX
11. 2014.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX		...XXX	...XXX
12. Totals											0	0

NONE

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

1. Prior.....	2	2	2	1	2	1	1	1	2	2	0	1
2. 2005.....			1	1	1	1	1	1	1	1	0	0
3. 2006.....	...XXX				0	0	0	0	0	0	0	0
4. 2007.....	...XXX	...XXX									0	0
5. 2008.....	...XXX	...XXX	...XXX								0	0
6. 2009.....	...XXX	...XXX	...XXX	...XXX							0	0
7. 2010.....	...XXX	...XXX	...XXX	...XXX	...XXX						0	0
8. 2011.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX					0	0
9. 2012.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX				0	0
10. 2013.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX			0	...XXX
11. 2014.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX		...XXX	...XXX
12. Totals											0	1

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

1. Prior.....											0	0
2. 2005.....											0	0
3. 2006.....	...XXX										0	0
4. 2007.....	...XXX	...XXX									0	0
5. 2008.....	...XXX	...XXX	...XXX								0	0
6. 2009.....	...XXX	...XXX	...XXX	...XXX							0	0
7. 2010.....	...XXX	...XXX	...XXX	...XXX	...XXX						0	0
8. 2011.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX					0	0
9. 2012.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX				0	0
10. 2013.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX			0	...XXX
11. 2014.....	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX	...XXX		...XXX	...XXX
12. Totals											0	0

NONE

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

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	One Year	Two Year
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....0	XXX.....
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	....XXX.....	XXX.....
4. Totals											0	0

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	18	9	12	2	(6)
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	234	232	(2)	XXX.....
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	255	XXX.....	XXX.....
4. Totals											0	(6)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....0	0
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....0	XXX.....
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	....XXX.....	XXX.....
4. Totals											0	0

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

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....0	0
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....0	XXX.....
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	....XXX.....	XXX.....
4. Totals											0	0

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
2. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
3. 2006.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....0	0
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....0	0
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....0	0
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....0	0
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....0	XXX.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	....XXX.....	XXX.....
12. Totals											0	0

Sch. P-Pt. 2N
NONE

Sch. P-Pt. 2O
NONE

Sch. P-Pt. 2P
NONE

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

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

Sch. P-Pt. 2S
NONE

Sch. P-Pt. 2T
NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014		
1. Prior.....	000.....	.....	.....	.....	.....0	1	1	1	2	2	0	.....
2. 2005.....	.....	.....	.....	.....	.....0	0	0	0	0	0	0	0
3. 2006.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....

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

1. Prior.....	000.....	113.....	157.....	191.....	196.....	200.....	201.....	203.....	204.....	203.....	0.....	0.....
2. 2005.....	137.....	255.....	295.....	308.....	313.....	314.....	315.....	315.....	315.....	315.....	80.....	70.....
3. 2006.....	XXX.....	146.....	261.....	300.....	311.....	315.....	318.....	318.....	319.....	319.....	79.....	69.....
4. 2007.....	XXX.....	XXX.....	178.....	326.....	362.....	375.....	380.....	382.....	383.....	383.....	95.....	79.....
5. 2008.....	XXX.....	XXX.....	XXX.....	165.....	285.....	319.....	333.....	338.....	341.....	342.....	83.....	69.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	154.....	271.....	310.....	323.....	328.....	330.....	82.....	64.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	182.....	333.....	375.....	392.....	398.....	94.....	75.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	202.....	376.....	425.....	444.....	105.....	82.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	247.....	446.....	504.....	119.....	95.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	272.....	478.....	115.....	96.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	272.....	83.....	85.....

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

1. Prior.....	000.....	10.....	14.....	25.....	25.....	26.....	26.....	26.....	26.....	26.....	.....	.....
2. 2005.....	5.....	11.....	13.....	14.....	15.....	15.....	15.....	15.....	15.....	15.....	3.....	1.....
3. 2006.....	XXX.....	7.....	13.....	16.....	17.....	18.....	18.....	18.....	18.....	18.....	3.....	1.....
4. 2007.....	XXX.....	XXX.....	6.....	11.....	13.....	15.....	16.....	16.....	16.....	16.....	3.....	1.....
5. 2008.....	XXX.....	XXX.....	XXX.....	6.....	11.....	13.....	14.....	14.....	14.....	14.....	3.....	1.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	9.....	17.....	21.....	21.....	22.....	22.....	3.....	2.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	10.....	19.....	24.....	26.....	26.....	4.....	2.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	11.....	22.....	25.....	27.....	5.....	3.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	15.....	27.....	33.....	5.....	3.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	15.....	31.....	6.....	3.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	19.....	5.....	4.....

