ANNUAL STATEMENT OF THE **Montgomery Mutual Insurance Company** of_____Columbia in the state of _____ Maryland TO THE **Insurance Department** OF THE **STATE OF** FOR THE YEAR ENDED **December 31, 2007**



ANNUAL STATEMENT

14613200720100100

For the Year Ended December 31, 2007 OF THE CONDITION AND AFFAIRS OF THE **Montgomery Mutual Insurance Company** NAIC Group Code **NAIC Company Code Employer's ID Number** 0111 0111 14613 52-0424870 (Current Period) (Prior Period) , State of Domicile or Port of Entry Maryland Organized under the Laws of Maryland Country of Domicile _ United States of America Incorporated/Organized: March 10, 1848 Commenced Business: June 1, 1848 Statutory Home Office: 6230 Old Dobbin Lane Suite 200 Columbia, MD 21045 (City, State and Zip Code) (Street and Number) Main Administrative Office: 6230 Old Dobbin Lane Suite 200 Columbia, MD 21045 410-953-8120 (Area Code)(Telephone Number) (City, State and Zip Code) (Street and Number) <u>2</u>1045 Mail Address: Columbia, MD (City, State and Zip Code) 6230 Old Dobbin Lane Suite 200 (Street and Number) Primary Location of Books and Records: 175 Berkeley Street Boston, MA 02116 617-357-9500 (Area Code)(Telephone Number) (Street and Number) (City, State and Zip Code) Internet Website Address: www.LibertyMutualAgencyMarkets.com Statutory Statement Contact: Joanne Connolly (Name) 617-357-9500 44393 (Area Code)(Telephone Number)(Extension) Joanne.Connolly@LibertyMutual.com 617-574-5955 **OFFICERS** Chairman of the Board Gary Richard Gregg Name Title Gary Richard Gregg President and Chief Executive Officer 2. **Edmund Campion Kenealy** Secretary 3. James Francis Dore Treasurer and Chief Financial Officer Vice-Presidents Title Name Title Name Anthony Alexander Fontanes **EVP and Chief Investment Officer** Joseph Anthony Gilles **Executive Vice President** Scott Rhodes Goodby **EVP and Chief Operating Officer DIRECTORS OR TRUSTEES** John Derek Doyle Christopher Charles Mansfield Gary Richard Grego Laurance Henry Soyer Yahia James Francis Dore Scott Rhodes Goodby Michael James Plavnicky Anthony Alexander Fontanes Joseph Anthony Gilles State of Massachusetts County of Suffolk 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 filling with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)		(Signatur	e)
Gary Richard Gregg	Edmund Campion Keneal	у	James Franc	cis Dore
(Printed Name) 1.	(Printed Name) 2.		(Printed Na 3.	ame)
President and Chief Executive Officer	Secretary		Treasurer and Chief F	inancial Officer
(Title)	(Title)	_	(Title)	
Subscribed and sworn to before me this		a. Is this a	n original filing?	YES[X]NO[]
31st day of January	, 2008	b. If no:	1. State the amendment num	nber
			2. Date filed	
			3. Number of pages attached	d

ASSETS

		Current Year			Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)	30,379,413		30,379,413	30,094,569
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks	1,525,102		1,525,102	1,390,770
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$ 0 encumbrances)				
	4.2 Properties held for the production of income (less \$ 0 encumbrances)				
_	4.3 Properties held for sale (less \$ 0 encumbrances)				
5.	Cash (\$ 1,806,214 , Schedule E-Part 1), cash equivalents (\$ 4,697,474	44.000.005		44 020 205	47 400 277
c	Schedule E-Part 2) and short-term investments (\$ 8,326,707, Schedule DA)	14,830,395		14,830,395	17,489,377
6.	Contract loans (including \$ 0 premium notes)	1,523,224		4 502 004	4 470 207
7. 8.	Other invested assets (Schedule BA) Receivables for securities	0.005		1,523,224 9,225	1,478,397 2,000,000
9.				9,223	2,000,000
9. 10.	Aggregate write-ins for invested assets Subtotals, cash and invested assets (Lines 1 to 9)	48 267 350		48,267,359	52,453,113
11.	Title plants less \$ 0 charged off (for Title insurers only)			40,201,339	32,433,113
12.		498,711		498,711	389,819
13.	Premiums and considerations:				
10.	13.1 Uncollected premiums and agents' balances in the course of collection				
	13.2 Deferred premiums, agents' balances and installments booked but deferred and				
	not yet due (including \$ 0 earned but unbilled premiums)				
	13.3 Accrued retrospective premiums				
14.	Reinsurance:				
	14.1 Amounts recoverable from reinsurers				
	14.2 Funds held by or deposited with reinsured companies				
	14.3 Other amounts receivable under reinsurance contracts				
15.	Amounts receivable relating to uninsured plans				
16.1	Current federal and foreign income tax recoverable and interest thereon				791,328
16.2	Net deferred tax asset	1,873,000		293,168	92,050
17.	Guaranty funds receivable or on deposit				
18.	Electronic data processing equipment and software				
19.	Furniture and equipment, including health care delivery assets (\$0_)				
20.	Net adjustment in assets and liabilities due to foreign exchange rates				
21.	Receivables from parent, subsidiaries and affiliates	188,478		188,478	2,439,381
22.	Health care (\$ 0) and other amounts receivable				
23.	Aggregate write-ins for other than invested assets	500,000		500,000	536,162
24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell	E4 207 E40	1 570 000	10 717 710	EC 704 050
25.	Accounts (Lines 10 to 23) From Separate Accounts, Segregated Accounts and Protected Cell Accounts	51,327,548	1,579,832	49,747,716	56,701,853
25. 26.	Total (Lines 24 and 25)	51,327,548	1,579,832	49,747,716	56,701,853
۷٠.	וטומו נבוווס ביז מווע בטן	1 31,321,340	1,010,002	1 73,141,110	1 30,701,033
	DETAILS OF WRITE-INS				
0901.					

DETAILS OF WRITE-INS			
0901.			
0902.			
0903.		 	
0998. Summary of remaining write-ins for Line 09 from overflow page			
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)			
2301. Other assets	500.000	500.000	536,162
2302.		 	
2303.		 	
2398. Summary of remaining write-ins for Line 23 from overflow page		 	
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	500,000	500,000	536,162

	LIABILITIES, SURPLUS AND OTHER FUNDS	1 Current Year	2 Prior Year
1. 2.			
3.	Loca adjustment evinences (Part 2A Line 24 Column 0)	1	
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))	532,892	
	Net deferred tax liability		
	Borrowed money \$ 0 and interest thereon \$ 0		
	Unearned premiums (Part 1A, Line 37, Column 5) (after deducting unearned premiums for ceded reinsurance of		
10	\$ 23,745,275 and including warranty reserves of \$ 0) Advance premium		
	Dividends declared and unpaid:		
	11.1 Ctackhaldara		
	11.2 Policyholders		
	Ceded reinsurance premiums payable (net of ceding commissions)		
	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)		******************
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (Schedule F, Part 7)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	•		
19.	Payable to parent, subsidiaries and affiliates	204,542	2,918,514
20.	Payable for securities		
21.	Liability for amounts held under uninsured plans Capital notes \$ 0 and interest thereon \$ 0		
	Aggregate weite inc for liabilities	7 000 665	13,954,890
24.	Total liabilities excluding protected cell liabilities (Lines 1 through 23)		16,873,404
	Protected cell liabilities		
26.	Total liabilities (Lines 24 and 25)	0.007.000	16,873,404
27.			
28.	Common capital stock		
	Preferred capital stock		
30.	Aggregate write-ins for other than special surplus funds		
	Surplus notes		
	Gross paid in and contributed surplus		
	Unassigned funds (surplus)	41,120,617	39,828,449
	Less treasury stock, at cost: 34.1 0 shares common (value included in Line 28 \$ 0)		
	34.1 0 shares common (value included in Line 28 \$ 0) 34.2 0 shares preferred (value included in Line 29 \$ 0)		
	Surplus as regards policyholders (Lines 27 to 33, less 34) (Page 4, Line 39)	41,120,617	39,828,449
	TOTALS (Page 2, Line 26, Col. 3)	49,747,716	56,701,853
	DETAILS OF WRITE-INS		
	Other liabilities		662,550
	Collateral held for secuities loaned	7,030,391	13,292,340
2303	Summary of remaining write-ins for Line 23 from overflow page		
	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	7,889,665	13,954,890
		1,000,000	,
2701. 2702.			
2702	***************************************		
	Summary of remaining write-ins for Line 27 from overflow page		
	Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)		
3001.			
3001			
3003			
	Summary of remaining write-ins for Line 30 from overflow page		************
	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)		

	STATEMENT OF INCOME	1	2	
		Current Year	Prior Year	
	UNDERWRITING INCOME			
1.				
2.	DEDUCTIONS Losses incurred (Part 2, Line 34, Column 7)			
3.	Loss expenses incurred (Part 3, Line 25, Column 1)			
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)			
	Aggregate write-ins for underwriting deductions Total underwriting deductions (Lippe 2 through 5)			
6. 7.	Total underwriting deductions (Lines 2 through 5) Net income of protected cells			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)			
	INVESTMENT INCOME			
q	Net investment income earned (Exhibit of Net Investment Income, Line 17)	2,353,796	1,088,130	
10.	Net realized capital gains (losses) less capital gains tax of \$ 0 (Exhibit of Capital Gains (Losses))	2,000,700	342,905	
11.	Net investment gain (loss) (Lines 9 + 10)	2,353,796	1,431,035	
	OTHER INCOME			
12.	Net gain (loss) from agents' or premium balances charged off			
	(amount recovered \$ 0 amount charged off \$ 0)	****		
13.	Finance and service charges not included in premiums			
	Aggregate write-ins for miscellaneous income			
15. 16	Total other income (Lines 12 through 14) Net income before dividends to policyholders, after capital gains tax			
10.	and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	2,353,796	1,431,035	
17.	Dividends to policyholders			
18.				
40	and before all other federal and foreign income taxes (Line 16 minus Line 17)		1,431,035	
	Federal and foreign income taxes incurred Net income (Line 18 minus Line 19) (to Line 22)	1,324,220 1,029,576	(3,124,787) 4,555,822	
20.		1,023,370	4,000,022	
	CAPITAL AND SURPLUS ACCOUNT	22 222 442		
	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) Net income (from Line 20)	39,828,449	52,958,114 4,555,822	
			4,000,022	
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ 21,475	39,883	(525,124	
	Change in net unrealized foreign exchange capital gain (loss)	******		
		(1,006,524)	477,240	
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 26, Col. 3) Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	1,229,233	362,397	
	Change in surplus notes	******	(18,000,000	
30.	Surplus (contributed to) withdrawn from protected cells			
	Cumulative effect of changes in accounting principles			
32.	Capital changes:			
	32.1 Paid in 32.2 Transferred from surplus (Stock Dividend)			
	32.3 Transferred to surplus			
33.	Surplus adjustments:			
	33.1 Paid in			
	33.2 Transferred to capital (Stock Dividend)			
34	33.3 Transferred from capital Net remittances from or (to) Home Office			
35.	Dividends to stockholders			
36.	Change in treasury stock (Page 3, Lines 34.1 and 34.2, Column 2 minus Column 1)	*****		
	Aggregate write-ins for gains and losses in surplus	4 000 400	(40,400,005	
	Change in surplus as regards policyholders for the year (Lines 22 through 37) Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 35)	1,292,168 41,120,617		
		, .,.	,	
	DETAILS OF WRITE-INS			
0501.				
0502.				
0503. 0598.	Summary of remaining write-ins for Line 5 from overflow page	* * * * * * * * * * * * * * * * * * * *		
	Totals (Lines 0501 through 0503 plus Line 0598) (Line 5 above)			
1401.				
1402.		*****		
1403.	Commence of commissions with the faulting AA form and all the commence of the			
	Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 through 1403 plus Line 1498) (Line 14 above)			
3701.				
3602. 3703.				
	Summary of remaining write-ins for Line 37 from overflow page	*******		
	Totals (Lines 3701 through 3703 plus Line 3798) (Line 37 above)			

