



ANNUAL STATEMENT
 FOR THE YEAR ENDED DECEMBER 31, 2011
 OF THE CONDITION AND AFFAIRS OF THE
INTEGRAND Assurance Company

NAIC Group Code 0000, 0000 NAIC Company Code 26778 Employer's ID Number 66-0317672
(Current Period) (Prior Period)

Organized under the Laws of Puerto Rico, State of Domicile or Port of Entry Puerto Rico

Country of Domicile US

Incorporated/Organized December 21, 1972 Commenced Business July 1, 1973

Statutory Home Office Franklin D. Roosevelt Avenue, Ensenada Corner, San Juan, Puerto Rico 00920
(Street and Number, City or Town, State and Zip Code)

Main Administrative Office Franklin D. Roosevelt Avenue, Ensenada Corner, San Juan, Puerto Rico 00920 787-781-0707 -200
(Street and Number, City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address PO Box 70128, San Juan, Puerto Rico 00936-8128
(Street and Number or P. O. Box, City or Town, State and Zip Code)

Primary Location of Books and Records Franklin D. Roosevelt Avenue, Ensenada Corner, San Juan, Puerto Rico 00920
(Street and Number, City or Town, State and Zip Code)
787-781-0707 -200
(Area Code) (Telephone Number)

Internet Website Address www.integrand-pr.com

Statutory Statement Contact Maria Contreras 787-781-0707 -200
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OFFICERS

Victor Jose Salgado, Jr (President)
 Ana Maria Salgado (Secretary)
 Ana Maria Salgado (Treasurer)

OTHER OFFICERS

Carmen Esther Navas
 Javier Enrique Muniz
 Maria A. Contreras

DIRECTORS OR TRUSTEES

Francisco Javier Cobian, Esq
 Victor Jose Salgado, Jr
 Ana Maria Salgado

State of Puerto Rico }
 County of San Juan } SS

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

 Victor Jose Salgado, Jr
 President
 Subscribed and sworn to before me this _____
 day of _____ 2012

 Ana Maria Salgado
 Secretary

 Ana Maria Salgado
 Treasurer

- a. Is this an original filing? Yes (X) No ()
- b. If no: 1. State the amendment number 0
- 2. Date filed _____
- 3. Number of pages attached 0

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Column 1 minus Column 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	125,849,137	0	125,849,137	134,197,589
2. Stocks (Schedule D):				
2.1 Preferred stocks	1,140,582	0	1,140,582	1,451,405
2.2 Common stocks	1,800,954	0	1,800,954	6,416,283
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	0	0	0	0
3.2 Other than first liens	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ 0 encumbrances)	6,667,995	0	6,667,995	6,273,326
4.2 Properties held for the production of income (less \$ 0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ 0 encumbrances)	0	0	0	0
5. Cash (\$ 13,480,961, Schedule E - Part 1), cash equivalents (\$ 0, Schedule E - Part 2) and short-term investments (\$ 600,000, Schedule DA)	14,080,961	0	14,080,961	9,710,946
6. Contract loans (including \$ 0 premium notes)	0	0	0	0
7. Derivatives (Schedule DB)	0	0	0	0
8. Other invested assets (Schedule BA)	0	0	0	0
9. Receivables for securities	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Line 1 through Line 11)	149,539,629	0	149,539,629	158,049,549
13. Title plants less \$ 0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	921,209	0	921,209	906,248
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	7,785,651	274,641	7,511,010	7,339,859
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	659,892	0	659,892	802,064
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	0
18.2 Net deferred tax asset	253,749	0	253,749	358,601
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	29,634	0	29,634	55,573
21. Furniture and equipment, including health care delivery assets (\$ 0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	0
24. Health care (\$ 0) and other amounts receivable	0	0	0	0
25. Aggregate write-ins for other than invested assets	138,180	138,180	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Line 12 to Line 25)	159,327,944	412,821	158,915,123	167,511,894
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Line 26 and Line 27)	159,327,944	412,821	158,915,123	167,511,894
DETAILS OF WRITE-INS				
1101.	0	0	0	0
1102.	0	0	0	0
1103.	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Line 1101 through Line 1103 plus Line 1198) (Line 11 above)	0	0	0	0
2501. Automobiles	78,492	78,492	0	0
2502. Furniture, equipment and supplies	43,624	43,624	0	0
2503. Overflow Write-ins from Page 108	16,064	16,064	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above)	138,180	138,180	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	31,563,792	29,897,568
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	4,100,000	4,100,000
4. Commissions payable, contingent commissions and other similar charges	155,906	159,940
5. Other expenses (excluding taxes, licenses and fees)	1,471,023	1,605,408
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	130,123	121,489
7.1 Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))	(68,117)	(75,651)
7.2 Net deferred tax liability	0	0
8. Borrowed money \$ 0 and interest thereon \$ 0	0	0
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 8,165,000 and including warranty reserves of \$ 0 and accrued accident and health experience rating refunds including \$ 0 for medical loss ratio rebate per the Public Health Service Act)	31,812,065	33,822,229
10. Advance premium	0	0
11. Dividends declared and unpaid:		
11.1 Stockholders	0	0
11.2 Policyholders	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions)	1,322,699	2,160,297
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)	0	0
14. Amounts withheld or retained by company for account of others	870,766	815,239
15. Remittances and items not allocated	0	0
16. Provision for reinsurance (Schedule F, Part 7)	46,400	111,000
17. Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18. Drafts outstanding	1,155,386	1,241,171
19. Payable to parent, subsidiaries and affiliates	0	0
20. Derivatives	0	0
21. Payable for securities	4,065,543	5,000,000
22. Payable for securities lending	0	0
23. Liability for amounts held under uninsured plans	0	0
24. Capital notes \$ 0 and interest thereon \$ 0	0	0
25. Aggregate write-ins for liabilities	10,304,327	17,102,709
26. Total liabilities excluding protected cell liabilities (Line 1 through Line 25)	86,929,913	96,061,399
27. Protected cell liabilities	0	0
28. Total liabilities (Line 26 and Line 27)	86,929,913	96,061,399
29. Aggregate write-ins for special surplus funds	27,400,417	23,889,753
30. Common capital stock	3,000,000	3,000,000
31. Preferred capital stock	0	0
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes	0	0
34. Gross paid in and contributed surplus	5,950,000	5,950,000
35. Unassigned funds (surplus)	35,634,793	38,610,742
36. Less treasury stock, at cost:		
36.1 0 shares common (value included in Line 30 \$ 0)	0	0
36.2 0 shares preferred (value included in Line 31 \$ 0)	0	0
37. Surplus as regards policyholders (Line 29 to Line 35, less Line 36) (Page 4, Line 39)	71,985,210	71,450,495
38. Totals (Page 2, Line 28, Column 3)	158,915,123	167,511,894
DETAILS OF WRITE-INS		
2501. Premiums Collected in Advance	1,230,945	1,696,615
2502. Catastrophe Reserve Liability portion for the year	0	1,267,200
2503. Municipality Liability	9,073,382	14,138,894
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above)	10,304,327	17,102,709
2901. Reserve for catastrophe insurance losses pursuant to chapter 25 of insurance code of Puerto Rico	27,400,417	23,889,753
2902.	0	0
2903.	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0
2999. Totals (Line 2901 through Line 2903 plus Line 2998) (Line 29 above)	27,400,417	23,889,753
3201.	0	0
3202.	0	0
3203.	0	0
3298. Summary of remaining write-ins for Line 32 from overflow page	0	0
3299. Totals (Line 3201 through Line 3203 plus Line 3298) (Line 32 above)	0	0