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

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2006.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2006.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....

NONE

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

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014		
1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2006.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....

NONE

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

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2006.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....

NONE

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

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....XXX.....	XXX.....
2. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....XXX.....	XXX.....
3. 2006.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....XXX.....	XXX.....
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....XXX.....	XXX.....
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....XXX.....	XXX.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....XXX.....	XXX.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....XXX.....	XXX.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....XXX.....	XXX.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....XXX.....	XXX.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	XXX.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

NONE

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

1. Prior.....	000.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	2.....	2.....	0.....	.....
2. 2005.....	.....	.....1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	.....	.....
3. 2006.....	XXX.....	.....	.....	.....	.....0.....	0.....	0.....	0.....	0.....	0.....	.....	.....
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....

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

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2005.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2006.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2007.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2008.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....

NONE

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

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Containment Expenses Reported at Year End (\$000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014		
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	0.....	0.....	XXX.....	XXX.....
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	....XXX.....	XXX.....
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	....XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	9.....	11.....	0.....	(0).....
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	223.....	231.....	122.....	67.....
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	230.....	107.....	61.....

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	.....	.....	....XXX.....	XXX.....
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	....XXX.....	XXX.....
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	....XXX.....	XXX.....

NONE

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

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	.....	.....	....XXX.....	XXX.....
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	....XXX.....	XXX.....
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	....XXX.....	XXX.....

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000.....										XXX.....	XXX.....
2. 2005.....	.....										....XXX.....	XXX.....
3. 2006.....	XXX.....										XXX.....	XXX.....
4. 2007.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2008.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	....XXX.....	XXX.....

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

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....					0					1
2. 2005.....	3	1			0					
3. 2006.....	XXX				0					0
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XXX							
6. 2009.....	XXX	XXX	XXX	XXX						
7. 2010.....	XXX	XXX	XXX	XXX	XXX					
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior.....	86	33	25	15	5	3	1	1	1	0
2. 2005.....	90	36	23	14	6	2	0	0	0	0
3. 2006.....	XXX	89	42	20	9	4	1	1	0	0
4. 2007.....	XXX	XXX	101	45	23	9	5	1	1	0
5. 2008.....	XXX	XXX	XXX	94	44	14	7	4	2	1
6. 2009.....	XXX	XXX	XXX	XXX	98	27	9	5	3	1
7. 2010.....	XXX	XXX	XXX	XXX	XXX	85	28	9	6	2
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	103	33	13	5
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	142	40	16
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	178	54
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	165

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

1. Prior.....	7	4	2	1	1	0	0	0	0	0
2. 2005.....	9	6	3	1	0	0	0	0	0	
3. 2006.....	XXX	12	6	4	2	0	0	0	0	
4. 2007.....	XXX	XXX	11	4	2	1	0	0	0	
5. 2008.....	XXX	XXX	XXX	9	4	1	1	0	0	
6. 2009.....	XXX	XXX	XXX	XXX	13	4	3	1	0	0
7. 2010.....	XXX	XXX	XXX	XXX	XXX	15	6	2	1	0
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	14	4	1	0
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	2	1
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22	2
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18

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

1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XXX							
6. 2009.....	XXX	XXX	XXX	XXX						
7. 2010.....	XXX	XXX	XXX	XXX	XXX					
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XXX							
6. 2009.....	XXX	XXX	XXX	XXX						
7. 2010.....	XXX	XXX	XXX	XXX	XXX					
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XXX							
6. 2009.....	XXX	XXX	XXX	XXX						
7. 2010.....	XXX	XXX	XXX	XXX	XXX					
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XXX							
6. 2009.....	XXX	XXX	XXX	XXX						
7. 2010.....	XXX	XXX	XXX	XXX	XXX					
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XXX							
6. 2009.....	XXX	XXX	XXX	XXX						
7. 2010.....	XXX	XXX	XXX	XXX	XXX					
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....	1	1	1		0	0	0	0	0	
2. 2005.....					0					
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XXX							
6. 2009.....	XXX	XXX	XXX	XXX						
7. 2010.....	XXX	XXX	XXX	XXX	XXX					
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