CASH FLOW

	1	2
Cash from Operations	Current Year	Prior Year
A Paratina allested estatorio in anno		
Premiums collected net of reinsurance Net investment income	0.044.050	(3,860,467)
2 Missellanson instance	4 000	1,218,790
3. Miscellaneous income	2.246.202	727,895
Total (Lines 1 through 3) Benefit and loss related payments		(1,913,782) (4,400,238)
Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		(4,400,230)
7. Commissions, expanses and and aggregate write ins for deductions		
Commissions, expenses paid and aggregate write-ins for deductions Dividends paid to policyholders		
Dividends paid to policyholders Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)		(3,541,915)
40 Total (15 con 5 th con 15 0)		(7,942,153)
10. Total (Lines 5 through 9) 11. Net cash from operations (Line 4 minus Line 10)	0.040.000	6,028,371
Cash from Investments		-,,
12. Proceeds from investments sold, matured or repaid:		
40.4 Panda	10.627.075	6,930,294
400 00 1		9,423,006
		3,423,000
12.3 Mortgage loans 12.4 Real estate		
10.5. Other invested exects		
12.5 Other invested assets 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
40.7 Microllesson accords	4 000 775	
12.7 Miscellaneous proceeds 12.8 Total investment proceeds (Lines 12.1 to 12.7)		16,353,300
13. Cost of investments acquired (long-term only):	12,017,000	10,333,300
40.4 Built	10,881,674	7,850,365
400 00-1		51,376

13.3 Mortgage loans 13.4 Real estate		
12.5. Other invested exacts	117 000	108,089
40.0 Minutes and English	*******	2,000,000
12.7 Total investments convirad (Lines 12.1 to 12.6)	10,000,474	10,009,830
Net increase (decrease) in contract loans and premium notes		10,000,000
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	1,618,376	6,343,470
	1,010,010	0,040,470
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		(40.000.000)
16.1 Surplus notes, capital notes		(18,000,000)
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders	(0.400.050)	
16.6 Other cash provided (applied)	(6,493,650)	5,282,924
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(6,493,650)	(12,717,076)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMEN		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(2,658,982)	(345,235)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	17,489,377	17,834,612
19.2 End of year (Line 18 plus Line 19.1)	14,830,395	17,489,377
Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001.		
20.0002.		
20.0003.		

NONE **Underwriting and Investment Exhibit - Part 1**

NONE **Underwriting and Investment Exhibit - Part 1A**

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

	1	Reinsurance Assumed		Reinsuran	6	
	Direct	2	3 From	4	5 To	Net Premiums Written
	Business	From	Non-	То	Non-	Cols. 1 + 2 + 3 -
Line of Business	(a)	Affiliates	Affiliates	Affiliates	Affiliates	4 - 5
1. Fire	477,125			477,125		
2. Allied lines	266,357			266,357		
3. Farmowners multiple peril						
4. Homeowners multiple peril	7,467,826			7,467,826		
5. Commercial multiple peril	10,893,199			10,893,199		
6. Mortgage guaranty						
8. Ocean marine						
9. Inland marine	57,371			57,371		
10. Financial guaranty						
11.1 Medical malpractice - occurrence						
11.2 Medical malpractice - claims-made						
12. Earthquake	20,499			20,499		
13. Group accident and health						
14. Credit accident and health (group and individual)						
15. Other accident and health						
16. Workers' compensation	12,372,032			12,372,032		
17.1 Other liability - occurrence	1,436,850			1,436,850		
17.2 Other liability - claims-made	1,100,000			1,100,000		
18.1 Products liability - occurrence	11,260			11,260		
18.2 Products liability - claims-made	11,200			11,200		
19.1, 19.2 Private passenger auto liability	6,276,354			6,276,354		
19.3, 19.4 Commercial auto liability	5,843,023			5,843,023		
21. Auto physical damage	5,337,919			5.337.919		
22. Aircraft (all perils)	3,337,919			3,337,919		
OO FILE						
23. Fridelity 24. Surety						
	241			241		
26. Burglary and theft27. Boiler and machinery				241		
28. Credit						
 International Reinsurance-Nonproportional Assumed Property 	···[······					
	X X X					
31. Reinsurance-Nonproportional Assumed Liability	XXX					
32. Reinsurance-Nonproportional Assumed Financial Lines	X X X					
33. Aggregate write-ins for other lines of business				F0 400 050		
34. TOTALS	50,460,056			50,460,056		

DETAILS OF WRITE-INS			
3301.			
3302.			
3303.			
3398. Summary of remaining write-ins for Line 33 from overflow page			
3398. Summary of remaining write-ins for Line 33 from overflow page 3399. Totals (Lines 3301 through 3303 plus 3398) (Line 33 above)			

(a)	Does the	100 e	mpany's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]	
	If yes:	1.	The amount of such installment premiums \$ 0	
		2	Amount at which cuch installment promiums would have been reported had they been recorded on an annualized basis \$	٨

Montgomery Mutual Insurance Company

	Losses Pai		Less Salvage	ess Salvage		6	7	8
Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire	121,402		121,402					
2. Allied lines	106,014		106,014		I	I		
Farmowners multiple peril								
Homeowners multiple peril	2,499,874		2,499,874					
Commercial multiple peril	4,322,540		4,322,540					
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine	309,064		309,064					
10. Financial guaranty								
11.1 Medical malpractice - occurrence								
11.2 Medical malpractice - claims - made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation	7,140,854		7,140,854					
17.1 Other liability - occurrence	1,074,884		1,074,884					
17.2 Other liability - claims - made								
18.1 Products liability - occurrence	37,500		37,500					
18.2 Products liability - claims - made								
19.1, 19.2 Private passenger auto liability	4,711,495		4,711,495					
19.3, 19.4 Commercial auto liability	4,937,571		4,937,571					
21. Auto physical damage	2,751,958		2,751,958					
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International 30. Reinsurance-Nonproportional Assumed Property	[·····							
31. Reinsurance-Nonproportional Assumed Property 31. Reinsurance-Nonproportional Assumed Liability	XXX XXX							
Reinsurance-Nonproportional Assumed Etability Reinsurance-Nonproportional Assumed Financial Lines	XXX		[
Reinsulance-voriproportional Assumed Financial Lines Aggregate write-ins for other lines of business	[·····]·		[
33. Aggregate write-ins for other lines of business 34. TOTALS	28,013,156		28,013,156					
OH. TOTALO	20,010,100		20,010,100					l
DETAILS OF WRITE-INS								
3301.								
3302.								
3303.			[
3398. Summary of remaining write-ins for Line 33 from overflow page								
3399. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)								

UNDERWRITING AND INVESTMENT EXHIBIT PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reported Losses Incurred But Not Reported				d	8	9		
		4	2 Repor	led Losses	4	5	ncurred But Not Reported	1 7	1	
	Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable from Authorized and Unauthorized Companies	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Unpaid Loss Adjustment Expenses
1. 2. 3. 4.	Fire Allied lines Farmowners multiple peril Homeowners multiple peril	100,000 12,500 50,000 1,288,397		100,000 12,500 50,000 1,288,397		7,113 3,868 360,257		7,113 3,868 360,257		
5. 6. 8. 9.		4,344,696		4,344,696		3,543,217		3,543,217		
11. 11. 12. 13. 14.	Medical malpractice - claims - made Earthquake Group accident and health Credit accident and health (group and individual)								(a)	
15. 16. 17. 17. 18.	Workers' compensation 1 Other liability - occurrence 2 Other liability - claims - made	13,592,884 2,725,398 45,000		13,592,884 2,725,398 45,000		13,912,955 1,931,342 133,615		13,912,955 1,931,342 133,615	(a)	
18. 19. 19. 21.	Products liability - claims - made 1, 19.2 Private passenger auto liability 3, 19.4 Commercial auto liability Auto physical damage	5,398,684 5,339,775 315,724		5,398,684 5,339,775 315,724		627,366 4,114,523		627,366 4,114,523		
22. 23. 24. 26. 27. 28.	Fidelity Surety Surety Burglary and theft Boiler and machinery Credit									
29. 30. 31. 32. 33.	Reinsurance-Nonproportional Assumed Financial Lines Aggregate write-ins for other lines of business	X X X X X X X X X		22 242 050		X X X X X X X X X X X X X X X X X X X		24 624 705		
34.	TOTALS	33,213,058		33,213,058		24,634,795		24,634,795	1	<u> </u>
	DETAILS OF WRITE-INS									
330 330 339	03. 08. Summary of remaining write-ins for Line 33 from overflow page									
339	99. Totals (Lines 3301 through 3303 + 3398) (Line 33 above)									

UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1	Claim adjustment services:	Ехропосо	Ехрепосо	Ехропосо	Total
١.	1.1 Direct	973,429			973,429
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded		* * * * * * * * * * * * * * * * * * * *		973,429
					973,429
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)		* * * * * * * * * * * * * * * * * * * *		
2.	5				
	2.1 Direct, excluding contingent				6,749,690
	2.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent		6,749,690		6,749,690
	2.4 Contingent-direct				
	2.5 Contingent-reinsurance assumed				
	2.6 Contingent-reinsurance ceded				
	2.7 Policy and membership fees				
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)				
3.	Allowances to manager and agents				
4.	•				
5.	Boards, bureaus and associations				
6.	Surveys and underwriting reports			1.5	1.5
7.	Audit of assureds' records				
8.	Salary and related items:				
	8.1 Salaries		* * * * * * * * * * * * * * * * * * * *	11,578	11,578
	8.2 Payroll taxes			542	542
9.	Employee relations and welfare			707	707
	Insurance				110
	Directors' fees				400
	Travel and travel items				
	Rent and rent items				162
	Equipment			207	207
15.	Cost or depreciation of EDP equipment and software			62	
16.	Printing and stationery			29	<u>2</u> 9
17.	Postage, telephone and telegraph, exchange and express		* * * * * * * * * * * * * * * * * * * *	56	
18.	Legal and auditing			1,548	1,548
19.				15,285	
20.					
20.					
	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$ 0				
	20.2 Insurance department licenses and fees				
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)				
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
21.	Real estate expenses				
22.					
23.	Reimbursements by uninsured plans				
24.				1,082	1,082
25.	Total expenses incurred			16,367	
					(4)
26.					
27.	, , , , , , , , , , , , , , , , , , , ,				
28.	Amounts receivable relating to uninsured plans, prior year				
29.	Amounts receivable relating to uninsured plans, current year				
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			16,367	16,367
	DETAILS OF WRITE-INS				
	Other Expenses	1		1,082	1,082
2402.					
	C		* * * * * * * * * * * * * * * * * * * *		
	Summary of remaining write-ins for Line 24 from overflow page				
2499.	Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)			1,082	1,082

(a) Includes management fees of \$ 16,367 to affiliates and \$ 0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
	J.S. Government bonds	(a) 1,130,736	1,166,207
1.1 E	Bonds exempt from U.S. tax	(a)	
1.2 (Other bonds (unaffiliated)	(a) 449,552	460,115
1.3 E	Bonds of affiliates	(a)	
2.1 F	Preferred stocks (unaffiliated)	(b)	
2.11 F	Preferred stocks of affiliates	(b)	
2.2 (Common stocks (unaffiliated)	311,500	311,500
2.21 (Common stocks of affiliates		
3. N	Mortgage loans	(c)	l
4. F	Real estate	(d)	
5. (Contract loans		l
	Cash, cash equivalents and short-term investments	(e) 216,886	279,743
7. [Derivative instruments	(f)	
8. (Other invested assets	117,440	
9. <i>F</i>	Aggregate write-ins for investment income	35,158	· · · · · · · · · · · · · · · · · · ·
10. 7	Total gross investment income	2,261,272	2,370,163
11. I	nvestment expenses		(g) 16,366
12. I	nvestment taxes, licenses and fees, excluding federal income taxes		(g)
	nterest expense		(h)
	Depreciation on real estate and other invested assets		(i)
15. A	Aggregate write-ins for deductions from investment income		(7
	Fatal dadications (Lines 44 through 45)		16,366
	Net investment income (Line 10 minus Line 16)		2,353,797
17. 1	,		2,000,101
	DETAILS OF WRITE-INS		
	Miscellaneous Income (Expenses)	35,158	35,158
0902			
0903			
0998.	Summary of remaining write-ins for Line 9 from overflow page		
0999. 1	Totals (Lines 0901 through 0903) plus 0998 (Line 9, above)	35,158	35,158
1501			
1502.			
1503.			
	Summary of remaining write-ins for Line 15 from overflow page		
1599. 1	Totals (Lines 1501 through 1503) plus 1598 (Line 15, above)		
(b) Include (c) Include (d) Include (e) Include (f) Include (g) Include (b) Include (c) Include (d) Include (d) Include (e) In	udes \$ 49,471 accrual of discount less \$ 19,225 amortization of premium and less udes \$ 0 accrual of discount less \$ 0 amortization of premium and less udes \$ 0 accrual of discount less \$ 0 amortization of premium and less udes \$ 0 for company's occupancy of its own buildings; and excludes \$ udes \$ 40,246 accrual of discount less \$ 772 amortization of premium and less udes \$ 0 accrual of discount less \$ 0 amortization of premium. Udes \$ 0 investment expenses and \$ 0 investment taxes, licenses and fee egregated and Separate Accounts.	\$ 0 paid for accrued \$ 0 paid for accrued 0 interest on encumbrances. \$ 132,305 paid for accrued	dividends on purchases. interest on purchases. interest on purchases.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds					
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)					
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)				134,785	
2.21	Common stocks of affiliates					
3.	Mortgage loans				* * * * * * * * * * * * * * * * * * * *	
4.	Real estate				* * * * * * * * * * * * * * * * * * * *	
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments				* * * * * * * * * * * * * * * * * * * *	
7.	Derivative instruments				* * * * * * * * * * * * * * * * * * * *	
8.	Other invested assets				(73,427)	
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)				61,358	

DETAILS OF WRITE-INS			
0901.			
0902.			
0903.	 	 	
0998. Summary of remaining write-ins for Line 9 from overflow page			
0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9, above)			

2303.