STATEMENT OF INCOME

UNDERWRITING INCOME	1 Current Year	2 Prior Year
1. Premiums earned (Part 1, Line 35, Column 4)	47,304,175	46,136,988
DEDUCTIONS		
2. Losses incurred (Part 2, Line 35, Column 7)	23,262,624	20,711,055
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	8,411,454	7,870,193
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	17,909,093	16,364,089
5. Aggregate write-ins for underwriting deductions	0	0
6. Total underwriting deductions (Line 2 through Line 5)	49,583,171	44,945,337
7. Net income of protected cells	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(2,278,996)	1,191,651
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	6,293,951	5,797,546
10. Net realized capital gains (losses) less capital gains tax of \$ 0 (Exhibit of Capital Gains (Losses))	507,181	(4,285,163)
11. Net investment gain (loss) (Line 9 plus Line 10)	6,801,132	1,512,383
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ 0, amount charged off \$ 64,830)	(64,830)	(470,184)
13. Finance and service charges not included in premiums	0	0
14. Aggregate write-ins for miscellaneous income	62,848	14,741
15. Total other income (Line 12 through Line 14)	(1,982)	(455,443)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 8 plus Line 11 plus Line 15)	4,520,154	2,248,591
17. Dividends to policyholders	0	0
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	4,520,154	2,248,591
19. Federal and foreign income taxes incurred	7,534	16,349
20. Net income (Line 18 minus Line 19) (to Line 22)	4,512,620	2,232,242
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	71,450,495	65,803,837
22. Net income (from Line 20)	4,512,620	2,232,242
23. Net transfers (to) from Protected Cell accounts	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ 0	520,556	3,861,553
25. Change in net unrealized foreign exchange capital gain (loss)	0	0
26. Change in net deferred income tax	(104,852)	(560,617)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3)	(112,084)	236,680
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	64,600	7,200
29. Change in surplus notes	0	0
30. Surplus (contributed to) withdrawn from protected cells	0	0
31. Cumulative effect of changes in accounting principles	0	0
32. Capital changes:		
32.1 Paid in	0	0
32.2 Transferred from surplus (Stock Dividend)	0	0
32.3 Transferred to surplus	0	0
33. Surplus adjustments:		
33.1 Paid in	0	0
33.2 Transferred to capital (Stock Dividend)	0	0
33.3 Transferred from capital	0	0
34. Net remittances from or (to) Home Office	0	0
35. Dividends to stockholders	(5,000,000)	0
36. Change in treasury stock (Page 3, Line 36.1 and Line 36.2, Column 2 minus Column 1)	0	0
37. Aggregate write-ins for gains and losses in surplus	653,875	(130,400)
38. Change in surplus as regards policyholders for the year (Line 22 through Line 37)	534,715	5,646,658
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	71,985,210	71,450,495
DETAILS OF WRITE-INS		
0501.	0	0
0502.	0	0
0503.	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0
0599. Totals (Line 0501 through Line 0503 plus Line 0598) (Line 5 above)	0	0
1401. Miscellaneous profit and loss items	62,848	14,741
1402.	0	0
1403.	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0
1499. Totals (Line 1401 through Line 1403 plus Line 1498) (Line 14 above)	62,848	14,741
3701. Prior years adjustment	653,875	0
3702. Income Taxes adjustment	0	0
3703. Catastrophe Reserve Portion for the year	0	(130,400)
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0
3799. Totals (Line 3701 through Line 3703 plus Line 3798) (Line 37 above)	653,875	(130,400)

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	44,080,115	48,153,765
2. Net investment income	6,283,982	5,422,063
3. Miscellaneous income	(1,982)	(455,443)
4. Total (Line 1 through Line 3)	50,362,115	53,120,385
5. Benefit and loss related payments	21,454,228	22,824,118
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	26,324,581	23,455,315
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)	2	(156,754)
10. Total (Line 5 through Line 9)	47,778,811	46,122,679
11. Net cash from operations (Line 4 minus Line 10)	2,583,304	6,997,706
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	58,193,032	49,499,093
12.2 Stocks	4,691,685	9,565,641
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	600,000	2,143,912
12.8 Total investment proceeds (Line 12.1 through Line 12.7)	63,484,717	61,208,646
13. Cost of investments acquired (long-term only):		
13.1 Bonds	0	77,427,593
13.2 Stocks	48,602,546	5,837,989
13.3 Mortgage loans	120,114	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Line 13.1 through Line 13.6)	48,722,660	83,265,582
14. Net increase (decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	14,762,057	(22,056,936)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	(5,065,512)	14,138,894
16.5 Dividends to stockholders	5,000,000	0
16.6 Other cash provided (applied)	(2,909,834)	430,391
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(12,975,346)	14,569,285
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	4,370,015	(489,945)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of period	9,710,946	10,200,891
19.2 End of year (Line 18 plus Line 19.1)	14,080,961	9,710,946
Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001	0	0
20.0002	0	0
20.0003	0	0
20.0004	0	0
20.0005	0	0
20.0006	0	0
20.0007	0	0
20.0008	0	0
20.0009	0	0
20.0010	0	0

UNDERWRITING AND INVESTMENT EXHIBIT**PART 1 - PREMIUMS EARNED**

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums December 31 Prior Year- per Column 3, Last Year's Part 1	3 Unearned Premiums December 31 Current Year- per Column 5 Part 1A	4 Premiums Earned During Year (Columns 1 plus 2 minus 3)
1. Fire	820,385	818,620	813,234	825,771
2. Allied lines	1,190,054	1,144,469	1,174,609	1,159,914
3. Farmowners multiple peril	0	0	0	0
4. Homeowners multiple peril	11,411	47,059	32,089	26,381
5. Commercial multiple peril	20,764,823	16,426,217	16,314,839	20,876,201
6. Mortgage guaranty	0	0	0	0
8. Ocean marine	(518,422)	51,471	36,691	(503,642)
9. Inland marine	254,446	257,409	278,310	233,545
10. Financial guaranty	0	0	0	0
11.1 Medical professional liability - occurrence	0	0	0	0
11.2 Medical professional liability - claims-made	0	0	0	0
12. Earthquake	1,185,319	1,172,094	1,191,573	1,165,840
13. Group accident and health	2,125,792	0	0	2,125,792
14. Credit accident and health (group and individual)	0	0	0	0
15. Other accident and health	0	0	0	0
16. Workers' compensation	0	0	0	0
17.1 Other liability - occurrence	3,426,000	3,626,758	2,078,906	4,973,852
17.2 Other liability - claims-made	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0
18.1 Products liability - occurrence	154,048	83,936	94,137	143,847
18.2 Products liability - claims-made	0	0	0	0
19.1, 19.2 Private passenger auto liability	276,138	201,799	178,975	298,962
19.3, 19.4 Commercial auto liability	7,831,001	4,612,274	4,626,270	7,817,005
21. Auto physical damage	7,604,878	5,316,926	4,908,423	8,013,381
22. Aircraft (all perils)	0	0	0	0
23. Fidelity	16,143	2,350	7,578	10,915
24. Surety	99,683	52,603	52,383	99,903
26. Burglary and theft	50,352	7,890	22,990	35,252
27. Boiler and machinery	1,959	354	1,057	1,256
28. Credit	0	0	0	0
29. International	0	0	0	0
30. Warranty	0	0	0	0
31. Reinsurance - Nonproportional Assumed Property	0	0	0	0
32. Reinsurance - Nonproportional Assumed Liability	0	0	0	0
33. Reinsurance - Nonproportional Assumed Financial Lines	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0
35. TOTALS	45,294,010	33,822,229	31,812,064	47,304,175
DETAILS OF WRITE-INS				
3401.	0	0	0	0
3402.	0	0	0	0
3403.	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)	0	0	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A-RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Columns 1 + 2 + 3 + 4
1. Fire	723,323	89,911	0	0	813,234
2. Allied lines	1,117,256	57,353	0	0	1,174,609
3. Farmowners multiple peril	0	0	0	0	0
4. Homeowners multiple peril	32,089	0	0	0	32,089
5. Commercial multiple peril	16,274,416	40,423	0	0	16,314,839
6. Mortgage guaranty	0	0	0	0	0
8. Ocean marine	36,691	0	0	0	36,691
9. Inland marine	267,879	10,431	0	0	278,310
10. Financial guaranty	0	0	0	0	0
11.1 Medical professional liability - occurrence	0	0	0	0	0
11.2 Medical professional liability - claims-made	0	0	0	0	0
12. Earthquake	1,090,583	100,990	0	0	1,191,573
13. Group accident and health	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0
15. Other accident and health	0	0	0	0	0
16. Workers' compensation	0	0	0	0	0
17.1 Other liability - occurrence	2,078,246	660	0	0	2,078,906
17.2 Other liability - claims-made	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0
18.1 Products liability - occurrence	94,137	0	0	0	94,137
18.2 Products liability - claims-made	0	0	0	0	0
19.1, 19.2 Private passenger auto liability	178,975	0	0	0	178,975
19.3, 19.4 Commercial auto liability	4,626,557	(287)	0	0	4,626,270
21. Auto physical damage	4,357,683	550,740	0	0	4,908,423
22. Aircraft (all perils)	0	0	0	0	0
23. Fidelity	7,578	0	0	0	7,578
24. Surety	47,763	4,620	0	0	52,383
26. Burglary and theft	22,990	0	0	0	22,990
27. Boiler and machinery	1,057	0	0	0	1,057
28. Credit	0	0	0	0	0
29. International	0	0	0	0	0
30. Warranty	0	0	0	0	0
31. Reinsurance - Nonproportional Assumed Property	0	0	0	0	0
32. Reinsurance - Nonproportional Assumed Liability	0	0	0	0	0
33. Reinsurance - Nonproportional Assumed Financial Lines	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0
35. TOTALS	30,957,223	854,841	0	0	31,812,064
36. Accrued retrospective premiums based on experience					0
37. Earned but unbilled premiums					0
38. Balance (Sum of Line 35 through Line 37)					31,812,064
DETAILS OF WRITE-INS					
3401.	0	0	0	0	0
3402.	0	0	0	0	0
3403.	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)	0	0	0	0	0