1. Prior.....										
2. 2005.....										
3. 2006.....	XXX									
4. 2007.....	XXX	XXX								
5. 2008.....	XXX	XXX	XXX							
6. 2009.....	XXX	XXX	XXX	XXX						
7. 2010.....	XXX	XXX	XXX	XXX	XXX					
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	26	4	2
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	22	3
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	35

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

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

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
2. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
3. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2005.....										
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

Sch. P-Pt. 4N
NONE

Sch. P-Pt. 4O
NONE

Sch. P-Pt. 4P
NONE

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

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

Sch. P-Pt. 4S
NONE

Sch. P-Pt. 4T
NONE

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior.....					0	0		0	0	0
2. 2005.....						0	0	0	0	0
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior.....					0	0			0	0
2. 2005.....					0	0			0	0
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior.....					0	0	(0)	0	0	
2. 2005.....					0	0	0	0	0	0
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	35	9	2		0	0		0	0	0
2. 2005.....	50	74	79	80	80	80	80	80	80	80
3. 2006.....	XXX.....	50	74	78	79	79	79	79	79	79
4. 2007.....	XXX.....	XXX.....	61	89	93	94	95	95	95	95
5. 2008.....	XXX.....	XXX.....	XXX.....	55	78	81	82	83	83	83
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	54	76	81	82	82	82
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	61	88	93	94	94
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	70	99	104	105
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	82	113	119
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	85	115
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	83

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	10	3	1		0	0		0	0	0
2. 2005.....	17	5	2		0	0		0	0	0
3. 2006.....	XXX.....	27	5	1	0	0		0	0	0
4. 2007.....	XXX.....	XXX.....	28	5	2	1		0	0	0
5. 2008.....	XXX.....	XXX.....	XXX.....	24	4	1	1	0	0	0
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	22	4	1	0	0	0
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	26	4	2	1	1
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	26	5	2	1
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	27	6	2
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	28	6
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	28

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	(51)	2		(1)	1	0	(0)	0		
2. 2005.....	127	149	151	150	151	151	151	151	151	151
3. 2006.....	XXX.....	136	148	148	149	149	149	149	149	149
4. 2007.....	XXX.....	XXX.....	160	173	174	174	175	175	175	175
5. 2008.....	XXX.....	XXX.....	XXX.....	140	150	151	152	152	152	152
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	135	145	146	146	146	146
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	156	168	170	170	170
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	174	187	188	188
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	200	215	216
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	204	218
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	196

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	1				0	(0)		0	0	
2. 2005.....	2	3	3	3	3	3	3	3	3	3
3. 2006.....	XXX.....	2	3	3	3	3	3	3	3	3
4. 2007.....	XXX.....	XXX.....	2	3	3	3	3	3	3	3
5. 2008.....	XXX.....	XXX.....	XXX.....	2	3	3	3	3	3	3
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	2	3	3	3	3	3
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3	4	4	4	4
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4	5	5	5
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4	5	5
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4	6
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....					0			0	0	0
2. 2005.....	1				0			0	0	0
3. 2006.....	XXX.....	1			0			0		
4. 2007.....	XXX.....	XXX.....	1		0			0	0	
5. 2008.....	XXX.....	XXX.....	XXX.....	1	0			0	0	0
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	1			0	0	0
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1	1	0	0	0
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1	0	0	0
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1	0	0
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1	0
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....	(2)				0	(0)		0		
2. 2005.....	4	4	4	4	4	4	4	4	4	4
3. 2006.....	XXX.....	4	4	4	4	4	4	4	4	4
4. 2007.....	XXX.....	XXX.....	4	4	4	4	4	4	4	4
5. 2008.....	XXX.....	XXX.....	XXX.....	4	4	4	4	4	4	4
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....	5	6	6	6	6	6
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	6	7	7	7	7
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	8	9	9	9
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	8	9	9
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	9	10
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	10

SCHEDULE P - PART 5D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....										0
2. 2005.....										
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