2398. Summary of remaining write-ins for Line 23 from overflow page 2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)

EXHIBIT OF NONADMITTED ASSETS

		1	2	3
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)			
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			* * * * * * * * * * * * * * * * * * * *
	2.2 Common stocks			
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens			
	3.2 Other than first liens			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
_	4.3 Properties neight for sale	* * * * * * * * * * * * * * * * * * * *		
5.	4.3 Properties held for sale Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term			
c	investments (Scriedule DA)			
6. 7				
7.	Other invested assets (Schedule BA)			
8. 9.	Receivables for securities	* * * * * * * * * * * * * * * * * * * *		
9. 10.	Aggregate write-ins for invested assets			
10. 11.	Subtotals, cash and invested assets (Lines 1 to 9) Title plants (for Title insurers only)			* * * * * * * * * * * * * * * * * * * *
12.				
13.	Premiums and considerations:	* * * * * * * * * * * * * * * * * * * *		
13.				
	 13.1 Uncollected premiums and agents' balances in the course of collection 13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due 			
	42.2 Assessed astronometric annualisms			
14.	13.3 Accrued retrospective premiums Reinsurance:	* * * * * * * * * * * * * * * * * * * *		* * * * * * * * * * * * * * * * * * * *
14.	AAA Anna da mara ankla Gamarian an			
	440 = 1 1 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	14.2 Funds held by or deposited with reinsured companies 14.3 Other amounts receivable under reinsurance contracts			
15.				
16.1	Amounts receivable relating to uninsured plans Current federal and foreign income tax recoverable and interest thereon	* * * * * * * * * * * * * * * * * * * *		
16.2		4 570 000	2,808,950	1.229.118
17.		1,573,032		1,223,110
18.	Guaranty funds receivable or on deposit Electronic data processing equipment and software			
19.			116	116
20.	Not adjusted at the second lightiffier due to foreign analysis of the			
21.	Receivables from parent, subsidiaries and affiliates			
22.	Health care and other amounts receivable			
23.	Aggregate write-ins for other than invested assets			
24.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell			
	Accounts (Lines 10 to 23)	1,579,832	2,809,066	1,229,234
25.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
26.	Total (Lines 24 and 25)	1,579,832	2,809,066	1,229,234
		<u> </u>	, ,	
	DETAILS OF WRITE-INS			
0901.				
0902.				
0903.				
0998.	Summary of remaining write-ins for Line 09 from overflow page			
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)			
2301.				

2302.		. [1	1

Note 1- Summary of Significant Accounting Policies

A. Accounting Practices

Effective January 1, 2001, and subject to any deviations prescribed or permitted by the Maryland Insurance Commissioner, the accompanying financial statements of Montgomery Mutual Insurance Company (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners ("NAIC") *Accounting Practices and Procedures Manual* ("APP Manual").

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, revenues, and expenses. It also requires estimates in the disclosure of contingent assets and liabilities. Actual results could differ from these estimates.

C. Accounting Policies

Premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro-rata methods. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

- Short term investments are carried at cost, adjusted where appropriate for amortization of premium or discount, or market as specified by the Purposes and Procedures Manual of the NAIC Securities Valuation Office ("SVO Manual").
- 2. Bonds are carried at cost, adjusted where appropriate for amortization of premium or discount, or market as specified by the SVO Manual.
- 3. Common stocks are carried at market value.
- The Company does not own preferred stocks.
- 5. The Company does not own mortgage loans.
- 6. Mortgage-backed/asset backed securities are stated at amortized cost or market based on guidance in the Purposes and Procedures Manual of the NAIC Securities Valuation Office (SVO Manual). Prepayment assumptions for mortgage backed/asset backed securities are updated monthly using the Bloomberg data service. The retrospective adjustment method is used to value all mortgage backed/asset backed securities.
- 7. The Company does not own any subsidiaries, controlled, or affiliated entities.
- 8. The Company does not own any joint ventures, partnerships or limited liability companies.
- 9. Derivative Securities, refer to Note 8.
- 10. Refer to Note 29.
- 11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates, and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and follow current standards of practice. Any adjustments to the liability are reflected in the period that they are determined.
- 12. The Company did not change its capitalization policy in 2007.
- 13. The Company has no pharmaceutical rebate receivables.

Note 2- Accounting Changes and Correction of Errors

A. There were no material changes in accounting principles or corrections of errors during the year.

Note 3- Business Combinations and Goodwill

A. Statutory Purchase Method

The Company did not enter into any statutory purchases during the year.

B. Statutory Mergers

The Company did not enter into any statutory mergers during the year.

C. Impairment Loss

Not applicable

Note 4- Discontinued Operations

The Company has no discontinued operations to report.

Note 5- Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans.

The Company has no mortgage loans.

B. Troubled Debt Restructuring for Creditors

Not applicable

C. Reverse Mortgages

The Company has no reverse mortgages.

- D. Loan-Backed Securities
 - 1. The Company elected to use the book value as of January 1, 1994 as the cost for applying the retrospective adjustment method to securities purchased prior to that date, where historical cash flows are not readily available.
 - 2. Prepayment speed assumptions are updated monthly with data sourced from the Bloomberg data service.
 - 3. The Company had no negative yield situations requiring a change from the retrospective to prospective method.
- E. Repurchase Agreements

The Company did not enter into any repurchase agreements during the year.

F. Real Estate

The Company does not own real estate.

G. Investments in Low-Income Housing Tax Credits

The Company does not hold investments in low-income housing tax credits.

Note 6- Joint Ventures, Partnerships & Limited Liability Companies

- A. The Company has no investments in joint ventures, partnerships, or limited liability companies.
- B. Impairments on joint ventures, partnerships and limited liability companies

Not applicable

Note 7- Investment Income

A. Accrued Investment Income

All investment income due and accrued over 90 days past due is excluded from Surplus.

B. Amounts Nonadmitted

No amounts were excluded as of December 31, 2007.

Note 8- Derivative Instruments

The Company's investment activities do not include derivatives. However, the Company may acquire derivatives as additions to bond, common stock, or preferred stock investments. These derivatives are ancillary to the overall investment and are immaterial to the underlying investment portfolio.

Note 9 - Income Taxes

A. The components of the net deferred tax assets and liabilities recognized in the Company's Assets, Liabilities, Surplus and Other Funds are as follows:

	December 31, 2007	December 31, 2006	Change
Total of gross deferred tax assets	2,600,000	3,727,000	(1,127,000)
Total of deferred tax liabilities	(727,000)	(826,000)	99,000
Net deferred tax asset (liability)	1,873,000	2,901,000	(1,028,000)
Net deferred tax asset non-admitted	(1,579,832)	(2,808,950)	1,229,118
Net admitted deferred tax asset (liability)	293,168	92,050	201,118

- B. The Company does not have any deferred tax liabilities described in SSAP No. 10, Income Taxes, paragraph 6d.
- C. The provisions for incurred taxes on earnings for the years ended December 31 are:

	2007	2006
Federal tax on operations	1,324,220	(3,124,787)
Net operating loss benefit	0	0
Foreign tax on operations	0	0
Income tax incurred on operations	1,324,220	(3,124,787)
Tax on capital gains	0	220,786
Total income tax incurred	1,324,220	(2,904,001)

The Company's deferred tax assets and liabilities result primarily from discounting of limits on unearned premium reserve deductions, deferred compensation, state assessments, allowance for doubtful accounts, net operating losses and the reversal of discount accretion on bonds.

The change in deferred income taxes is comprised of the following:

	2007
Change in net deferred income tax (without unrealized gain or loss)	(1,006,524)
Tax effect of unrealized (gains) losses	(21,476)
Total change in net deferred income tax	(1,028,000)

- D. Effective tax rates differ from the current statutory rate of 35% principally due to the effects of excludable dividend income and audit settlements.
- E. The amount of Federal income taxes paid and available for recoupment in the event of future losses is none from the current year and none from the preceding year.

The amount of net losses carried forward and available to offset future net income subject to Federal income taxes are as follows:

	Amount	Expiration
NOL generated in 2005	\$1,808,450	2025

The Company has an AMT credit carryforward of \$296,000 that does not expire.

F. The Company does not join in the filing of a consolidated return.

Note 10- Information concerning Parent, Subsidiaries and Affiliates

- A. The Company is a mutual company and therefore not owned by any business entity. Liberty Mutual Insurance Company ("LMIC"), a Massachusetts Company, controls a majority of the Company's Board of Directors. LMIC is wholly owned by Liberty Mutual Group, Inc., a Massachusetts company.
- B. Transactions entered into by the Company with its affiliates are described on Schedule Y Part 2.
- C. Refer to Notes 10 F and 25.
- D. At December 31, 2007, the Company reported \$16,064 due to affiliates. In general, the terms of the inter-company arrangements require settlement at least quarterly.
- E. The Company has made no guarantee or initiated undertaking for the benefit of affiliates which result in a material contingent exposure of the Company's or affiliates' assets or liabilities.
- F. Refer to Note 25 for information regarding the Amended and Restated Reinsurance Pooling Agreement.

The Company entered into a management services agreement, effective December 15, 2001, with LMIC. Under the agreement, LMIC may provide services related to common management functions including, but not limited to, accounting, financial, tax and auditing, information technology and support, purchasing, payroll and employee benefits, policy administration, real estate management, legal, general administration, as well as consulting and other services as the parties may request. The agreement was amended effective January 1, 2005.

The Company entered into a services agreement (the "Agreement"), effective January 1, 2000, with Peerless Insurance Company ("PIC") and other affiliates. The Agreement allows parties to the Agreement to provide services related to common management functions including, but not limited to, coordinating marketing and advertising, information systems support, payroll and human resources services, actuarial support, accounting and other financial services, as well as consulting and other services as the parties may request.

The Company entered into an investment management agreement effective April 1, 2007 with LMIC. Under this agreement, LMIC provides investment management services to the Company.

- G. The Company is part of a holding company structure as illustrated in Schedule Y Part 1.
- H. The Company does not own shares of an upstream company, either directly or indirectly.

- I. The Company has no investments in subsidiary, controlled or affiliated companies.
- J. Impairment of subsidiaries

Refer to 10 I

K. Investment in foreign insurance subsidiaries.

Refer to 10 I

L. Investment in downstream noninsurance holding companies.

Refer to 10 I

Note 11- Debt

Not applicable

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

The Company does not have any direct employees and therefore, does not have any direct obligations for a defined benefit plan, deferred compensation arrangements, compensated absences or other post retirement benefit plans. Services for the operation of the Company are provided under provisions of the Management Services Agreements as described in note 10 F.

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

1. Capital Stock

The Company is organized as a Mutual Insurance Company.