(a) State here basis of computation used in each case.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B-PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Columns 1 + 2 + 3 - 4 - 5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	2,415,703	0	0	0	1,595,318	820,385
2. Allied lines	3,479,127	0	0	0	2,289,073	1,190,054
3. Farmowners multiple peril	0	0	0	0	0	0
4. Homeowners multiple peril	74,271	0	0	0	62,860	11,411
5. Commercial multiple peril	38,772,722	0	0	0	18,007,899	20,764,823
6. Mortgage guaranty	0	0	0	0	0	0
8. Ocean marine	528,880	0	0	0	1,047,302	(518,422)
9. Inland marine	600,223	0	0	0	345,777	254,446
10. Financial guaranty	0	0	0	0	0	0
11.1 Medical professional liability - occurrence	0	0	0	0	0	0
11.2 Medical professional liability - claims-made	0	0	0	0	0	0
12. Earthquake	4,203,814	0	0	0	3,018,495	1,185,319
13. Group accident and health	2,125,792	0	0	0	0	2,125,792
14. Credit accident and health (group and individual)	0	0	0	0	0	0
15. Other accident and health	0	0	0	0	0	0
16. Workers' compensation	0	0	0	0	0	0
17.1 Other liability - occurrence	4,012,353	0	0	0	586,353	3,426,000
17.2 Other liability - claims-made	0	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0
18.1 Products liability - occurrence	181,216	0	0	0	27,168	154,048
18.2 Products liability - claims-made	0	0	0	0	0	0
19.1, 19.2 Private passenger auto liability	327,303	0	0	0	51,165	276,138
19.3, 19.4 Commercial auto liability	8,904,178	0	0	0	1,073,177	7,831,001
21. Auto physical damage	8,403,946	0	0	0	799,068	7,604,878
22. Aircraft (all perils)	0	0	0	0	0	0
23. Fidelity	18,000	0	0	0	1,857	16,143
24. Surety	347,953	0	0	0	248,270	99,683
26. Burglary and theft	57,443	0	0	0	7,091	50,352
27. Boiler and machinery	160,955	0	0	0	158,996	1,959
28. Credit	0	0	0	0	0	0
29. International	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0
31. Reinsurance - Nonproportional Assumed Property	X X X	0	0	0	0	0
32. Reinsurance - Nonproportional Assumed Liability	X X X	0	0	0	0	0
33. Reinsurance - Nonproportional Assumed Financial Lines	X X X	0	0	0	0	0
34. Aggregate write-ins for other lines of business	3,677,917	0	0	0	3,677,917	0
35. TOTALS	78,291,796	0	0	0	32,997,786	45,294,010
DETAILS OF WRITE-INS						
3401. National Flood Insurance Program	3,677,917	0	0	0	3,677,917	0
3402.	0	0	0	0	0	0
3403.	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)	3,677,917	0	0	0	3,677,917	0

(a) Does the company'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 such installment premiums would have been reported had they been recorded on an annualized basis \$ 0

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE INTEGRAND Assurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Columns 1 plus 2 minus 3)	Net Losses Unpaid Current Year (Part 2A, Column 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Columns 4 plus 5 minus 6)	Percentage of Losses Incurred (Column 7, Part 2) to Premiums Earned (Column 4, Part 1)
1. Fire	461,214	0	380,278	80,936	7,586	76,378	12,144	1.5
2. Allied lines	280,738	0	38,020	242,718	466,461	17,700	691,479	59.6
3. Farmowners multiple peril	0	0	0	0	0	0	0	0.0
4. Homeowners multiple peril	8,889	0	0	8,889	10,500	10,000	9,389	35.6
5. Commercial multiple peril	9,052,441	0	1,623,268	7,429,173	15,930,924	14,654,073	8,706,024	41.7
6. Mortgage guaranty	0	0	0	0	0	0	0	0.0
8. Ocean marine	509,018	0	433,315	75,703	287	0	75,990	(15.1)
9. Inland marine	407,996	0	58,939	349,057	50,378	66,605	332,830	142.5
10. Financial guaranty	0	0	0	0	0	0	0	0.0
11.1 Medical professional liability - occurrence	0	0	0	0	0	0	0	0.0
11.2 Medical professional liability - claims-made	0	0	0	0	0	0	0	0.0
12. Earthquake	2,476	0	288	2,188	5,000	0	7,188	0.6
13. Group accident and health	1,484,885	0	0	1,484,885	405,077	506,484	1,383,478	65.1
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0.0
15. Other accident and health	0	0	0	0	0	0	0	0.0
16. Workers' compensation	0	0	0	0	11,500	12,000	(500)	0.0
17.1 Other liability - occurrence	1,087,445	0	104	1,087,341	3,243,461	3,426,231	904,571	18.2
17.2 Other liability - claims-made	0	0	0	0	0	0	0	0.0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0.0
18.1 Products liability - occurrence	0	0	0	0	31,925	30,925	1,000	0.7
18.2 Products liability - claims-made	0	0	0	0	0	0	0	0.0
19.1, 19.2 Private passenger auto liability	318,038	0	0	318,038	519,010	508,939	328,109	109.7
19.3, 19.4 Commercial auto liability	5,229,840	0	220,506	5,009,334	9,359,389	9,242,746	5,125,977	65.6
21. Auto physical damage	5,502,713	0	15,829	5,486,884	1,437,581	1,267,276	5,657,189	70.6
22. Aircraft (all perils)	0	0	0	0	0	0	0	0.0
23. Fidelity	0	0	0	0	0	0	0	0.0
24. Surety	65,911	0	45,657	20,254	64,713	77,711	7,256	7.3
26. Burglary and theft	1,000	0	0	1,000	0	500	500	1.4
27. Boiler and machinery	0	0	0	0	20,000	0	20,000	1,592.4
28. Credit	0	0	0	0	0	0	0	0.0
29. International	0	0	0	0	0	0	0	0.0
30. Warranty	0	0	0	0	0	0	0	0.0
31. Reinsurance- Nonproportional Assumed Property	X X X	0	0	0	0	0	0	0.0
32. Reinsurance- Nonproportional Assumed Liability	X X X	0	0	0	0	0	0	0.0
33. Reinsurance- Nonproportional Assumed Financial Lines	X X X	0	0	0	0	0	0	0.0
34. Aggregate write-ins for other lines of business	511,659	0	511,659	0	0	0	0	0.0
35. TOTALS	24,924,263	0	3,327,863	21,596,400	31,563,792	29,897,568	23,262,624	49.2
DETAILS OF WRITE-INS								
3401. NATIONAL FLOOD INSURANCE PROGRAM	511,659	0	511,659	0	0	0	0	0.0
3402	0	0	0	0	0	0	0	0.0
3403	0	0	0	0	0	0	0	0.0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0.0
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)	511,659	0	511,659	0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE INTEGRAND Assurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Columns 4 plus 5 plus 6 minus 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable from Authorized and Unauthorized Companies	4 Net Losses Excluding Incurred But Not Reported (Columns 1 plus 2 minus 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	2,251	0	406	1,845	6,797	0	1,056	7,586	0
2. Allied lines	552,351	0	96,729	455,622	13,792	0	2,953	466,461	0
3. Farmowners multiple peril	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril	10,500	0	0	10,500	0	0	0	10,500	11,500
5. Commercial multiple peril	10,926,517	0	2,221,502	8,705,015	10,489,911	0	3,264,002	15,930,924	1,117,000
6. Mortgage guaranty	0	0	0	0	0	0	0	0	0
8. Ocean marine	1,000	0	713	287	0	0	0	287	4,000
9. Inland marine	47,780	0	8,241	39,539	13,792	0	2,953	50,378	7,500
10. Financial guaranty	0	0	0	0	0	0	0	0	0
11.1 Medical professional liability - occurrence	0	0	0	0	0	0	0	0	0
11.2 Medical professional liability - claims-made	0	0	0	0	0	0	0	0	0
12. Earthquake	5,000	0	0	5,000	0	0	0	5,000	0
13. Group accident and health	405,077	0	0	405,077	0	0	0	(a) 405,077	22,500
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	(a) 0	0
15. Other accident and health	0	0	0	0	0	0	0	(a) 0	0
16. Workers' compensation	11,500	0	0	11,500	0	0	0	11,500	3,000
17.1 Other liability - occurrence	1,838,563	0	61,420	1,777,143	1,639,870	0	173,552	3,243,461	1,740,000
17.2 Other liability - claims-made	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation	0	0	0	0	0	0	0	0	0
18.1 Products liability - occurrence	0	0	0	0	41,520	0	9,595	31,925	2,000
18.2 Products liability - claims-made	0	0	0	0	0	0	0	0	0
19.1, 19.2 Private passenger auto liability	294,067	0	0	294,067	265,000	0	40,057	519,010	43,000
19.3, 19.4 Commercial auto liability	4,604,111	0	228,625	4,375,486	6,039,233	0	1,055,330	9,359,389	724,500
21. Auto physical damage	1,096,344	0	154	1,096,190	433,140	0	91,749	1,437,581	422,500
22. Aircraft (all perils)	0	0	0	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0	0	0	0
24. Surety	115,817	0	90,296	25,521	574,663	0	535,471	64,713	2,500
26. Burglary and theft	0	0	0	0	0	0	0	0	0
27. Boiler and machinery	20,000	0	0	20,000	0	0	0	20,000	0
28. Credit	0	0	0	0	0	0	0	0	0
29. International	0	0	0	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0	0	0	0
31. Reinsurance- Nonproportional Assumed Property	X X X	0	0	0	X X X	0	0	0	0
32. Reinsurance- Nonproportional Assumed Liability	X X X	0	0	0	X X X	0	0	0	0
33. Reinsurance- Nonproportional Assumed Financial Lines	X X X	0	0	0	X X X	0	0	0	0
34. Aggregate write-ins for other lines of business	15,000	0	15,000	0	347,882	0	347,882	0	0
35. TOTALS	19,945,878	0	2,723,086	17,222,792	19,865,600	0	5,524,600	31,563,792	4,100,000
DETAILS OF WRITE-INS									
3401. National Flood Insurance Program	15,000	0	15,000	0	347,882	0	347,882	0	0
3402.	0	0	0	0	0	0	0	0	0
3403.	0	0	0	0	0	0	0	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0
3499. Totals (Line 3401 through Line 3403 plus Line 3498) (Line 34 above)	15,000	0	15,000	0	347,882	0	347,882	0	0