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

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior.....										0
2. 2005.....										
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior.....									0	
2. 2005.....										
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014
1. Prior.....										
2. 2005.....										
3. 2006.....	XXX.....									
4. 2007.....	XXX.....	XXX.....								
5. 2008.....	XXX.....	XXX.....	XXX.....							
6. 2009.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2010.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2011.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2012.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

NONE

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

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

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

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

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

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

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

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

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

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

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

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

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	
1. Prior.....										.0	
2. 2005.....	35	35	35	35	35	35	35	35	35	35	
3. 2006.....	XXX	34	34	34	34	34	34	34	34	34	
4. 2007.....	XXX	XXX	31	31	31	31	31	31	31	31	
5. 2008.....	XXX	XXX	XXX	31	31	31	31	31	31	31	
6. 2009.....	XXX	XXX	XXX	XXX	38	38	38	38	38	38	
7. 2010.....	XXX	XXX	XXX	XXX	XXX	45	45	45	45	45	
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	50	50	50	50	
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	58	58	58	
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67	67	
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	80	80
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	80
13. Earned Prems.(P-Pt 1)	35	34	31	31	38	45	50	58	67	80	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	
1. Prior.....										.0	
2. 2005.....	3	3	3	3	3	3	3	3	3	3	
3. 2006.....	XXX	3	3	3	3	3	3	3	3	3	
4. 2007.....	XXX	XXX	2	2	2	2	2	2	2	2	
5. 2008.....	XXX	XXX	XXX	2	2	2	2	2	2	2	
6. 2009.....	XXX	XXX	XXX	XXX	3	3	3	3	3	3	
7. 2010.....	XXX	XXX	XXX	XXX	XXX	3	3	3	3	3	
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	4	
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	5	5	
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	6	
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	8
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8
13. Earned Prems.(P-Pt 1)	3	3	2	2	3	3	4	5	6	8	XXX

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	
1. Prior.....										.0	
2. 2005.....										.0	
3. 2006.....	XXX									.0	
4. 2007.....	XXX	XXX								.0	
5. 2008.....	XXX	XXX	XXX							.0	
6. 2009.....	XXX	XXX	XXX	XXX						.0	
7. 2010.....	XXX	XXX	XXX	XXX	XXX					.0	
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				.0	
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Prems.(P-Pt 1)										XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	
1. Prior.....										.0	
2. 2005.....										.0	
3. 2006.....	XXX									.0	
4. 2007.....	XXX	XXX								.0	
5. 2008.....	XXX	XXX	XXX							.0	
6. 2009.....	XXX	XXX	XXX	XXX						.0	
7. 2010.....	XXX	XXX	XXX	XXX	XXX					.0	
8. 2011.....	XXX	XXX	XXX	XXX	XXX	XXX				.0	
9. 2012.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	
10. 2013.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	
11. 2014.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Prems.(P-Pt 1)										XXX	

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

Sch. P-Pt. 7B-Sn. 4
NONE

Sch. P-Pt. 7B-Sn. 5
NONE

Sch. P-Pt. 7B-Sn. 6
NONE

Sch. P-Pt. 7B-Sn. 7
NONE

Infinity Assurance 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?
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.

Yes [] No [X]
- 1.2

What is the total amount of the reserve for that provision (DDR reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?

.....
- 1.3

Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?

Yes [] No []
- 1.4

Does the company report any DDR reserve as loss or loss adjustment expense reserve?

Yes [] No []
- 1.5

If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?

Yes [] No [] N/A[]
- 1.6

If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1	2
		Section 1: Occurrence	Section 2: Claims-Made
1.601	Prior.....	.....	.....
1.602	2005.....	.....	.....
1.603	2006.....	.....	.....
1.604	2007.....	.....	.....
1.605	2008.....	.....	.....
1.606	2009.....	.....	.....
1.607	2010.....	.....	.....
1.608	2011.....	.....	.....
1.609	2012.....	.....	.....
1.610	2013.....	.....	.....
1.611	2014.....	.....	.....
1.612	Totals.....	0	0

2.

The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement?

Yes [X] No []
3.

The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this statement?

Yes [X] No []

4.

Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10?

Yes [] No [X]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.
- Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
- Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5.

What were the net premiums in force at the end of the year for: (in thousands of dollars)

5.1 Fidelity
5.2 Surety

.....
.....
6.