2. Preferred Stock

Not applicable

3. Dividend Restrictions

There are no dividend restrictions.

4. Stockholder Dividend Restrictions

Not applicable

- 5. The Company does not have restricted surplus.
- 6. The Company had no advances to surplus.
- 7. The Company did not hold stock for special purposes.
- 8. The Company does not have special surplus funds.
- 9. The portion of unassigned funds (surplus) represented by cumulative unrealized gains/(losses) is \$215,475.
- 10. Surplus Notes

Not applicable

11. Quasi re-organization (dollar impact)

Not applicable

12. Quasi re-organization (effective date)

Not applicable

Note 14- Contingencies

A. Contingent Commitments

The Company has no commitments or contingent commitments to affiliates or other entities as indicated in Note 10 E. The Company has made no guarantees on behalf of affiliates.

B. Assessments

The Company is subject to guaranty fund and other assessments by the states in which it writes business. Guaranty fund assessments are accrued at the time of insolvencies. Other assessments are accrued either at the time of assessments or in the case of premium based assessments, at the time the premiums are written, or, in the case of loss based assessments, at the time the losses are incurred.

As a result of an inter-company reinsurance arrangement (see Note 26), all guaranty fund and other assessments liabilities are ceded to Peerless Insurance Company.

C. Gain Contingencies

Not applicable

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

The Company did not have claims related extra contractual obligation losses and bad faith losses stemming from lawsuits in the current period.

E All other Contingencies

Lawsuits arise against the Company in the normal course of business. Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the financial position of the Company.

Note 15- Leases

As a result of the PIC Amended and Restated Reinsurance Pooling Agreement (see Note 25), the Company has no net lease obligations.

Note 16- Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

The Company is not exposed to financial instruments with off-balance sheet risk.

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

A. Transfers of Receivables reported as sales:

The Company did not have any wash sales during the year.

B. Transfers and servicing of financial assets:

The Company participates in a Securities Lending Program to generate additional income, whereby certain fixed income securities are loaned for a period of time from the Company's portfolio to qualifying third parties, via a lending agent. The company does not participate in term loans, therefore, the company does not have contractual collateral transactions that extend beyond one year from the reporting date. Borrowers of these securities provide collateral equal to or in excess of 102% of the market value of the loaned securities. Acceptable collateral may be in the form of cash or U.S. Government securities. The market value of the loaned securities is monitored and additional collateral is obtained if the market value of the collateral falls below 102% of the market value of the loaned securities. Additionally, the lending agent indemnifies the Company against borrower defaults. The loaned securities remain a recorded asset of the Company; however, the Company records a liability for the amount of cash collateral related to the loaned securities.

At December 31, 2007 the total market value of fixed maturities on loan was \$11,661,200 with corresponding collateral value of \$12,252,312 of which \$7,030,391 represents cash collateral.

C. Wash Sales

The Company did not have any wash sale transactions during the year

Note 18-Gain or Loss from Uninsured Accident and Health Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only (ASO) Plans

Not applicable

B. Administrative Services Contract (ASC) Plans

Not applicable

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contracts

Not applicable

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

The Company has no direct premiums written through managing general agents or third party administrators.

Note 20- Other Items

- A. The Company has no extraordinary items to report.
- B. Troubled Debt Restructuring for Debtors

Not applicable

- C. Other Disclosures
 - 1) Assets in the amount of \$1,900,705 and \$1,903,122 as of December 31, 2007 and 2006, respectively, were on deposit with government authorities or trustees as required by law.
- D. As a result of the Amended and Restated Reinsurance Pooling Agreement with PIC (see Note 25), the Company has no exposure to uncollectible premium receivable balances.
- E. Business Interruption Insurance Recoveries

The Company does not purchase business interruption coverage.

F. State Transferable Tax Credits

The Company does not hold state transferable tax credits.

- G. The Company does not have deposits admitted under section 6603 of the Internal Revenue Services Code.
- H. Hybrid Securities

The Company does not hold hybrid securities.

I. The Company does not have exposure to sub-prime mortgage related risk.

Note 21- Events Subsequent

There were no events subsequent to December 31, 2007 that would require disclosure.

Note 22- Reinsurance

- A. Excluding amounts arising pursuant to the PIC Amended and Restated Reinsurance Pooling Agreement, as described in Note 25 there are no unsecured reinsurance recoverables with an individual reinsurer that exceed 3% of policyholders surplus.
- B. There are no reinsurance recoverables in dispute from an individual reinsurer that exceed 5% of the Company's surplus. In addition, the aggregate reinsurance recoverables in dispute do not exceed 10% of the Company's surplus.
- C. Reinsurance Assumed & Ceded
 - 1. The following table sets forth the maximum return premium and commission equity due the reinsurer or the Company if all of the Company's assumed and ceded reinsurance were canceled as of December 31, 2007.

	Assumed Reinsurance		Ceded Rein	nsurance	Net Reinsurance		
		Commission		Commission		Commission	
	UEP	Equity	UEP	Equity	UEP	Equity	
Affiliates	\$0	\$0	\$23,745,275	\$2,392,559	\$(23,745,275)	\$(2,392,559)	
All Other	0	0	0	0	0	0	
Total	\$0	\$0	\$23,745,275	\$2,392,559	\$(23,745,275)	\$(2,392,559)	

Direct unearned premium reserve \$23,745,275

- 2. There are no sliding scale adjustments, or other profit sharing commissions for direct, assumed or ceded business.
- D. The Company did not write off any uncollectible balances in 2007.
- E. The Company does not have ceded commutations.
- F. The Company does not have any retroactive reinsurance agreements.
- G. The Company has not entered into any deposit type reinsurance agreements as of December 31, 2007.

Note 23 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

The Company does not have net accrued retrospective premiums (See Note 25).

Note 24 - Changes in Incurred Losses and Loss Adjustment Expenses

The Company has no net exposure to changes in incurred losses and loss adjustment expenses (see Note 25).

Note 25- Inter-Company Pooling Arrangements

The Company is a member of the PIC Amended and Restated Reinsurance Pooling Agreement consisting of the following affiliated companies:

		<u>NAIC</u> <u>Co. #</u>	Pooling <u>%</u>	<u>Lines of</u> <u>Business</u>
Lead Company	Peerless Insurance Company (PIC)	24198	70.93%	All Lines
Affiliated Pool				
Companies:	Peerless Indemnity Insurance Company (PIIC)	18333	0.30%	All Lines
	Golden Eagle Insurance Corporation (GEIC)	10836	13.25%	All Lines
				(Except WC)
	Indiana Insurance Company (IIC)	22659	12.25%	All Lines
	The Netherlands Insurance Company (NIC)	24171	3.27%	All Lines
	American Ambassador Casualty Company (AACC)	10073	0.00%	All Lines
	America First Insurance Company (AFIC)	12696	0.00%	All Lines
	America First Lloyd's Insurance Company (AFLIC)	11526	0.00%	All Lines
	Colorado Casualty Insurance Company (CCIC)	41785	0.00%	All Lines
	Consolidated Insurance Company (CIC)	22640	0.00%	All Lines
	Excelsior Insurance Company (EIC)	11045	0.00%	All Lines
	Globe American Casualty Company (GACC)	11312	0.00%	All Lines
	Hawkeye-Security Insurance Company (HSIC)	36919	0.00%	All Lines
	Liberty Mutual Mid-Atlantic Insurance Company (LMMAIC)	14486	0.00%	All Lines
	Mid-American Fire & Casualty Company (MAFCC)	23507	0.00%	All Lines
	Montgomery Mutual Insurance Company (MMC)	14613	0.00%	All Lines
	The Midwestern Indemnity Insurance Company (MWIC)	23515	0.00%	All Lines
	(100.00%	
100% Quota Share				
Affiliated Companies:	Liberty Northwest Insurance Corporation (LNW)	41939	0.00%	All Lines
	National Insurance Association (NIA)	27944	0.00%	All Lines
	North Pacific Insurance Company (NPIC)	23892	0.00%	All Lines
	Oregon Automobile Insurance Company (OAIC)	23922	0.00%	All Lines

Under the terms of the Reinsurance Agreements, the sequence of transactions is as follows:

- (a) Each Affiliated Pool Company cedes its net underwriting activity to the Lead Company.
- (b) Each 100% Quota Share Affiliated Company cedes its net underwriting activity to the Lead Company.
- (c) After recording the assumed affiliate transactions noted above, the Lead Company records 100% of its external assumed and ceded reinsurance activity.
- (d) The Lead Company's remaining underwriting activity, after processing all internal and external reinsurance is retroceded to the pool members in accordance with each company's pool participation percentage, as noted above.
- (e) There were no members that are parties to reinsurance agreements with non-affiliated reinsurers covering business subject to the pooling agreement that have a contractual right of direct recovery from the non-affiliated reinsurer per the terms of such reinsurance agreements.
- (f) There were no discrepancies between entries regarding pooled business on the assumed and ceded reinsurance schedules of the Lead Company and corresponding entries on the assumed and ceded reinsurance schedules of other pooled participants.
- (g) The write-off of uncollectible reinsurance is pooled and the Provision for Reinsurance is recognized by the entity placing the outbound external reinsurance.

Subject to the approval of the appropriate state insurance departments, effective January 1, 2008, the PIC Amended and Restated Reinsurance Pooling Agreement was amended to adjust pooling percentages and add the affiliates noted below. Concurrently, each company noted below terminated their existing inter-company reinsurance agreements.

American Fire and Casualty Company Avomark Insurance Company National Insurance Association Ohio Casualty of New Jersey, Inc. Ohio Security Insurance Company The Ohio Casualty Insurance Company West American Insurance Company

Effective January 1, 2008 Bridgefield Employers Insurance Company and Bridgefield Casualty Insurance Company novated their 100% quota share agreements with Liberty Mutual Insurance Company to substitute PIC as the reinsurer.

Therefore, effective January 1, 2008, the PIC Amended and Restated Reinsurance Pooling Agreement consisted of the following affiliated companies:

		<u>NAIC</u> <u>Co. #</u>	Pooling <u>%</u>	Lines of Business
Lead Company	Peerless Insurance Company (PIC)	24198	42.00%	All Lines
Affiliated Pool				
Companies:	Peerless Indemnity Insurance Company (PIIC)	18333	5.00%	All Lines
	Golden Eagle Insurance Corporation (GEIC)	10836	7.00%	All Lines
				(Except WC)
	Indiana Insurance Company (IIC)	22659	8.00%	All Lines
	The Netherlands Insurance Company (NIC)	24171	3.00%	All Lines
	American Fire and Casualty Company (AFCC)	24066	1.00%	All Lines
	The Ohio Casualty Insurance Company (OCIC)	24074	34.00%	All Lines
	Avomark Insurance Company (AIC)	10798	0.00%	All Lines
	American Ambassador Casualty Company (AACC)	10073	0.00%	All Lines
	America First Insurance Company (AFIC)	12696	0.00%	All Lines
	America First Lloyd's Insurance Company (AFLIC)	11526	0.00%	All Lines
	Colorado Casualty Insurance Company (CCIC)	41785	0.00%	All Lines
	Consolidated Insurance Company (CIC)	22640	0.00%	All Lines
	Excelsior Insurance Company (EIC)	11045	0.00%	All Lines
	Globe American Casualty Company (GACC)	11312	0.00%	All Lines
	Hawkeye-Security Insurance Company (HSIC)	36919	0.00%	All Lines
	Liberty Mutual Mid-Atlantic Insurance Company (LMMAIC)	14486	0.00%	All Lines
	Mid-American Fire & Casualty Company (MAFCC)	23507	0.00%	All Lines
	Montgomery Mutual Insurance Company (MMC)	14613	0.00%	All Lines
	The Midwestern Indemnity Insurance Company (MWIC)	23515	0.00%	All Lines
	National Insurance Association (NIA)	27944	0.00%	All Lines
	Ohio Casualty of New Jersey, Inc. (OCNJ)	10937	0.00%	All Lines
	Ohio Security Insurance Company (OSIC)	24082	0.00%	All Lines
	West American Insurance Company (WAIC)	44393	0.00%	All Lines
	1 2 \		100.00%	
100% Quota Share				
Affiliated Companies:	Liberty Northwest Insurance Corporation (LNW)	41939	0.00%	All Lines
1	Bridgefield Casualty Insurance Company (BEIC)	10335	0.00%	All Lines
	Bridgefield Employers Insurance Company (BEIC)	10701	0.00%	All Lines
	North Pacific Insurance Company (NPIC)	23892	0.00%	All Lines
	Oregon Automobile Insurance Company (OAIC)	23922	0.00%	All Lines

Note 26- Structured Settlements

- A. The Company has no net exposure to contingent liabilities from the purchase of annuities (see Note 25).
- B. Not applicable

Note 27 - Health Care Receivables

Not applicable

Note 28 - Participating Policies

Not applicable

Note 29 – Premium Deficiency Reserves

The Company has no net exposure to liabilities related to premium deficiency reserves (see Note 25).