(a) Including \$ 0 for present value of life indemnity claims.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	3,709,757	0	0	3,709,757
1.2 Reinsurance assumed	0	0	0	0
1.3 Reinsurance ceded	624,830	0	0	624,830
1.4 Net claim adjustment services (Line 1.1 plus Line 1.2 minus Line 1.3)	3,084,927	0	0	3,084,927
2. Commission and brokerage:				
2.1 Direct excluding contingent	0	14,259,137	0	14,259,137
2.2 Reinsurance assumed excluding contingent	0	0	0	0
2.3 Reinsurance ceded excluding contingent	0	4,529,911	0	4,529,911
2.4 Contingent - direct	0	50,000	0	50,000
2.5 Contingent - reinsurance assumed	0	0	0	0
2.6 Contingent - reinsurance ceded	0	730,013	0	730,013
2.7 Policy and membership fees	0	0	0	0
2.8 Net commission and brokerage (Line 2.1 plus Line 2.2 minus Line 2.3 plus Line 2.4 plus Line 2.5 minus Line 2.6 plus Line 2.7)	0	9,049,213	0	9,049,213
3. Allowances to manager and agents	0	0	0	0
4. Advertising	28,164	235,520	0	263,684
5. Boards, bureaus and associations	40,385	363,460	0	403,845
6. Surveys and underwriting reports	3,689	33,201	0	36,890
7. Audit of assureds' records	0	0	0	0
8. Salary and related items:				
8.1 Salaries	3,077,696	3,734,121	47,461	6,859,278
8.2 Payroll taxes	290,423	306,592	0	597,015
9. Employee relations and welfare	416,858	576,907	0	993,765
10. Insurance	35,012	315,105	0	350,117
11. Directors' fees	100	900	0	1,000
12. Travel and travel items	274,317	291,508	0	565,825
13. Rent and rent items	212,671	721,062	0	933,733
14. Equipment	52,043	96,651	0	148,694
15. Cost or depreciation of EDP equipment and software	155,106	1,541,105	0	1,696,211
16. Printing and stationery	31,512	107,956	0	139,468
17. Postage, telephone and telegraph, exchange and express	78,155	153,877	0	232,032
18. Legal and auditing	79,850	338,170	0	418,020
19. Totals (Line 3 through Line 18)	4,775,981	8,816,135	47,461	13,639,577
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$	0	92,000	0	92,000
20.2 Insurance department licenses and fees	29,818	155,552	0	185,370
20.3 Gross guaranty association assessments	0	0	0	0
20.4 All other (excluding federal and foreign income and real estate)	7,138	13,255	0	20,393
20.5 Total taxes, licenses and fees (Line 20.1 plus Line 20.2 plus Line 20.3 plus Line 20.4)	36,956	260,807	0	297,763
21. Real estate expenses	158,541	0	0	158,541
22. Real estate taxes	0	0	0	0
23. Reimbursements by uninsured plans	0	0	0	0
24. Aggregate write-ins for miscellaneous expenses	355,049	(217,062)	0	137,987
25. Total expenses incurred	8,411,454	17,909,093	47,461	(a) 26,368,008
26. Less unpaid expenses - current year	4,100,000	1,757,052	0	5,857,052
27. Add unpaid expenses - prior year	4,100,000	1,886,837	0	5,986,837
28. Amounts receivable relating to uninsured plans, prior year	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year	0	0	0	0
30. TOTAL EXPENSES PAID (Line 25 minus Line 26 plus Line 27 minus Line 28 plus Line 29)	8,411,454	18,038,878	47,461	26,497,793
DETAILS OF WRITE-INS				
2401. Outside Services	285,190	257,673	0	542,863
2402. Miscellaneous Expenses	69,859	(474,735)	0	(404,876)
2403.	0	0	0	0
2498. Summary of remaining write-ins for Line 24 from overflow page	0	0	0	0
2499. Totals (Line 2401 through Line 2403 plus Line 2498) (Line 24 above)	355,049	(217,062)	0	137,987

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

EXHIBIT OF NET INVESTMENT INCOME

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds	(a) 1,786,783	1,648,846
1.1 Bonds exempt from U.S. tax	(a) 4,810,993	4,676,198
1.2 Other bonds (unaffiliated)	(a) 0	0
1.3 Bonds of affiliates	(a) 0	0
2.1 Preferred stocks (unaffiliated)	(b) 0	0
2.11 Preferred stocks of affiliates	(b) 0	0
2.2 Common stocks (unaffiliated)	(b) 108,739	108,739
2.21 Common stocks of affiliates	(b) 0	0
3. Mortgage loans	(c) 0	0
4. Real estate	(d) 0	0
5. Contract loans	(d) 0	0
6. Cash, cash equivalents and short-term investments	(e) 66,158	67,478
7. Derivative instruments	(f) 0	0
8. Other invested assets	(f) 0	0
9. Aggregate write-ins for investment income	(f) 0	0
10. Total gross investment income	6,772,673	6,501,261
11. Investment expenses		(g) 48,770
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13. Interest expense		(h) 0
14. Depreciation on real estate and other invested assets		(i) 158,541
15. Aggregate write-ins for deductions from investment income		0
16. Total deductions (Line 11 through Line 15)		207,311
17. Net investment income (Line 10 minus Line 16)		6,293,950
DETAILS OF WRITE-INS		
0901.	0	0
0902.	0	0
0903.	0	0
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Line 0901 through Line 0903 plus Line 0998) (Line 9 above)	0	0
1501.		0
1502.		0
1503.		0
1598. Summary of remaining write-ins for Line 15 from overflow page		0
1599. Totals (Line 1501 through Line 1503 plus Line 1598) (Line 15 above)		0
(a) Includes \$ 26,649 accrual of discount less \$ 167,013 amortization of premium and less \$ 142,166 paid for accrued interest on purchases.	(f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.	
(b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.	(g) Includes \$ 48,770 investment expenses and \$ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.	
(c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.	(h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.	
(d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.	(i) Includes \$ 158,541 depreciation on real estate and \$ 0 depreciation on other invested assets.	
(e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued 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) (Cols. 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	1,315,329	0	1,315,329	0	0
1.1 Bonds exempt from U.S. tax	66,960	0	66,960	0	0
1.2 Other bonds (unaffiliated)	0	0	0	0	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	(929,761)	(929,761)	618,938	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	54,654	0	54,654	2,647	0
2.21 Common stocks of affiliates	0	0	0	(101,029)	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	0	0	0	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	1,436,943	(929,761)	507,182	520,556	0
DETAILS OF WRITE-INS					
0901.	0	0	0	0	0
0902.	0	0	0	0	0
0903.	0	0	0	0	0
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Line 0901 through Line 0903 plus Line 0998) (Line 9 above)	0	0	0	0	0

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)	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks	0	0	0
2.2 Common stocks	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens	0	0	0
3.2 Other than first liens	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company	0	0	0
4.2 Properties held for the production of income	0	0	0
4.3 Properties held for sale	0	0	0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)	0	0	0
6. Contract loans	0	0	0
7. Derivatives (Schedule DB)	0	0	0
8. Other invested assets (Schedule BA)	0	0	0
9. Receivable for securities	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Line 1 to Line 11)	0	0	0
13. Title plants (for Title insurers only)	0	0	0
14. Investment income due and accrued	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	274,641	224,400	(50,241)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due	0	0	0
15.3 Accrued retrospective premiums	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0
Amounts receivable relating to uninsured plans	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0
18.2 Net deferred tax asset	0	0	0
19. Guaranty funds receivable or on deposit	0	0	0
20. Electronic data processing equipment and software	0	0	0
21. Furniture and equipment, including health care delivery assets	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23. Receivable from parent, subsidiaries and affiliates	0	0	0
24. Health care and other amounts receivable	0	0	0
25. Aggregate write-ins for other than invested assets	138,180	76,337	(61,843)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Line 12 to Line 25)	412,821	300,737	(112,084)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28. Total (Line 26 and Line 27)	412,821	300,737	(112,084)
DETAILS OF WRITE-INS			
1101. Automobiles	0	0	0
1102. Furniture and Equipment	0	0	0
1103.	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Line 1101 through Line 1103 plus Line 1198) (Line 11 above)	0	0	0
2501. Automobiles	78,492	9,108	(69,384)
2502. Furniture and Equipment	43,624	45,764	2,140
2503. Loans on Personal Security & Other Items	16,064	21,465	5,401
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above)	138,180	76,337	(61,843)

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES.

a. The accompanying financial statements have been prepared in conformity with accounting practices prescribed by Puerto Rico and the National Association of Insurance Commissioners.