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

PER CLAIMANT
- 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.
See Note 26 in the Notes to Financial Statements for intercompany pooling agreement. See Note 25 in the Notes to Financial Statements for effect of extra-contractual obligations.

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

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	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														
97	Infinity Property and Casualty Corporation	00000...	03-0483872..		0001195933	NASDAQ.....	Infinity Property and Casualty Corporation.....	OH.....	UIP.....				Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	10068...	31-1358834..				Hillstar Insurance Company.....	IN.....	IA.....	Infinity Property and Casualty Corporation.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	00000...	20-4363792..				Infinity Financial Centers, LLC.....	DE.....	NIA.....	Infinity Property and Casualty Corporation.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	22268...	31-0943862..				Infinity Insurance Company.....	IN.....	UDP.....	Infinity Property and Casualty Corporation.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	00000...	74-2641866..				Infinity Agency of Texas.....	TX.....	NIA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	39497...	75-1227771..				Infinity Assurance Insurance Company.....	OH.....	RE.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	11738...	34-0927698..				Infinity Auto Insurance Company.....	OH.....	IA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	00000...	75-2280915..				Leader Mananging General Agency, Inc.....	TX.....	NIA.....	Infinity Auto Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	00000...	34-1852743..				Leader Group, Inc.....	OH.....	NIA.....	Infinity Auto Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	21792...	58-1132392..				Infinity Casualty Insurance Company.....	OH.....	IA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	00000...	58-1293110..				Infinity Insurance Agency, Inc.....	GA.....	NIA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	10061...	34-1767787..				Infinity Indemnity Insurance Company.....	IN.....	IA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	10195...	34-1785809..				Infinity Preferred Insurance Company.....	OH.....	IA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	00000...	31-1627506..				Infinity Reserve Insurance Company.....	OH.....	NIA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	16802...	73-0772113..				Infinity Safeguard Insurance Company.....	OH.....	IA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	38873...	58-1806192..				Infinity Security Insurance Company.....	IN.....	IA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	20260...	31-1333017..				Infinity Select Insurance Company.....	IN.....	IA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	12599...	58-1806189..				Infinity Standard Insurance Company.....	IN.....	IA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	00000...	58-1080659..				Infinity Property and Casualty Services, Inc.....	GA.....	NIA.....	Infinity Standard Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	
	Infinity Property and Casualty Corporation	00000...	58-0642684..				Casualty Underwriters, Inc.....	GA.....	NIA.....	Infinity Property and Casualty Services, Inc.....	Ownership.....	...51.000	Infinity Property and Casualty Corporation.....	

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	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)	*
3495.....	Infinity Property and Casualty Corporation	13820...	43-6030348..	.....	.....	.....	Infinity County Mutual Insurance Company.....	TX.....	IA.....	Infinity Insurance Company.....	Management.....	.....	Infinity Property and Casualty Corporation.....	.....
.....	Infinity Property and Casualty Corporation	00000...	31-1357130..	.....	.....	.....	The Infinity Group, Inc.....	IN.....	NIA.....	Infinity Insurance Company.....	Ownership.....	...100.000	Infinity Property and Casualty Corporation.....	.....

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	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												
.....	03-0483872.....	Infinity Property and Casualty Corporation.....	60,100,000	(1,338,307)	.....	.....	.....	.....	.....	.....	.....58,761,693	.....
10068.....	31-1358834.....	Hillstar Insurance Company.....	(100,000)	.....	.....	.....	.....	.....	.....	.....	.....(100,000)	.....
39497.....	75-1227771.....	Infinity Assurance Insurance Company.....	(250,000)	.....	.....	.....	.....	.....	.....*	.....	.....(250,000)	.....
11738.....	34-0927698.....	Infinity Auto Insurance Company.....	(450,000)	.....	.....	.....	.....	.....	.....*	.....	.....(450,000)	(57,448,000)
21792.....	58-1132392.....	Infinity Casualty Insurance Company.....	(275,000)	.....	.....	.....	.....	.....	.....*	.....	.....(275,000)	.....
13820.....	43-6030348.....	Infinity County Mutual Insurance Company.....	.....	.....	.....	.....	.....	.....(17,239,610)	.....	.....	.....(17,239,610)	59,583,000
10061.....	34-1767787.....	Infinity Indemnity Insurance Company.....	(50,000)	.....	.....	.....	.....	.....	.....*	.....	.....(50,000)	.....
22268.....	31-0943862.....	Infinity Insurance Company.....	(58,245,000)	1,563,307	.....	.....	.....	.....17,239,610	.....	.....	.....(39,442,083)	(2,135,000)
10195.....	34-1785809.....	Infinity Preferred Insurance Company.....	(250,000)	.....	.....	.....	.....	.....	.....*	.....	.....(250,000)	.....
16802.....	73-0772113.....	Infinity Safeguard Insurance Company.....	(375,000)	.....	.....	.....	.....	.....	.....*	.....	.....(375,000)	.....
38873.....	58-1806192.....	Infinity Security Insurance Company.....	(225,000)	.....	.....	.....	.....	.....	.....*	.....	.....(225,000)	.....
20260.....	31-1333017.....	Infinity Select Insurance Company.....	(40,000)	.....	.....	.....	.....	.....	.....*	.....	.....(40,000)	.....
12599.....	58-1806189.....	Infinity Standard Insurance Company.....	(115,000)	50,000					*		(65,000)	
9999999.	Control Totals.....		0	0	0	0	0	0	XXX	0	0	0