Note 30- High Dollar Deductible Policies

As a result of the Company's participation in the PIC Amended and Restated Pooling Agreement (see Note 25), the Company does not have any net high dollar deductible policy liabilities.

Note 31- Discounting of Liabilities for Unpaid Losses and Unpaid Loss Adjustment Expenses

Not applicable

Note 32 - Asbestos/Environmental Reserves

The Company has no net exposure to asbestos and environmental claims (see Note 25).

Note 33- Subscriber Savings Accounts

The Company is not a reciprocal insurance company.

Note 34 - Multiple Peril Crop Insurance

Not applicable

SUMMARY INVESTMENT SCHEDULE

			ss Holdings	Admitted Assets as Reported in the Annual Statement	
$\overline{}$	Investment Categories	1 Amount	2 Percentage	3 Amount	4 Percentage
1. Bor	ds:				
	U.S. treasury securities	13,105,780	27.152	13,105,780	27.152
1.2	U.S. government agency obligations (excluding mortgage-backed securities):				
	1.21 Issued by U.S. government agencies	5,451,000	11.293	5,451,000	11.293
12	1.22 Issued by U.S. government sponsored agencies Foreign government (including Canada, excluding mortgage-backed securities)				
1	Securities issued by states, territories, and possessions				
	and political subdivisions in the U.S.:				
	1.41 States, territories and possessions general obligations				
	1.42 Political subdivisions of states, territories and possessions and political				
	subdivisions general obligations 1.43 Revenue and assessment obligations				
	1.44 Industrial development and similar obligations				
1.5					
	1.51 Pass-through securities:				
	1.511 Issued or guaranteed by GNMA	2,283,545	4.731	2,283,545	4.731
	1.512 Issued or guaranteed by FNMA and FHLMC	6,670,452	13.820	6,670,452	13.820
	1.513 All other 1.52 CMOs and REMICs:				
	1.52 1 Issued or guaranteed by GNMA, FNMA, FHLMC or VA	1,125,690	2.332	1,125,690	2.332
	1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-				
	backed securities issued or guaranteed by agencies shown in Line 1.521				
	1.523 All other	499,521	1.035	499,521	1.035
	er debt and other fixed income securities (excluding short term):	740.040	4.544	740.040	4.544
	Unaffiliated domestic securities (includes credit tenant loans rated by the SVO) Unaffiliated foreign securities	743,910 499,515	1.541	743,910 499,515	1.541 1.035
	Affiliated securities	439,313	1.055	499,515	
	ity interests:				
3.1	Investments in mutual funds	756,039	1.566	756,039	1.566
3.2	Preferred stocks:				
	3.21 Affiliated 3.22 Unaffiliated				
3.3	Publicly traded equity securities (excluding preferred stocks):				
	3.31 Affiliated				
	3.32 Unaffiliated	1,525,101	3.160	1,525,101	3.160
3.4	Other equity securities:				
	3.41 Affiliated				
3.5	3.42 Unaffiliated Other equity interests including tangible personal property under lease:				
0.0	3.51 Affiliated				
	3.52 Unaffiliated				
	tgage loans:				
1	Construction and land development				
4.2 4.3	Agricultural Single family residential properties				
4.4	Multifamily residential properties				
4.5	Commercial loans				
4.6					
	Il estate investments:				
5.1					
5.2	Property held for production of income (including \$ 0 of property acquired in satisfaction of debt)				
5.3	Property held for sale (including \$ 0 property				
	acquired in satisfaction of debt)				
	tract loans				
	eivables for securities	9,225	0.019	9,225	0.019
	h, cash equivalents and short-term investments er invested assets	14,074,356 1,523,224	29.159 3.156	14,074,356	29.159 3.156
	al invested assets	48,267,358	100.000	1,523,224 48,267,358	100.000

PART 1 - COMMON INTERROGATORIES

GENERAL

]

R	s the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which s an insurer?	Yes [2	() [No []
s p N	f yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Wodel Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?	Yes []	() [No []
3 8	State Regulating?		ı	Maryland
	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes [] [No [X]
2 I	f yes, date of change:			
1 8	State as of what date the latest financial examination of the reporting entity was made or is being made.		12	/31/2004
	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.		12	/31/2004
d	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination balance sheet date).		06	/01/2006
4 E	By what department or departments? Maryland Insurance Administration			
C	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:			
	4.11 sales of new business?	Yes [•	No [X]
а	4.12 renewals? During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:	Yes [] [No [X]
	4.21 sales of new business?	Yes [•	No [X]
	4.22 renewals?	Yes [•	No [X]
	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	Yes [] [No [X]
	f yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has be eased to exist as a result of the merger or consolidation.			
	1 2 3			
	1 2 3			
	1 2 3 Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable)			
S	Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?	Yes []	No [X]
S	1 2 3 Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable)	Yes []	No [X]
S	Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?	Yes [] [No [X]
If	Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? If yes, give full information	Yes [
s : If	Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? If yes, give full information Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?			No [X]
s li	Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? If yes, give full information Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? If yes, 7.21 State the percentage of foreign control			
s ! If	Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? If yes, give full information Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? If yes,	Yes [No [X]
s li	Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? If yes, give full information Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its	Yes [No [X]
s li	Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? f yes, give full information Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? f yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact	Yes [No [X]
s 2 III	Name of Entity Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? If yes, give full information Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact	Yes [No [X]
s s s s s s s s s s s s s s s s s s s	Name of Entity Name of Entity NAIC Company Code State of Domicile Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? If yes, give full information Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact	Yes [] '	No [X]

PART 1 - COMMON INTERROGATORIES

	financial regulatory services agency [i.e.	ore banks, thrifts or securities firms? e the names and locations (city and state of the e. the Federal Reserve Board (FRB), the Offio deposit Insurance Corporation (FDIC) and the	ce of the Comptrolle	er of the Currenc	(OCC), the Office	ce of	[] No[X]	
	1	2	3	4	5	6	7	
	A 500 1 A 10				0.70	5510	050	
	Affiliate Name	Location (City, State)	FRB	OCC	OTS	FDIC	SEC	
۵	What is the name and address of the in	dependent certified public accountant or acc	ounting firm retains	nd to conduct the	annual audit?			
	Ernst & Young, LLP 200 Clarendon Street, Boston, MA 021	16						
10.	consulting firm) of the individual providi 62 Maple Avenue, Keene, NH 03431	on (officer/employee of the reporting entity or ng the statement of actuarial opinion/certifica ty Mutual Agency Markets	ation? William M. Fi	nn, FCAS, MAAA				
11 1		rities of a real estate holding company or oth					[] No[X]	
	bood the reporting office, own any cood	11.11 Name of rea	l estate holding cor	-			I I WOLVI	
		11.12 Number of p 11.13 Total book/a		lue		\$		0
11.2								
10		E ALIEN DEDODTING ENTITIES ONLY.						
		F ALIEN REPORTING ENTITIES ONLY: the year in the United States manager or the	United States trus	tees of the report	ina entity?			
12.2		ss transacted for the reporting entity through					[] No[X]	
		any of the trust indentures during the year?	0 0 2.		0.010.1000.001		[] No[X]	
12.4	If answer to (12.3) is yes, has the domi	ciliary or entry state approved the changes?				Yes	[] No[]	N/A [X]
13.1	performing similar functions) of the reprantation and ethical conduct, including relationships; b. Full, fair, accurate, timely and underst. Compliance with applicable governmd. The prompt internal reporting of violations.	ations to an appropriate person or persons ide	n includes the follow onflicts of interest b equired to be filed b	wing standards? between personal by the reporting er	and professional	Yes	[X] No[]	
3.11		ode. plain:						
13.2 3.21	Has the code of ethics for senior mana- If the response to 13.2 is Yes, provide	gers been amended? information related to amendment(s).				Yes	[] No[X]	
13.3		cs been waived for any of the specified office				Yes	[] No[X]	
3.31	If the response to 13.3 is Yes, provide	the nature of any waiver(s)					1 1[]	
		BOARD OF	DIRECTORS					
	committee thereof?	ts of the reporting entity passed upon either	•			Yes	[X] No[]	
15.	Does the reporting entity keep a comple committees thereof?	ete permanent record of the proceedings of it	ts board of directors	s and all subordin	ate	Yes	[X] No[]	
16.		procedure for disclosure to its board of directors, directors, trustees or responsible employed				Yes	[X] No[]	
		FINA	NCIAL					
17.		g a basis of accounting other than Statutory	Accounting Principle	es (e.g., Generall	y Accepted			
18.1	Accounting Principles)? Total amount loaned during the year (ir	nclusive of Separate Accounts, exclusive of p	olicy loans):			Yes	[] No[X]	
		18.11 To directors	or other officers			\$		0
		18.12 To stockhold 18.13 Trustees, su		aternal only)		\$		0
18.2	Total amount of loans outstanding at th	e end of year (inclusive of Separate Account				<u> </u>		<u> </u>
	Ť	18.21 To directors	or other officers	,		\$		0
		18.22 To stockhold 18.23 Trustees, su		aternal only)		\$ \$		0
		,	- 1	• •				

PART 1 - COMMON INTERROGATORIES

19.1	Were any ass	ets reported in this statement subjecting reported in the statement?	ct to a contractual obligation	on to transfer to a	nother party without th	e liability for such	Yes [] No []	X 1
19.2	_	ne amount thereof at December 31 c	of the current year:				.00[]0[.1
	•			ted from others			\$	0
				owed from others sed from others			\$	0
			19.24 Othe				\$\$	0
20.1	Does this stat association as	ement include payments for assessi ssessments?	ments as described in the	Annual Statemer	t Instructions other tha	an guaranty fund or guaranty	Yes[] No[X]
20.2	If answer is ye	es:	20.21 Amo	ount paid as losse	s or risk adjustment		\$	0
			20.22 Amo	ount paid as expe			\$	0
21.1	Doos the rene	arting antity report any amounts due		er amounts paid	as 2 of this statement	2	Vac [V] No [0
		orting entity report any amounts due e any amounts receivable from pare			ge 2 of this statement	ı	Yes [X] No [1
21.2	ii yes, iiidicate	e any amounts receivable from paren	in included in the rage 2 a	amount.			ų	
			I	INVESTMENT	-			
22.1		tocks, bonds and other securities ov		•			Yes [X] No [1
22.2	If no, give full	and complete information, relating t	hereto		***			
23.1	control of the	he stocks, bonds or other assets of reporting entity, or has the reporting force? (Exclude securities subject to	entity sold or transferred		-	· · · · · · · · · · · · · · · · · · ·	Yes[X] No[1
00.0	-						TOS[X] NO[1
23.2	If yes, state th	ne amount thereof at December 31 c	of the current year:	23.21 Loane	ad to others		\$	11,661,201
					ct to repurchase agree	ements	\$ \$	0
				-	ct to reverse repurcha		\$	0
				23.24 Subje	ct to dollar repurchase	agreements	\$	0
				23.25 Subje	ct to reverse dollar rep	ourchase agreements	\$	0
				-	ed as collateral		\$	0
					d under option agreem		\$	0
					stock or securities reseposit with state or oth		\$	1,900,706
				23.29 Off de	•	er regulatory body	\$ \$	1,900,700
23.3	For category ((23.28) provide the following:					•	
20.0	Tor category (25.26) provide the following.				2	_	
		Nature of Restriction		Description		3 Amount		
24.1	Does the reno	orting entity have any hedging transa	actions reported on Schedu	ule DB?			— Yes [X 1
								•
24.2	ir yes, nas a c	comprehensive description of the hea	aging program been made	available to the o	iomiciliary state?		Yes [] No [] N/A[X]
	If no, attach a	description with this statement.						
25.1		ferred stocks or bonds owned as of tible into equity?	December 31 of the curre	nt year mandatori	ly convertible into equ	ity, or, at the option of the	Yes [] No []	X]
25.2	If yes, state th	ne amount thereof at December 31 c	of the current year.				\$	0_
26	Excluding iten	ns in Schedule E, real estate, mortg	age loans and investment	s held nhysically i	n the renorting entity's	offices vaults or		
	safety deposit with a qualifie agreements o	boxes, were all stocks, bonds and of death or trust company in accordant the NAIC Financial Condition Example.	other securities owned thronce with Section 3, III Conniners Handbook?	oughout the curre ducting Examinat	nt year held pursuant ions, G - Custodial or	to a custodial agreement Safekeeping	Yes [X] No [1
26.01	For agreemen	its that comply with the requirements	s of the NAIC Financial Co	ondition Examiner	s Handbook, complete	e the following:		
		1				2	□	
	ID More	Name of Custo	dian(s)	2 Cha		an's Address		
	JE WORG	an Chase		3 Cha	ise ivieuro Tech Centel	; Brooklyn, NY 11245	\exists	
							\dashv	
	<u> </u>						_	
26.02		nents that do not comply with the red n and a complete explanation:	quirements of the NAIC Fi	nancial Condition	Examiners Handbook	, provide the		
		1 Namo(a)	2		0	3		
		Name(s)	Location(s	5)	Com	plete Explanation(s)	<u> </u>	
	1	· ·			1		Ī	

Yes [] No [X]

26.03 Have there been any changes, including name changes, in the custodian(s) identified in 26.01 during the current year?