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

c. Accounting Policy.

Premiums are earned over the terms of the related insurance 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 for direct premiums.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

(1) Short-term investments are stated at amortized cost.

(2) Bonds are stated at amortized cost using the interest method.

(3) Common and Preferred Stocks are stated at market value.

(4) Company owns all outstanding stocks of Key Insurance Agency Inc., and Intercontinental Insurance Agencies Inc., which are reported at book value.

(5) Loan Backed Securities are stated at amortized cost.

(6) 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 any adjustments are reflected in the period determined.

2. ACCOUNTING CHANGES AND CORRECTIONS OR ERRORS.

a. No disclosure required.

b. No disclosures required.

3. BUSINESS COMBINATION AND GOODWILL

a. No disclosures required.

b. No disclosures required.

c. No disclosures required.

4. DISCONTINUED OPERATIONS

No disclosures required.

5. INVESTMENTS

a. The Company does not have mortgage loans.

b. There is no debt restructuring.

c. The Company does not have reverse mortgages.

d. The Company does not have loan backed securities.

e. The Company does not have repurchase agreements.

f. The Company does not invest in Real Estate.

g. The Company does not have low-income housing tax credits (LIHTC).

6. JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

a. The Company has no Joint Ventures, Partnerships or Limited Liability Companies.

b. No disclosures required.

7. INVESTMENT INCOME

NOTES TO FINANCIAL STATEMENTS

- a. The investment income entries are recorded according with NAIC specifications.

8. DERIVATIVE INSTRUMENTS

The company does not have any derivative investments.

9. INCOME TAXES

- a. The components of the net deferred tax asset/(liability) at December 31 are as follows:

1. Total of all deferred taxes (admitted and nonadmitted) \$253,749 and the total deferred tax nonadmitted in accordance with SSAP No. 10, Income Taxes is \$ 0.00.

- b. The amount of income taxes incurred and available in the event of future net loss is: current year \$0; first preceding year \$0; second preceding year \$0.

- c. No disclosure required.

- d. No disclosure required.

- e. The amount of net losses carried forward and available to offset future net income subject to income taxes

current year	0
first preceding year	4,285,162
second preceding year	3,535,074
third preceding year	6,401,783
fourth preceding year	985,997

- f. No disclosure required.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES

- a. Victor J. Salgado & Associates, Inc. domiciled in San Juan, owns 100% of the outstanding shares of Integrand Assurance Company and IIA Finance Corporation. Integrand Assurance Company owns 100% of the shares of Key Insurance Agency Inc., and Intercontinental Insurance Agencies Inc. The Company paid a dividend to the Parent Company on January 21, 2011, totaling \$5,000,000.

- b. No disclosures required.

- c. No disclosures required.

- d. No disclosures required.

- e. No disclosures required.

- f. No disclosures required.

- g. No disclosures required.

- h. No disclosures required.

- i. No disclosures required.

- j. No disclosures required.

- k. No disclosures required.

- l. No disclosures required.

11. DEBT

- a. The Company has no outstanding debt as of 12/31/2011

12. RETIREMENT PLAN, DEFERRED COMPENSATION AND OTHER POST RETIREMENT BENEFIT PLANS

a. DEFINED BENEFIT PLAN

Effective 12-31-2001 the defined benefit pension plan was terminated and canceled by the Company.

NOTES TO FINANCIAL STATEMENTS

Plan assets value at distribution date (10/01/02) was \$8,967,740.44

Total benefits distributed to vested beneficiaries were \$7,760,885

b. DEFINED CONTRIBUTION PLANS

Integrand's employees are covered by a qualified defined contribution retirement plan sponsored by the Company, where it matches employee contributions up to 5% of the employees' salary. Integrand's contribution to the plan was \$162,653 and \$152,947 for 2011 and 2010, respectively. At December 31, 2011 the fair value of plan assets was \$4,196,159.

Net post-retirement benefits added during the year ended December 31, 2011 was \$164,570, which includes the service and interest cost.

In addition to the Company's defined benefit pension plan, the Company provides post-retirement medical and life insurance benefits to retired and currently eligible employees who meet minimum service requirements.

The company elected to terminate both plans as of June 30, 1996 for all employees that did not qualify for retirement under our pension plan guidelines.

The transition obligation was eliminated and we fully recognized the total liability for all retired and currently eligible employees as of 12-31-96.

c. No disclosures required.

d. No disclosures required.

e. No disclosures required.

f. No disclosures required.

13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS CONTINGENCIES.

a. The company has 1,333,333 number of shares authorized and 400,000 number of shares outstanding.

b. The company has no preferred stock outstanding.

c. The maximum amount of dividends which can be paid by Puerto Rico insurance companies to shareholders without prior approval of the Commissioner of Insurance is subject to restrictions relating to statutory surplus. The maximum dividend pay out which can be made without prior approval is approximately \$ 20,536,790.

d. Within the limitations of (c) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

e. The unassigned surplus fund represent the undistributed interest of the shareholder. Total unassigned surplus at December 31, 2011 was \$35,634,793.

14. CONTINGENCIES

a. No disclosures required

b. No disclosures required.

c. No disclosures required.

d. No disclosures required.

e. No disclosure required.

15. LEASES

a. The Company does not have any material lease obligations at this time.

b. No disclosures required.

16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE-SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK.

The company does not have financial instruments with off-balance-sheet risk, nor with concentrations of credit risk.

17. SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES.

a. No disclosures required.

b. No disclosures required.

c. No disclosures required.

NOTES TO FINANCIAL STATEMENTS

18. GAIN OR LOSS TO THE INSURER FROM THE UNINSURED A&H PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS.

The Company does not have any Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans.

19. DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS OR THIRD PARTY ADMINISTRATORS.

The Company does not have any Managing General Agents or Third Party Administrators.

20. OTHER ITEMS

a. No disclosures required.

b. No disclosures required.

c. PUERTO RICO CATASTROPHE FUND

This fund was established by Law 73 on August 12, 1994. This Law required a deposit of 10% of certain property lines premium into a trust. First year assessment was based on 1993 premiums and subsequently every year thereon. The amount of the fund as of December 31, 2011 was \$ 27,400,417 which is represented on line 2901 as a special surplus fund.

e. PRIVATE PASSENGER DOUBLE INTEREST PREMIUMS

Effective on May 11, 1998, The Office of The Commissioner of Insurance issued circular N-E-5-96--98 changing the accounting for Double Interest policies which should be recorded as annual policies with its premiums collected in advance for the term of the financing contract. This means that the company will only report as "Written Premiums" the first year premium and the remaining will be shown in line 23 of page 3 as "Premiums Collected in Advance".

21. EVENTS SUBSEQUENT

No disclosures required.

22. REINSURANCE

a. Total Ceded Unearned reserve is \$ 8,165,136 and the commission equity is \$ 2,449,541.

The Direct Unearned Premium reserve is \$ 39,977,200.

b. No disclosures required.

c. No disclosures required.

d. No disclosures required.

e. No disclosures required,

f. No disclosures required.

23. RETROSPECTIVELY RATED CONTRACTS

a. The Company does not have retrospectively rated contracts.

b. No disclosures required.

c. No disclosures required.

d. No disclosures required.

24. CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES

The change in incurred losses and loss adjustment expenses are recorded according with NAIC specifications.

25. INTERCOMPANY POOLING ARRANGEMENTS

No disclosures required.

26. STRUCTURE SETTLEMENTS

a. No disclosures required.

b. No disclosures required.

c. No disclosures required.

NOTES TO FINANCIAL STATEMENTS

27. HIGH DEDUCTIBLES

No high deductibles business policies written.

28. DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES AND UNPAID LOSS ADJUSTMENT EXPENSES

No disclosures required.

29. ASBESTOS AND ENVIRONMENTAL RESERVES

The company does not have asbestos and environmental exposures.

30. SUBSCRIBER SAVINGS ACCOUNT

The company does not have subscriber savings account.

31. FINANCIAL GUARANTY INSURANCE EXPOSURES

The company does not have "Financial Guaranty Insurance Exposures."