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Pooling Information

NAIC Code	Name of Insurer	Pooling %	NAIC Code	Name of Insurer	Pooling %
22268	Infinity Insurance Company	99.10%			
39497	Infinity Assurance Insurance Company	0.10%			
11738	Infinity Auto Insurance Company	0.10%			
21792	Infinity Casualty Insurance Company	0.10%			
10061	Infinity Indemnity Insurance Company	0.10%			
10195	Infinity Preferred Insurance Company	0.10%			
16802	Infinity Safeguard Insurance Company	0.10%			
38873	Infinity Security Insurance Company	0.10%			
20260	Infinity Select Insurance Company	0.10%			
12599	Infinity Standard Insurance Company	0.10%			

Infinity Assurance 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
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

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?	YES
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?	YES

Infinity Assurance Insurance Company

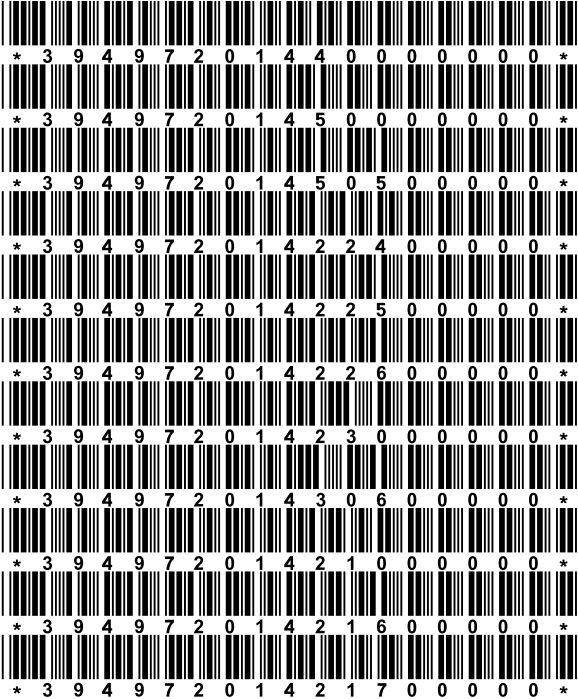
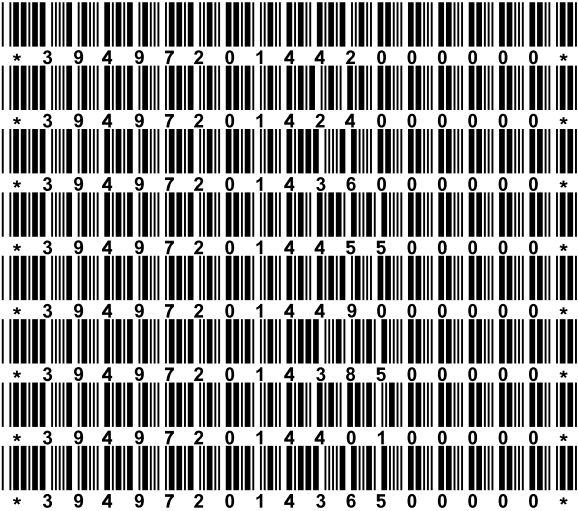
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

EXPLANATIONS:

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