PART 1 - COMMON INTERROGATORIES

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

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

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

1	2	3
Central Registration		
Central Registration Depository Number(s)	Name	Address

27.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)]]?

Yes [] No [X]

27.2 If yes, complete the following schedule:

1	2	3
		Book/Adjusted
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value
27.2999 Total		

27.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
		Amount of Mutual Fund's	
Name of Mutual Fund	Name of Significant Holding	Book/Adjusted Carrying Value	Date of
(from above table)	of the Mutual Fund	Attributable to the Holding	Valuation

28. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
			Excess of Statement
			over Fair Value
	Statement (Admitted)		(-), or Fair Value
	Value	Fair Value	over Statement (+)
28.1 Bonds	43,403,594	43,976,162	572,568
28.2 Preferred stocks			
28.3 Totals	43,403,594	43,976,162	572,568

		^ ^	 	 	 ^ ^	 ^ ^	 ^ ^	 	 	 	A A	* *	 * *	 	 ^ ^	 ^ ^	^ ^	 	 	A A	 	 	 	 	 	 	 	 	^ ^	 ^ ^	 					
			 	 	 	 	 	 	 	 			 	 	 	 		 	 		 	 	 	 ٠.	 	 	 	 		 	 					

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

Yes [X] No []

29.2 If no, list exceptions:

28.4 Describe the sources or methods utilized in determining the fair values: IDC, Bloomberg, NAIC-SVO, Broker Quotes, Analytically Determined

OTHER

30.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

28,189

30.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
North Carolina Rate Bureau	\$ 28,189
	\$
	\$

31.1 Amount of payments for legal expenses, if any?

1,964

Montgomery Mutual Insurance Company

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

31.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1		2
Name	<i>I</i>	Amount Paid
Hodes Pessin & Katz PA	\$	2,013
	\$	
	\$	

32.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?

\$ 510

32.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	2	
Name	Amount Paid	i
New Hampshire Bar Association	\$	510
·	\$	
	\$	
	\$	

1.1	Does the reporting entity have any direct Medicare Supplement Ins	surance in force?			YES[]NO[X]		
1.2	If yes, indicate premium earned on U. S. business only.				\$	0	
1.3	What portion of Item (1.2) is not reported on the Medicare Suppler	nent Insurance Experience Exhibit?			\$	0	
	1.31 Reason for excluding				**		
1 /	Indicate amount of earned premium attributable to Canadian and/c	or Other Alien not included in Item (1	2) ahove		¢	0	
1.4	Indicate total incurred claims on all Medicare Supplement insurance		z) above.		φ <u></u>	0	
1.6	Individual policies:	С.			<u> </u>		
1.0		irrent three years:					
	1.61	Total premium earned			\$	0	
	1.62	Total incurred claims			\$	0	
	1.63	Number of covered lives			ψ	0	
		s prior to most current three years:			Ψ		
	1.64	Total premium earned			¢	0	
	1.65	Total incurred claims			ф	0	
	1.66	Number of covered lives			Ф С	0	
17		Number of covered lives			Ψ		
1.7	Group policies:	wront three vector					
		irrent three years:			¢	0	
	1.71	Total premium earned			\$	0	
	1.72	Total incurred claims			\$	0	
	1.73 Number of covered lives				5	0	
	•	s prior to most current three years:			c	0	
	1.74	Total premium earned			\$	0	
	1.75	Total incurred claims			\$	0	
	1.76	Number of covered lives			\$	0	
2.	Health Test:		4	0			
			1	2			
			Current Year	Prior Year			
			\$	\$			
			\$ 0	\$ 0			
		emium Ratio (2.1/2.2)	0.00	0.00			
		eserve Numerator	\$ 0	\$			
		eserve Denominator	\$	\$ 0			
	2.0 10	eserve Ratio (2.4/2.5)	0.00	0.00			
	Does the reporting entity issue both participating and non-participating	ting policies?			YES[X]NO[]	
3.2	If yes, state the amount of calendar year premiums written on:						
	3.21	Participating policies			\$	1,751,470	
	3.22	Non-participating policies			\$	48,708,586	
4.	For Mutual Reporting Entities and Reciprocal Exchange only:						
4.1	Does the reporting entity issue assessable policies?				YES[]NO[X		
4.2	Does the reporting entity issue non-assessable policies?				YES[X]NO[]	
4.3	If assessable policies are issued, what is the extent of the contingent					0 %	
4.4	Total amount of assessments paid or ordered to be paid during the	year on deposit notes or contingent	premiums.		\$	0	
5.	For Reciprocal Exchanges Only:						
5.1	Does the exchange appoint local agents?				YES[]NO[X	.]	
5.2	If yes, is the commission paid:						
	5.21	Out of Attorney's-in-fact compensa	tion		YES[]NO[] N/A [X]	
	5.22	As a direct expense of the exchange	ge		YES[]NO[] N/A [X]	
5.3	What expenses of the Exchange are not paid out of the compensation	tion of the Attorney-in-fact?					
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment or	f certain conditions, been deferred?			YES[]NO[X	.1	
	If yes, give full information					-	
	7.00						

(Continued)

6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss: In 2007, the Company purchased Workers Compensation reinsurance separately and/or with the Liberty Mutual Group with limits of \$1,175M xs \$25M. A minimum of 75% was placed for each layer.		
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process: The Company tracks aggregate property and WC exposure and reviews quarterly. It uses RiskLink from RMS and AIR from AIR for EQ and wind. It uses RiskLink for WC. Concentrations are in the Northeast for wind and New Madrid for EQ.	ŗ	
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss? In 2007, the Company purchased property catastrophe reinsurance, separately and/or with the Liberty Mutual Group with limits of \$1,900M xs \$50M. The coverage is sufficient to protect against the Company's 250 year event.		
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	VESIX	(]NO[]
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss	120[/	(Inol I
	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)? If yes, indicate the number of reinsurance contracts containing such provisions.	YES []NO[X]
	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	YES []NO[X]
8.1		VE0 !	1110171
8.2	loss that may occur on this risk, or portion thereof, reinsured? If yes, give full information	YES] NO [X]
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no		
	activity during the period); or (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.	YES[] NO [X]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where: (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more		
9.3	of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	YES []NO[X]
9.4	Except for transactions meeting the requirements of paragraph 30 of SSAP No. 62, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:		
	(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or		
	(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	YES []NO[X]

(Continued)

9.5	If yes to 9.4, explain in the Reinsurar	,	al Filing for General Inte	errogatory 9 (Section D)) why the contract(s)			
9.6			Sunnlement under one	or more of the followi	na criteria:			
3.0						YES[]NO[X]		
	•	The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or, The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. e reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that					YES[]NO[X]	
	•	The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. YES reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that a the original entity would have been required to charge had it retained the risks. Has this been done? YES						
10		sks from another entity the	ere should be charged o	on account of such rei	nsurances a reserve equ	ual to that	YES[X]NO[]	
		•	-				YES[]NO[]N/A[X	.]
11.1	Has the reporting entity guaranteed p	policies issued by any other	r entity and now in force	e :			YES[]NO[X]	
11.2	If yes, give full information							
12.1	If the reporting entity recorded accrue amount of corresponding liabilities re-		on insurance contracts	on Line 13.3 of the as	sset schedule, Page 2, s	state the		
		12.11	Unpaid losses			;	\$	0
		12.12	Unpaid underwriting	expenses (including lo	oss adjustment expenses	3)	\$	0
12.2	Of the amount on Line 13.3, Page 2,	state the amount that is se	ecured by letters of cred	lit, collateral and other	funds?		\$	0
12.3	If the reporting entity underwrites con	nmercial insurance risks, s	uch as workers' compe	nsation, are premium	notes or promissory not	es accepted		_
	from its insureds covering unpaid pre	miums and/or unpaid losse	es?				YES[]NO[X]N/A[]
12.4	If yes, provide the range of interest ra	ates charged under such n	otes during the period of	covered by this statement	ent:			
		12.41	From				0.00	_
		12.42	То				0.00	<u>0</u> %
12.5	Are letters of credit or collateral and of promissory notes taken by a reporting losses under loss deductible features	g entity, or to secure any o	=				YES[]NO[X]	
12.6	If yes, state the amount thereof at De	ecember 31 of current year						
		12.61	Letters of Credit			!	\$	0
		12.62	Collateral and other			:		0
	Largest net aggregate amount insure	•	•	•			\$	0
13.2	Does any reinsurance contract considereinstatement provision?	dered in the calculation of t	this amount include an	aggregate limit of reco	very without also includ	ng a	YES[]NO[X]	
13.3	State the number of reinsurance conf	tracts (excluding individual	facultative risk certifica	tes, but including facu	Itative programs, autom	atic		
	facilities or facultative obligatory cont	racts) considered in the ca	lculation of the amount					3
14.1	Is the company a cedant in a multiple	e cedant reinsurance contra	act?				YES[X]NO[]	
	If yes, please describe the method of			cedants: Premiur	ms and recoverables we	ere		
	allocated pursuant to separate interco	ompany agreements.						
14 3	If the answer to 14.1 is yes, are the n	nethods described in item	14.2 entirely contained	in the respective multi	nle cedant reinsurance			
	contracts?	nothede decombed in item	The ontiroly contained	in the respective male	pro coddin romodranos		YES[]NO[X]	
14.4	If the answer to 14.3 is no, are all the	methods described in 14.	2 entirely contained in v	vritten agreements?			YES[X]NO[]	
14.5	If the answer to 14.4 is no, please ex	plain:						
15.1	Has the reporting entity guaranteed a						YES[]NO[X]	
15.2	If yes, give full information							
						* * * * * * * * * * * * * * * * * * * *		
16.1	Does the reporting entity write any wall fyes, disclose the following information	•	g types of warranty cov	rerage:			YES[]NO[X]	
		1	2	3	4	5		
		Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premium	l	
		Incurred	Unpaid	Premium	Unearned	Earned		
	16.11 Home	\$ 0	\$ 0	\$ 0	\$ 0	\$	0	
	16.12 Products	\$ 0	\$ 0	\$ 0	\$ 0		o. O	
	16.13 Automobile	\$ 0	\$ 0	\$ 0	\$ 0	***************************************	o. O.	
	16.14 Other*	\$ 0	\$ 0	\$ 0	\$ 0	\$	0	
	* Disclose type of coverage:							
	Dississe type of obverage.							