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
 GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes () No (X)
- 1.2 If 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 Model 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 () N/A (X)
- 1.3 State Regulating?
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes () No (X)
- 2.2 If yes, date of change:
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2009
- 3.2 State the as of date of the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2009
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 06/27/2011
- 3.4 By what department or departments?
 PUERTO RICO OFFICE OF THE COMMISSIONER OF INSURANCE
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes () No () N/A (X)
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes () No (X) N/A ()
- 4.1 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)
 4.12 renewals? Yes () No (X)
- 4.2 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:
- 4.21 sales of new business? Yes () No (X)
 4.22 renewals? Yes () No (X)

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes () No (X)

5.2 If yes, provide the name of entity, the NAIC company code, and state of domicile for any entity that has ceased to exist as a result of the merger or consolidation.

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

05.2 - State the entities that ceased to exist as a result of the merger or consolidation

6.1 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)

6.2 If yes, give full information:
.....

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes () No (X)

7.2 If yes, 7.21 State the percentage of foreign control; 0.000 %

7.22 State the nationality(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).

1 Nationality	2 Type of Entity
------------------	---------------------

07.22 - Nationality(s) of the foreign person(s) or entity(s); or the nationality of its manager or attorney-in-fact and identify the type of entity(s)

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes () No (X)

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

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes () No (X)

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

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC
---------------------	-----------------------------	----------	----------	----------	-----------	----------

08.4 - Names and location of any affiliates regulated by a federal regulatory services agency.

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
 GENERAL

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
 RSM ROC & COMPANY
 P. O. BOX 10528, SAN JUAN, P. R. 00922-0528
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes () No (X)
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:

- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Model Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation? Yes () No (X)
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:

- 10.5 Has the reporting entity established an Audit Committee in compliance with domiciliary state insurance laws? Yes (X) No () N/A ()
- 10.6 If the response to 10.5 is no or n/a, please explain:

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
 SCOTT WEINSTEIN, KPMG LLP INDEPENDENT ACTUARY
 ATLANTA, GEORGIA
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes () No (X)
- 12.11 Name of real estate holding company

- 12.12 Number of parcels involved 0
- 12.13 Total book/adjusted carrying value \$ 0
- 12.2 If yes, provide explanation

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

- 13.2 Does this statement contain all business transacted for the reporting entity through its United States branch on risks wherever located? Yes () No (X)
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes () No (X)
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes () No () N/A (X)
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
 (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 (c) Compliance with applicable governmental laws, rules and regulations;
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 (e) Accountability for adherence to the code. Yes (X) No ()
- 14.11 If the response to 14.1 is No, please explain:

- 14.2 Has the code of ethics for senior managers been amended? Yes () No (X)
- 14.21 If the response to 14.2 is Yes, provide information related to amendment(s).

- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes () No (X)
- 14.31 If the response to 14.3 is Yes, provide the nature of any waiver(s).

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance with a NAIC rating of 3 or below?

Yes () No (X)

15.2 If the response to 15.1 is yes, indicated the American Bankers Association (ABA) Routing Number and the name of issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
--	--------------------------------------	--	-------------

15.2 - American Bankers Association Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

BOARD OF DIRECTORS

- | | |
|--|----------------|
| 16. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinate committee thereof? | Yes (X) No () |
| 17. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof? | Yes (X) No () |
| 18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees, or responsible employees that is in conflict or is likely to conflict with the official duties of such person? | Yes (X) No () |

FINANCIAL

- | | |
|---|----------------|
| 19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? | Yes () No (X) |
| 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans): | |
| 20.11 To directors or other officers | \$ 0 |
| 20.12 To stockholders not officers | \$ 0 |
| 20.13 Trustees, supreme or grand (Fraternal only) | \$ 0 |
| 20.2 Total amount of loans outstanding at end of year (inclusive of Separate Accounts, exclusive of policy loans): | |
| 20.21 To directors or other officers | \$ 0 |
| 20.22 To stockholders not officers | \$ 0 |
| 20.23 Trustees, supreme or grand (Fraternal only) | \$ 0 |
| 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? | Yes () No (X) |
| 21.2 If yes, state the amount thereof at December 31 of the current year: | |
| 21.21 Rented from others | \$ 0 |
| 21.22 Borrowed from others | \$ 0 |
| 21.23 Leased from others | \$ 0 |
| 21.24 Other | \$ 0 |
| 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? | Yes () No (X) |
| 22.2 If answer is yes: | |
| 22.21 Amount paid as losses or risk adjustment | \$ 0 |
| 22.22 Amount paid as expenses | \$ 0 |
| 22.23 Other amounts paid | \$ 0 |
| 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? | Yes () No (X) |
| 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: | \$ 0 |

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

INVESTMENT

- | | | |
|------|---|------------------------|
| 24.1 | Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.3) | Yes (X) No () |
| 24.2 | If no, give full and complete information relating thereto:
.....
..... | |
| 24.3 | For the security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 16 where this information is also provided)
.....
..... | |
| 24.4 | Does the Company's security lending program meet the requirements for a conforming program as outlined in Risk-Based Capital Instructions? | Yes () No () N/A (X) |
| 24.5 | If answer to 24.4 is YES, report amount of collateral for conforming programs. | \$ 0 |
| 24.6 | If answer to 24.4 is NO, report amount of collateral for other programs. | \$ 0 |
| 24.7 | Does your security lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? | Yes () No () N/A (X) |
| 24.8 | Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? | Yes () No () N/A (X) |
| 24.9 | Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? | Yes () No () N/A (X) |
| 25.1 | Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.3) | Yes () No (X) |
| 25.2 | If yes, state the amount thereof at December 31 of the current year: | |
| | 25.21 Subject to repurchase agreements | \$ 0 |
| | 25.22 Subject to reverse repurchase agreements | \$ 0 |
| | 25.23 Subject to dollar repurchase agreements | \$ 0 |
| | 25.24 Subject to reverse dollar repurchase agreements | \$ 0 |
| | 25.25 Pledged as collateral | \$ 0 |
| | 25.26 Placed under option agreements | \$ 0 |
| | 25.27 Letter stock or securities restricted as to sale | \$ 0 |
| | 25.28 On deposit with state or other regulatory body | \$ 0 |
| | 25.29 Other | \$ 0 |

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

INVESTMENT

25.3 For category (25.27) provide the following:

1 Nature of Restriction	2 Description	3 Amount
----------------------------	------------------	-------------

25.3 - For category (25.27 Letter stock or securities restricted as to sale)

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes () No (X)

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
 If no, attach a description with this statement.

Yes () No () N/A (X)

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes () No (X)

27.2 If yes, state the amount thereof at December 31 of the current year.

\$ 0

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
 INVESTMENT

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

Yes (X) No ()

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

1 Name of Custodian(s)	2 Custodian's Address
---------------------------	--------------------------

For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook
 UBS Financial Services American International Plaza 250, Munoz Rivera Ave., Hato Rey, P. R.
 Banco Popular de P. R. P. O. Box 362708, San Juan, P. R. 00936-2707

28.01 - For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook

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

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
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28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes () No (X)

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

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
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28.05 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address
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GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
 INVESTMENT

29.1 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)

29.2 If yes, complete the following schedule:

1 CUSIP Number	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
-------------------	--------------------------	-----------------------------------

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

1 Name of Mutual Fund (from question 29.2)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
--	--	---	------------------------

29.3 - For each mutual fund listed in 29.2

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES
 INVESTMENT

30. 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
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	\$ 125,849,137	\$ 123,727,222	\$ (2,121,915)
30.2 Preferred stocks	\$ 1,140,582	\$ 1,140,582	\$ 0
30.3 Totals	\$ 126,989,719	\$ 124,867,804	\$ (2,121,915)

30.4 Describe the sources or methods utilized in determining the fair values:

.....

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes () No (X)

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes () No ()

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

32.1 Have all the filing requirements of the Purposes and Procedures manual of the NAIC Securities Valuation Office been followed? Yes (X) No ()

32.2 If no, list exceptions:

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

OTHER

33.1 Amount of payments to Trade Associations, service organizations and statistical or Rating Bureaus, if any? \$ 389,010

33.2 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 Name	2 Amount Paid
INSURANCE SERVICES OFFICE INC	\$ 139,257
.....	\$ 0
.....	\$ 0
.....	\$ 0

34.1 Amount of payments for legal expenses, if any? \$ 115,418

34.2 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 Name	2 Amount Paid
COBIAN & COBIAN	\$ 87,265
.....	\$ 0
.....	\$ 0
.....	\$ 0

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 0

35.2 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 Name	2 Amount Paid
.....	\$ 0
.....	\$ 0
.....	\$ 0
.....	\$ 0

GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance 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 Supplement Insurance Experience Exhibit? \$ 0

1.31 Reason for excluding:

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Line (1.2) above. \$ 0

1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$ 0

1.6 Individual policies:

Most current three years:

1.61 Total premium earned \$ 0

1.62 Total incurred claims \$ 0

1.63 Number of covered lives 0

All years prior to most current three years:

1.64 Total premium earned \$ 0

1.65 Total incurred claims \$ 0

1.66 Number of covered lives 0

1.7 Group policies:

Most current three years:

1.71 Total premium earned \$ 0

1.72 Total incurred claims \$ 0

1.73 Number of covered lives 0

All years prior to most current three years:

1.74 Total premium earned \$ 0

1.75 Total incurred claims \$ 0

1.76 Number of covered lives 0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	\$ 0	\$ 0
2.2 Premium Denominator	\$ 0	\$ 0
2.3 Premium Ratio (Line 2.1/Line 2.2) 0.0 0.0
2.4 Reserve Numerator	\$ 0	\$ 0
2.5 Reserve Denominator	\$ 0	\$ 0
2.6 Reserve Ratio (Line 2.4/Line 2.5) 0.0 0.0

3.1 Does the reporting entity issue both participating and non-participating policies? Yes () No (X)

3.2 If yes, state the amount of calendar year premiums written on:

3.21 Participating policies \$ 0

3.22 Non-participating policies \$ 0

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 () No (X)

4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? 0.0 %

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 compensation Yes () No () N/A (X)

5.22 As a direct expense of the exchange Yes () No () N/A (X)

5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes () No (X)

5.5 If yes, give full information.

GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 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?
 Liabilities Treaties od \$ 11,750,000 excess of \$ 250,000 with a Clash Cover
 of \$ 10,000,000 excess of \$ 12,000,000.
- 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:

- 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?
 Commercial Lines Cat. Excess of Loss of \$ 164,000,000 excess of \$ 6,000,000
 and Personal Lines Cat. Excess of Loss od \$ 18,600,000 excess of \$ 1,000,000.
- 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? Yes (X) 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.

- 7.1 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)? Yes () No (X)
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions. 0
- 7.3 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 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes () No (X)
- 8.2 If yes, give full information.

- 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 the 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 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. Yes () No (X)
- 9.3 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.
- 9.4 Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, 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)
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
 (a) The entity does not utilize reinsurance; or Yes () No (X)
 (b) 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, Yes () No (X)
 (c) 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 () No (X)

GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original reporting entity would have been required to charge had it retained the risks. Has this been done? Yes () No () N/A (X)
- 11.1 Has this reporting entity guaranteed policies issued by any other entity and now in force? Yes () No (X)
- 11.2 If yes, give full information.

- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
- | | |
|---|------------|
| 12.11 Unpaid losses | \$ 0 |
| 12.12 Unpaid underwriting expenses (including loss adjustment expenses) | \$ 0 |
- 12.2 Of the amount on Line 15.3 of the asset schedule, Page 2, state the amount which is secured by letters of credit, collateral and other funds: \$ 0
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes () No () N/A (X)
- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
- | | |
|------------|---------------|
| 12.41 From | 0.000 % |
| 12.42 To | 0.000 % |
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by the reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes () No (X)
- 12.6 If yes, state the amount thereof at December 31 of the current year:
- | | |
|----------------------------------|------------|
| 12.61 Letters of credit | \$ 0 |
| 12.62 Collateral and other funds | \$ 0 |
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ 250,000
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes () No (X)
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. 0
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes () No (X)
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:

- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes () No (X)
- 14.4 If the answer to 14.3 is no, are the methods described in 14.2 entirely contained in written agreements? Yes () No (X)
- 14.5 If the answer to 14.4 is no, please explain:

- 15.1 Has the reporting entity guaranteed any financed premium accounts? Yes () No (X)
- 15.2 If yes, give full information.

GENERAL INTERROGATORIES
PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

16.1 Does the reporting entity write any warranty business? Yes () No (X)

If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home	\$..... 0	\$..... 0	\$..... 0	\$..... 0	\$..... 0
16.12 Products	\$..... 0	\$..... 0	\$..... 0	\$..... 0	\$..... 0
16.13 Automobile	\$..... 0	\$..... 0	\$..... 0	\$..... 0	\$..... 0
16.14 Other*	\$..... 0	\$..... 0	\$..... 0	\$..... 0	\$..... 0

* Disclose type of coverage:
.....
.....

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that it excludes from Schedule F - Part 5? Yes () No (X)

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule 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

18.1 Do you act as a custodian for health savings accounts? Yes () No (X)

18.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$..... 0

18.3 Do you act as an administrator for health savings accounts? Yes () No (X)

18.4 If yes, please provide the balance of the funds administered as of the reporting date. \$..... 0

FIVE-YEAR HISTORICAL DATA

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

	1 2011	2 2010	3 2009	4 2008	5 2007
Gross Premiums Written (Page 8, Part 1B, Columns 1, 2 and 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 and 19.3, 19.4)	13,425,050	16,728,535	14,684,536	10,878,096	15,386,393
2. Property lines (Lines 1, 2, 9, 12, 21 and 26)	19,160,256	17,385,248	16,544,829	15,559,344	26,226,861
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)	39,536,828	39,167,191	35,783,930	34,802,518	36,216,932
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)	6,169,662	5,770,240	6,036,362	6,882,513	7,997,246
5. Nonproportional reinsurance lines (Lines 31, 32 and 33)	0	0	0	0	0
6. Total (Line 35)	78,291,796	79,051,214	73,049,657	68,122,471	85,827,432
Net Premiums Written (Page 8, Part 1B, Column 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 and 19.3, 19.4)	11,687,187	14,864,648	13,069,309	8,979,175	13,150,501
8. Property lines (Lines 1, 2, 9, 12, 21 and 26)	11,105,434	11,001,961	9,959,408	8,310,932	16,115,614
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)	20,259,771	19,856,867	19,598,929	17,507,459	17,872,351
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)	2,241,618	2,005,673	2,179,424	2,471,538	2,568,652
11. Nonproportional reinsurance lines (Line 31, 32 and 33)	0	0	0	0	0
12. Total (Line 35)	45,294,010	47,729,149	44,807,070	37,269,104	49,707,118
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	(2,278,996)	1,191,651	235,400	2,696,552	959,743
14. Net investment gain (loss) (Line 11)	6,801,132	1,512,383	2,321,932	557,006	7,203,930
15. Total other income (Line 15)	(1,982)	(455,443)	(250,723)	(771,404)	(1,253,518)
16. Dividends to policyholders (Line 17)	0	0	0	0	0
17. Federal and foreign income taxes incurred (Line 19)	7,534	16,349	(91,687)	74,623	0
18. Net income (Line 20)	4,512,620	2,232,242	2,398,296	2,407,531	6,910,155
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Column 3)	158,915,123	167,511,894	144,515,010	143,699,876	159,187,263
20. Premiums and considerations (Page 2, Column 3)					
20.1 In course of collection (Line 15.1)	7,511,010	7,339,859	7,497,563	8,596,473	9,991,468
20.2 Deferred and not yet due (Line 15.2)	0	0	0	0	0
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26)	86,929,913	96,061,399	78,711,173	81,180,179	92,592,761
22. Losses (Page 3, Line 1)	31,563,792	29,897,568	31,690,513	32,781,681	34,913,631
23. Loss adjustment expenses (Page 3, Line 3)	4,100,000	4,100,000	3,225,000	3,222,000	3,216,000
24. Unearned premiums (Page 3, Line 9)	31,812,065	33,822,229	32,230,068	30,439,535	40,181,993
25. Capital paid up (Page 3, Line 30 and Line 31)	3,000,000	3,000,000	3,000,000	3,000,000	2,610,000
26. Surplus as regards policyholders (Page 3, Line 37)	71,985,210	71,450,495	65,803,837	62,519,697	66,594,502
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	2,583,304	6,997,706	6,942,040	(851,528)	5,825,567
Risk-Based Capital Analysis					
28. Total adjusted capital	71,985,210	71,450,495	65,803,837	62,519,697	66,594,502
29. Authorized control level risk-based capital	5,809,625	4,789,104	5,653,277	5,287,369	6,592,755
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Column 3) (Item divided by Page 2, Line 12, Column 3) x 100.0					
30. Bonds (Line 1)	84.2	84.9	79.0	76.8	64.6
31. Stocks (Line 2.1 and Line 2.2)	2.0	5.0	8.7	9.8	16.0
32. Mortgage loans on real estate (Line 3.1 and Line 3.2)	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 and 4.3)	4.5	4.0	4.8	5.0	4.6
34. Cash, cash equivalents and short-term investments (Line 5)	9.4	6.1	7.6	8.4	14.8
35. Contact loans (Line 6)	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7)	0.0	0.0	X X X	X X X	X X X
37. Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.0
38. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
39. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	X X X	X X X	X X X
40. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Column 1)	0	0	0	0	0
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Column 1)	0	0	0	0	0
44. Affiliated common stocks (Schedule D, Summary, Line 24, Column 1)	237,570	338,599	438,531	508,177	514,021
45. Affiliated short-term investments (Schedule DA Verification, Column 5, Line 10)	0	0	0	0	0
46. Affiliated mortgage loans on real estate	0	0	0	0	0
47. All other affiliated	0	0	0	0	0
48. Total of above Line 42 through Line 47	237,570	338,599	438,531	508,177	514,021
49. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Column 1, Line 37 x 100.0)	0.3	0.5	0.7	0.8	0.8