GENERAL INTERROGATORIES (Continued)

17.1	Does the reporting entity include amounts recoverable on unaut	horized reinsurance in Schedule F - Part 3 that it excludes from		
	Schedule F - Part 5.		YES[NO [X]
	Incurred but not reported losses on contracts not in force prior to	o July 1, 1984 and not subsequently renewed are exempt from inclusion in Sched	ule F -	
	Part 5. Provide the following information for this exemption:			
	17.11	Gross amount of unauthorized reinsurance in Schedule F - Part 3		
		excluded from Schedule F - Part 5	\$	0
	17.12	Unfunded portion of Interrogatory 17.11	\$	0
	17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$	0
	17.14	Case reserves portion of Interrogatory 17.11	\$	0
	17.15	Incurred but not reported portion of Interrogatory 17.11	\$	0
	17.16	Unearned premium portion of Interrogatory 17.11	\$	0
	17.17	Contingent commission portion of Interrogatory 17.11	\$	0
	Provide the following information for all other amounts included	in Schedule F - Part 3 and excluded from Schedule F - Part 5, not included above		
	17.18	Gross amount of unauthorized reinsurance in Schedule F - Part 3		
		excluded from Schedule F - Part 5	\$	0
	17.19	Unfunded portion of Interrogatory 17.18	\$	0
	17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$	0
	17.21	Case reserves portion of Interrogatory 17.18	\$	0
	17.22	Incurred but not reported portion of Interrogatory 17.18	\$	0
	17.23	Unearned premium portion of Interrogatory 17.18	\$	0
	17.24	Contingent commission portion of Interrogatory 17.18	\$	0

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

						1
		1 1	2	3	4	5
		2007	2006	2005	2004	2003
			2000	2000	2001	2000
	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,					
	19.1, 19.2 & 19.3, 19.4)	25,939,519	27,484,669	19,594,183	63,149,343	84,288,224
2.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	6,159,512	7,076,049	4,899,724	19,544,315	23,888,462
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	18,361,025	20,417,652	10,787,930	58,811,067	40,431,056
4.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)			(42,811)	(718,924)	
5.	Nonproportional reinsurance lines (Lines 30, 31 & 32)			(₹2,011)	(119,666)	
			F4 070 270	25 220 020		
b.	Total (Line 34)	50,460,056	54,978,370	35,239,026	140,666,135	151,793,711
	Net Premiums Written (Page 8, Part 1B, Col. 6)					
7.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,					
	19.1, 19.2 & 19.3, 19.4)			(11,835,410)	27,504,658	46,071,838
	Property lines (Lines 1, 2, 9, 12, 21 & 26)			(5,214,818)	8,542,020	13,045,915
9.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)			(13,240,899)	31,317,660	11,531,443
10.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)			(42,811)	(718,924)	1,414,614
111.					(119,666)	1,771,355
12	Total (Line 24)	^ *		(30,333,938)	66,525,748	73,835,165
'	Statement of Income (Page 4)			(00,000,000)		10,000,100
12	Net underwriting sein (less) (Line 9)				24,806	(6.004.630)
		0.050 500	4 404 005			(6,994,630)
	Net investment gain (loss) (Line 11)	2,353,796	1,431,035	5,877,922	10,572,748	9,045,213
	Total other income (Line 15)				35,370	(1,805,380)
	Dividends to policyholders (Line 17)				82,427	(19,211)
17.	Federal and foreign income taxes incurred (Line 19)	1,324,220	(3,124,787)	(2,972,735)	44,179	1,647,793
18.	Net income (Line 20)	1,029,576	4,555,822	8,850,657	10,506,318	(1,383,379)
	Balance Sheet Lines (Pages 2 and 3)					
19.	Total admitted assets excluding protected cell business					
	(Page 2, Line 24, Col. 3)	49,747,716	56,701,853	68,156,460	135,249,990	206,555,910
20	Premiums and considerations (Page 2, Col. 3)					
20.	20.4 In source of collection (Line 12.4)				2,953,197	7,083,216
	20.2 Deferred and not yet due (Line 13.2)				17,007,382	12,321,591
	20.3 Accrued retrospective premiums (Line 13.3)					6,372,754
	Total liabilities excluding protected cell business (Page 3, Line 24)	8,627,099	16,873,404	15,198,346	83,454,669	167,298,443
22.	Losses (Page 3, Line 1)				39,236,236	105,622,955
23.	Loss adjustment expenses (Page 3, Line 3)				9,406,821	20,861,326
24.	Unearned premiums (Page 3, Line 9)				30,903,170	30,682,085
25.	Capital paid up (Page 3, Lines 28 & 29)	** **************				
1 -	Surplus as regards policyholders (Page 3, Line 35)	41,120,617	39,828,449	52,958,114	51,795,321	39,257,467
20.	Cash Flow (Page 5)		00,020,110	02,500,114	01,730,021	00,201,401
07		0.040.000	0.000.074	(00.050.000)	(70.040.420)	40 700 044
21.	Net cash from operations (Line 11)	2,216,292	6,028,371	(60,856,899)	(76,249,130)	10,733,214
1	Risk-Based Capital Analysis					
	Total adjusted capital	41,120,617	39,828,449	52,958,114	51,795,321	39,257,467
29.	Authorized control level risk-based capital	442,850	563,413	1,213,796	5,830,828	10,395,904
	Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
	(Page 2, Col. 3)					
	(Item divided by Page 2, Line 10, Col. 3) x 100.0					
30	Devide (Chan A)	62.9	57.4	49.2	61.6	77.8
31.			2.7	18.5	24.8	15.0
					∠4.0	
32.	Mortgage loans on real estate (Lines 3.1 and 3.2)					
33.	Real estate (Lines 4.1, 4.2 & 4.3)					3.0
34.	* *************************************	30.7	33.3	30.1	13.7	4.2
35.	Contract loans (Line 6)					
36.	Other invested assets (Line 7)	3.2	2.8	2.3		
37.			3.8			
38.						
39.	Cash, cash equivalents and invested assets (Line 10)		100.0	100.0	100.0	100.0
	Investments in Parent, Subsidiaries and Affiliates					
1,0	Affiliate the sets (Oct. D. O					
	A(C) + 1 + (1 + (1 + (2 + D + Q + Q					
	Affiliated preferred stocks (Sch. D, Summary, Line 39, Col. 1)					
1	Affiliated common stocks (Sch. D, Summary, Line 53, Col. 1)					
43.	Affiliated short-term investments (subtotals included in Schedule DA,	1	I			
	Part 2, Col. 5, Line 7)				*****	
44.	Affiliated mortgage loans on real estate					
45.	All other affiliated					
46.	Total of above Lines 40 to 45	**				
1	Percentage of investments in parent, subsidiaries and affiliates	[
"'	to surplus as regards policyholders (Line 46 above divided by	1	I			
		1	I			
Щ	Page 3, Col. 1, Line 35 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

		1 2007	2 2006	3 2005	4 2004	5 2003
	Capital and Surplus Accounts (Page 4)					
48.	Net unrealized capital gains (losses) (Line 24)	39,883	(525,124)	(3,485,075)	2,027,517	3,544,672
49.	Dividends to stockholders (Line 35) Change in surplus as regards policyholders					* * * * * * * * * * * * * * * * * * * *
00.	for the year (Line 38)	1,292,168	(13,129,665)	1,162,793	12,537,854	2,565,667
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
51.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,	47,000,004	00.405.000	40,000,040	404 000 500	50 400 500
E2	19.1, 19.2 & 19.3, 19.4)	17,902,304	20,185,368	46,398,613	104,663,586	
	Property lines (Lines 1, 2, 9, 12, 21 & 26)		3,980,268	4,975,154	9,792,087	11,955,044
	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)		7,225,029	20,925,260	18,378,049 4,519,161	19,134,781 2,363,738
	Nonproportional reinsurance lines (Lines 30, 31 & 32)			128,106	1,598,729	814,414
	T-t-1 (1: 24)	28,013,156	31,390,665	72,453,684	138,951,612	
30.	Total (Line 34)	20,013,130	31,390,003	12,433,004	130,331,012	01,030,431
	Net Losses Paid (Page 9, Part 2, Col. 4)					
57.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 18.1, 18.2,			05 004 450	00 004 040	07 000 405
	19.1, 19.2 & 19.3, 19.4)			25,231,152	82,924,810	27,228,495
1	Property lines (Lines 1, 2, 9, 12, 21 & 26)			565,682	4,553,130	6,098,386
59.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)			13,284,743	4,936,785	4,753,809
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29 & 33)			26,551	4,519,161	2,363,738
61. 62.	Nonproportional reinsurance lines (Lines 30, 31 & 32) Total (Line 34)			128,106 39,236,234	1,598,729 98,532,615	814,414 41,258,842
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
63.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
64.	Losses incurred (Line 2)	1			53.6	66.4
65.	Loss expenses incurred (Line 3)				12.9	19.1
66.	Other underwriting expenses incurred (Line 4)				33.8	24.4
67.	Net underwriting gain (loss) (Line 8)					(10.0)
	Other Percentages					
68.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 34 x 100.0)				30.1	25.6
69.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)				66.5	85.5
70.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6,					
	Line 34 divided by Page 3, Line 35, Col. 1 x 100.0)			(57.3)	128.4	188.1
	One Year Loss Development (000 omitted)					
71.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2 - Summary, Line 12, Col. 11)				541	5,870
72	Percent of development of losses and loss expenses incurred					5,570
'	to policyholders' surplus of prior year end (Line 71 above					
	divided by Page 4, Line 21, Col. 1 x 100.0)		[1.4	16.0
	Two Year Loss Development (000 omitted)					
73.	Development in estimated losses and loss expenses incurred					
	2 years before the current year and prior year (Schedule P,					
	Part 2 - Summary, Line 12, Col. 12)		[2,568	12,325
74.	Percent of development of losses and loss expenses incurred to reported					
	policyholders' surplus of second prior year end (Line 73 above divided					
	by Page 4, Line 21, Col. 2 x 100.0)				7.0	36.1

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

		1	2	3	4
Description		Book/Adjusted Carrying Value	Fair Value	Actual Cost	Par Value of Bonds
BONDS Governments	1. United States 2. Canada		21,286,074	20,854,085	20,769,8
(Including all obligations guaranteed	3. Other Countries	20.010.001	24 222 274	22.251.225	22 -22 2
by governments)	4. Totals	20,840,324	, ,	.,,	20,769,8
States, Territories and Possessions (Direct and guaranteed)	5. United States 6. Canada 7. Other Countries	***************************************			
	8. Totals				
Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	9. United States 10. Canada 11. Other Countries	***************************************			******
	12. Totals				
Special revenue and special assessment obligations and all non-guaranteed obligations of agencies and authorities of	13. United States 14. Canada 15. Other Countries	7,796,139	7,911,239	7,796,097	7,833,
obligations of agencies and authorities of governments and their political subdivisions Public Utilities (unaffiliated)	16. Totals	7,796,139	7,911,239	7,796,097	7,833,6
Public Utilities (unaffiliated)	17. United States 18. Canada 19. Other Countries				
lustrial and Miscellaneous and Credit Tenant Loans (unaffiliated) rent, Subsidiaries and Affiliates	20. Totals				
	21. United States	1,243,435	1,245,553	1,236,581	1,250,
Industrial and Miscellaneous and	22. Canada 23. Other Countries	499,515	509,115	497,010	500,
, ,	24. Totals	1,742,950		1,733,591	1,750,0
Parent, Subsidiaries and Affiliates	25. Totals				
	26. Total Bonds	30,379,413	30,951,981	30,383,773	30,353,5
PREFERRED STOCKS Public Utilities (unaffiliated)	27. United States	***************************************			
	30. Totals				
Banks, Trust and Insurance Companies (unaffiliated)	31. United States 32. Canada 33. Other Countries				
	34. Totals				
Industrial and Miscellaneous (unaffiliated)	35. United States 36. Canada 37. Other Countries	•••••			
ublic Utilities (unaffiliated) anks, Trust and Insurance Companies (unaffiliated) dustrial and Miscellaneous (unaffiliated)	38. Totals				
Parent, Subsidiaries and Affiliates	39. Totals				
	40. Total Preferred Stocks				
COMMON STOCKS Public Utilities (unaffiliated)	41. United States 42. Canada 43. Other Countries				
	44. Totals				
Banks, Trust and Insurance Companies (unaffiliated)	45. United States 46. Canada 47. Other Countries	1,525,102	1,525,102	1,278,000	
	48. Totals	1,525,102	1,525,102	1,278,000	
Industrial and Miscellaneous (unaffiliated)	49. United States 50. Canada 51. Other Countries				
	52. Totals				
Parent, Subsidiaries and Affiliates	53. Totals				
	54. Total Common Stocks	1,525,102	1,525,102	1,278,000	
	55. Total Stocks	1,525,102	1,525,102	1,278,000	
	56. Total Bonds and Stocks	31,904,515	32,477,083	31,661,773	

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

	= ***** *****						
1.	Book/adjusted carrying value of bonds and		7. Amortization of premium	19,225			
	stocks, prior year	31,485,339	Foreign Exchange Adjustment:				
2.	Cost of bonds and stocks acquired, Column 7, Part 3	10,881,674	8.1 Column 15, Part 1				
3.	Accrual of discount	49,471	8.2 Column 19, Part 2 Section 1				
4.	Increase (decrease) by adjustment:	_	8.3 Column 16, Part 2, Section 2				
	4.1 Columns 12 - 14, Part 1		8.4 Column 15, Part 4				
	4.2 Column 15 - 17, Part 2, Section 1		Book/adjusted carrying value at end of current period	31,904,515			
	4.3 Column 15, Part 2, Section 2 134,332		10. Total valuation allowance				
	4.4 Column 11 - 13, Part 4	134,332	11. Subtotal (Lines 9 plus 10)	31,904,515			
5.	Total gain (loss), Column 19, Part 4	(1)	12. Total nonadmitted amounts				
6.	Deduct consideration for bonds and stocks		13. Statement value of bonds and stocks, current period	31,904,515			
	disposed of Column 7, Part 4	10,627,075					

NONE Schedule P - Part 1 - Summary

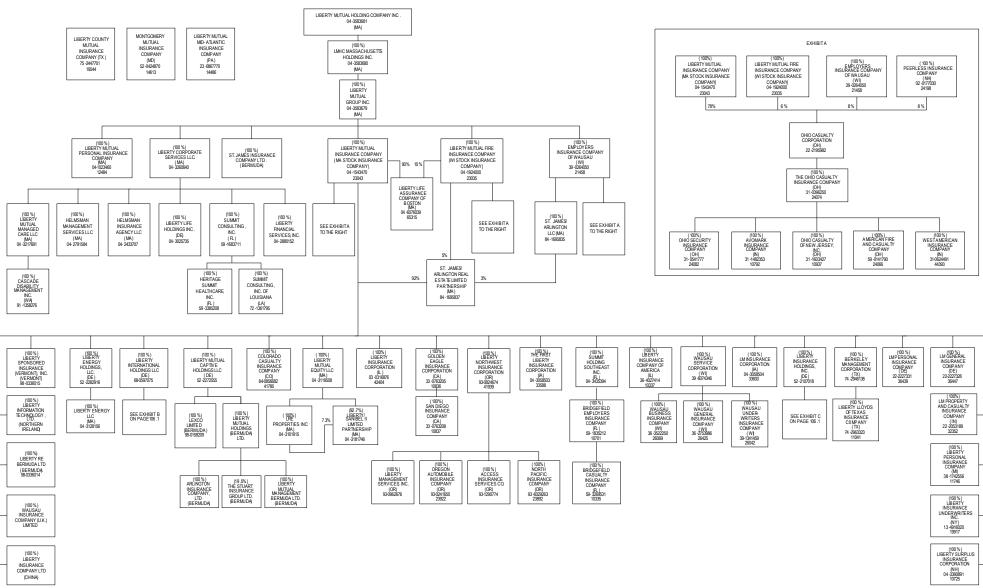
NONE Schedule P - Part 2, 3, 4 - Summary

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN Allocated by States and Territories

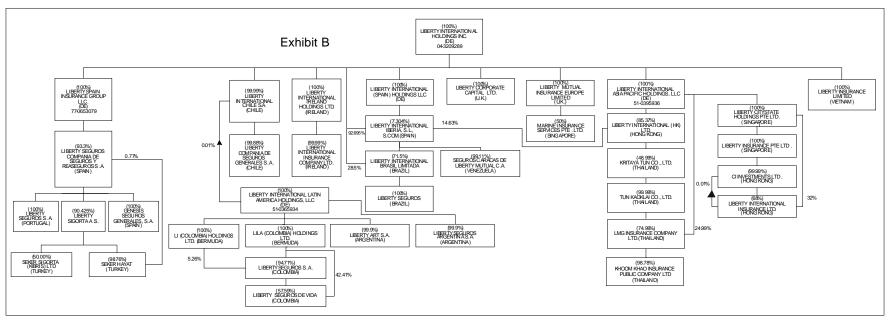
States, Etc. Cyes or No Direct Premiums Direct Premiums Earned Business Salvage Incurred Direct Premiums Premiums Salvage Incurred Direct Premiums Premiums Direct Premiums Salvage Incurred Direct Premiums Premiums Direct Premiums Direct Premiums Direct Direct	
1. Alabama AL NO 2. Alaska AK NO 3. Arizona AZ NO 4. Arkansas AR NO 5. California CA NO 6. Colorado CO NO 7. Connecticut CT NO 8. Delaware DE YES 2,295,929 2,729,854 5,519 2,810,621 2,014,452 4,546,052 10,165 9. Dist. Columbia DC YES 842,049 907,713 3,431 417,038 180,356 986,061 3,728 10. Florida FL NO 1	
2. Alaska	
4. Arkansas	
5. California CA NO 6. Colorado CO NO 7. Connecticut CT NO 8. Delaware DE YES 2,295,929 2,729,854 5,519 2,810,621 2,014,452 4,546,052 10,165 9. Dist. Columbia DC YES 842,049 907,713 3,431 417,038 180,356 986,061 3,728 10. Florida FL NO 11. Georgia GA NO 12. Hawaii HI NO 12. Hawaii HI NO 13. Idaho ID NO 14. Illinois IL NO 14. Illinois IL NO 15. Indiana IN NO 16. Iowa IA NO 1 17. Kansas KS NO 18. Kentucky KY NO 19. Louisiana LA NO 10. Unisiana LA NO 10. Unisiana LA NO 10. Unisiana 14,688 15,399,878 7,884,924 26,495,490 126,657 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657 126,657 126,657 126,657 12	
6. Colorado CO NO 7. Connecticut CT NO 8. Delaware DE YES 2,295,929 2,729,854 5,519 2,810,621 2,014,452 4,546,052 10,165 9. Dist. Columbia DC YES 842,049 907,713 3,431 417,038 180,356 986,061 3,728 10. Florida FL NO 11. Georgia GA NO 12. Hawaii HI NO 13. Idaho ID NO 14. Illinois IL NO 15. Indiana IN NO 16. Iowa IA NO 17. Kansas KS NO 18. Kentucky KY NO 19. Louisiana LA NO 20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
7. Connecticut CT NO 8. Delaware DE YES 2,295,929 2,729,854 5,519 2,810,621 2,014,452 4,546,052 10,165 9. Dist. Columbia DC YES 842,049 907,713 3,431 417,038 180,356 986,061 3,728 10. Florida FL NO 11. Georgia GA NO 12. Hawaii HI NO 13. Idaho ID NO 14. Illinois IL NO 15. Indiana IN NO 16. Iowa IA NO 17. Kansas KS NO 18. Kentucky KY NO 19. Louisiana LA NO 20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
9. Dist. Columbia DC YES 842,049 907,713 3,431 417,038 180,356 986,061 3,728 10. Florida FL NO 11. Georgia GA NO 12. Hawaii HI NO 13. Idaho ID NO 14. Illinois IL NO 15. Indiana IN NO 16. Iowa IA NO 17. Kansas KS NO 18. Kentucky KY NO 19. Louisiana LA NO 20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
10. Florida	
11. Georgia	
12. Hawaii	
13. Idaho	
14. Illinois IL NO 15. Indiana IN NO 16. Iowa IA NO 1 17. Kansas KS NO 18. Kentucky KY NO 19. Louisiana LA NO 20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
16. lowa IA NO 1 17. Kansas KS NO 18. Kentucky KY NO 19. Louisiana LA NO 20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
17. Kansas KS NO 18. Kentucky KY NO 19. Louisiana LA NO 20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
18. Kentucky KY NO 19. Louisiana LA NO 20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
19. Louisiana LA NO 20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
20. Maine ME NO 21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
21. Maryland MD YES 28,607,557 28,538,914 14,688 15,399,878 7,884,924 26,495,490 126,657	
22. Massachusetts MA YES	* * * * * * * * * * * * * * * * * * * *
23. Michigan MI NO	
24. Minnesota MN NO	
25. Mississippi MS NO	
27. Montana MT NO	* * * * * * * * * * * * * * * * * * * *
28. Nebraska NE NO	
29. Nevada NV NO	
30. New Hampshire NH NO	
31. New Jersey NJ NO	
32. New Mexico NM NO	
33. New York NY NO 34. No. Carolina NC YES 7,809,118 8,594,443 2,209 3,945,987 1,496,750 10,651,052 34,574	
35. No. Dakota ND NO 34,374	
36. Ohio OH NO 1,534	
37. Oklahoma OK NO	
38. Oregon OR NO	
39. Pennsylvania PA YES 466 1,689 5,119 143,059 304,375 2	
40. Rhode Island RI NO 41. So. Carolina SC YES 6,445,035 5,473,474 3,436,767 4,180,327 6,900,087 28,535	* * * * * * * * * * * * * * * * * * * *
41. 50. Carollilla SC 1ES 0,445,035 3,473,474 3,430,767 4,160,327 0,900,067 26,333 42. So. Dakota SD NO	* * * * * * * * * * * * * * * * * * * *
43. Tennessee TN NO	
44. Texas TX NO	* * * * * * * * * * * * * * * * * * * *
45. Utah UT NO	
46. Vermont VT NO	
47. Virginia VA YES 4,459,903 5,063,854 1,421 1,997,745 1,795,682 7,964,736 19,746	
48. Washington WA NO 49. West Virginia WV YES	
50. Wisconsin WI NO	
51. Wyoming WY NO	
52. American Samoa AS NO	
53. Guam GU NO	
54. Puerto Rico PR NO	
55. U.S. Virgin Islands VI NO 56. Northern Mariana Islands MP NO	
57. Canada CN NO	* * * * * * * * * * * * * * * * * * * *
58. Aggregate other	
alien OT XXX	
59. Totals (a) 9 50,460,057 51,311,476 27,268 28,013,155 17,695,550 57,847,853 223,407	
DETAILS OF WRITE-INS	
F901 Y Y Y	
5801. XXX XX	
5802. XXX	
5803. XXX	
5898. Summary of remaining	
write-ins for Line 58	
from overflow page XXX	
5899. Totals (Lines 5801	
through 5803 + 5898)	. '
(Line 58 above) X X X	

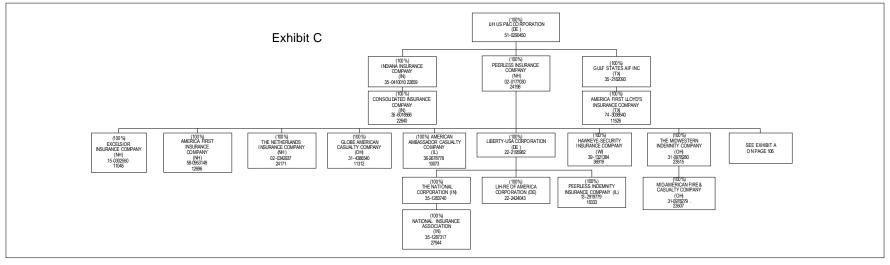
Explanation of basis of allocation of premiums by states, etc. *Location of coverage - Fire, Allied Lines, Homeowners Multi Peril, Commercial Multi Peril, Earthquake, Boiler and Machinery					
*States of Jurisdiction under which payrolls and resulting premiums are developed - Worker's Compensation	*Location of Court - Surety				
*Location of Principal place of garaging of each individual car - Auto Liability, Auto Physical Damage	*Address of Assured - Other Accident and Health				
*Principal Location of business or location of coverage - Liability other than Auto, Fidelity	*Location of Properties covered - Burglary and Theft				
*Point of origin of shipment or principal location of assured - Inland Marine	*Principal Location of Assured - Ocean Marine, Credit				
*State in which employees regularly work - Group Accident and Health	*Primary residence of Assured - Aircraft (all perils)				

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



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





Annual Statement for the year 2007 of the	Montgomery Mutual Insurance Company
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