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2011	2 2010	3 2009	4 2008	5 2007
Capital and Surplus Accounts (Page 4)					
50. Net unrealized capital gains (losses) (Line 24)	520,556	3,861,553	3,122,959	(5,486,305)	(3,251,619)
51. Dividends to stockholders (Line 35)	(5,000,000)	0	(1,000,000)	(1,500,000)	(400,000)
52. Change in surplus as regards policyholders for the year (Line 38)	534,715	5,646,658	3,284,140	(4,074,805)	(4,189,110)
Gross Losses Paid (Page 9, Part 2, Columns 1 and 2)					
53. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 and 19.3, 19.4)	6,635,323	6,632,131	10,903,638	7,948,339	5,239,277
54. Property lines (Lines 1, 2, 9, 12, 21 and 26)	6,656,137	5,877,975	22,499,394	6,864,157	8,417,437
55. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)	9,570,348	15,720,215	9,367,438	9,886,839	7,927,611
56. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)	2,062,455	3,338,772	2,214,633	1,832,754	1,614,024
57. Nonproportional reinsurance lines (Lines 31, 32, and 33)	0	0	0	0	0
58. Total (Line 35)	24,924,263	31,569,093	44,985,103	26,532,089	23,198,349
Net Losses Paid (Page 9, Part 2, Column 4)					
59. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 and 19.3, 19.4)	6,414,713	6,314,068	5,789,608	6,118,639	5,229,032
60. Property lines (Lines 1, 2, 9, 12, 21 and 26)	6,162,783	5,852,859	4,855,237	6,759,821	7,231,017
61. Property and liability combined lines (Lines 3, 4, 5, 8, 22 and 27)	7,513,765	8,764,740	8,082,255	8,382,238	6,751,561
62. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 and 34)	1,505,139	1,572,333	1,347,542	1,330,786	1,400,734
63. Nonproportional reinsurance lines (Lines 31, 32, and 33)	0	0	0	0	0
64. Total (Line 35)	21,596,400	22,504,000	20,074,642	22,591,484	20,612,344
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
65. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
66. Losses incurred (Line 2)	49.2	44.9	44.1	43.5	41.0
67. Loss expenses incurred (Line 3)	17.8	17.1	14.5	15.6	15.8
68. Other underwriting expenses incurred (Line 4)	37.9	35.5	40.8	35.1	41.3
69. Net underwriting gain (loss) (Line 8)	(4.8)	2.6	0.5	5.7	1.9
Other Percentages					
70. Other underwriting expenses to net premiums written (Page 4, Line 4 plus Line 5 minus Line 15 divided by Page 8, Part 1B, Column 6, Line 35 x 100.0)	39.5	35.2	39.7	46.4	44.1
71. Losses and loss expenses incurred to premiums earned (Page 4, Line 2 plus Line 3 divided by Page 4, Line 1 x 100.0)	67.0	61.9	58.6	59.1	56.8
72. Net premiums written to policyholders' surplus (Page 8, Part 1B, Column 6, Line 35 divided by Page 3, Line 37, Column 1 x 100.0)	62.9	66.8	68.1	59.6	74.6
One Year Loss Development (000 omitted)					
73. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2 - Summary, Line 12, Column 11)	(1,160)	(2,364)	(1,622)	(2,962)	(3,098)
74. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 73 above divided by Page 4, Line 21, Column 1 x 100.0)	(1.6)	(3.6)	(2.6)	(4.4)	(5.0)
Two Year Loss Development (000 omitted)					
75. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Column 12)	(3,684)	(3,345)	(3,627)	(4,219)	(104)
76. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 75 above divided by Page 4, Line 21, Column 2 x 100.0)	(5.6)	(5.4)	(5.4)	(6.8)	(0.2)

Note: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?
If no, please explain:

Yes () No ()

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported - Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Columns 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Columns 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	X X X	X X X	X X X	471	179	241	126	1	0	2	408	X X X
2. 2002	92,865	30,231	62,634	36,727	5,531	4,178	667	7,505	1,342	3,734	40,870	X X X
3. 2003	85,947	32,111	53,836	32,980	7,642	4,099	1,067	5,482	738	2,850	33,114	X X X
4. 2004	81,437	33,029	48,408	32,124	10,201	3,680	1,173	2,268	421	2,037	26,277	X X X
5. 2005	83,741	31,095	52,646	24,677	2,674	2,619	165	995	105	1,442	25,347	X X X
6. 2006	89,383	37,516	51,867	40,376	19,296	3,397	1,018	4,116	163	1,361	27,412	X X X
7. 2007	85,101	35,033	50,068	23,792	3,230	1,568	142	4,132	336	1,362	25,784	X X X
8. 2008	78,430	31,418	47,012	22,314	2,267	1,864	49	4,176	396	1,021	25,642	X X X
9. 2009	71,758	28,741	43,017	21,620	4,152	1,345	33	3,700	371	791	22,109	X X X
10. 2010	76,134	29,997	46,137	19,112	1,340	877	33	4,515	360	681	22,771	X X X
11. 2011	80,003	32,699	47,304	11,795	1,582	209	65	5,621	497	371	15,481	X X X
12. Totals	X X X	X X X	X X X	265,988	58,094	24,077	4,538	42,511	4,729	15,652	265,215	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding - Direct & Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1.	979	245	20	10	0	0	0	0	0	0	0	744	X X X
2.	361	65	20	0	0	0	0	0	0	0	0	316	X X X
3.	1,332	1,257	0	0	0	0	0	0	0	0	0	75	X X X
4.	589	109	20	0	0	0	0	0	0	0	0	500	X X X
5.	623	22	0	0	0	0	0	0	0	0	0	601	X X X
6.	819	56	30	5	0	0	0	0	0	0	0	788	X X X
7.	718	9	100	10	0	0	0	0	0	0	0	799	X X X
8.	1,405	89	466	73	0	0	0	0	0	0	0	1,709	X X X
9.	2,393	2	2,319	527	0	0	76	7	97	8	0	4,341	X X X
10.	5,332	418	3,477	1,785	0	0	179	13	125	8	300	6,889	X X X
11.	5,395	451	13,414	3,114	0	0	1,269	103	2,718	225	650	18,903	X X X
12.	19,946	2,723	19,866	5,524	0	0	1,524	123	2,940	241	950	35,665	X X X

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter - Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1.	X X X	X X X	X X X	X X X	X X X	X X X	0	0	X X X	744	0
2.	48,791	7,605	41,186	52.5	25.2	65.8	0	0	0.0	316	0
3.	43,893	10,704	33,189	51.1	33.3	61.6	0	0	0.0	75	0
4.	38,681	11,904	26,777	47.5	36.0	55.3	0	0	0.0	500	0
5.	28,914	2,966	25,948	34.5	9.5	49.3	0	0	0.0	601	0
6.	48,738	20,538	28,200	54.5	54.7	54.4	0	0	0.0	788	0
7.	30,310	3,727	26,583	35.6	10.6	53.1	0	0	0.0	799	0
8.	30,225	2,874	27,351	38.5	9.1	58.2	0	0	0.0	1,709	0
9.	31,550	5,100	26,450	44.0	17.7	61.5	0	0	0.0	4,183	158
10.	33,617	3,957	29,660	44.2	13.2	64.3	0	0	0.0	6,606	283
11.	40,421	6,037	34,384	50.5	18.5	72.7	0	0	0.0	15,244	3,659
12.	X X X	X X X	X X X	X X X	X X X	X X X	0	0	X X X	31,565	4,100

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	11 One Year	12 Two Year
1. Prior	15,679	20,003	23,421	26,741	27,667	28,330	28,601	29,227	29,697	29,425	(272)	198
2. 2002	38,195	33,249	33,760	33,458	33,918	34,490	34,609	34,862	35,006	35,023	17	161
3. 2003	X X X	30,933	28,431	27,333	27,615	28,247	28,361	28,568	28,489	28,445	(44)	(123)
4. 2004	X X X	X X X	25,638	25,558	24,471	24,361	24,770	24,878	24,764	24,930	166	52
5. 2005	X X X	X X X	X X X	27,572	26,348	25,155	24,774	24,892	25,169	25,058	(111)	166
6. 2006	X X X	X X X	X X X	X X X	29,839	26,203	24,523	24,304	24,241	24,247	6	(57)
7. 2007	X X X	X X X	X X X	X X X	X X X	27,738	25,923	24,166	22,969	22,787	(182)	(1,379)
8. 2008	X X X	X X X	X X X	X X X	X X X	X X X	26,897	25,939	24,752	23,571	(1,181)	(2,368)
9. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	23,364	22,723	23,030	307	(334)
10. 2010	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	25,254	25,388	134	X X X
11. 2011	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	26,767	X X X	X X X
12. Totals											(1,160)	(3,684)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior	0 0 0	8,302	15,272	20,564	23,175	24,757	26,358	27,831	28,282	28,681	X X X	X X X
2. 2002	21,073	26,556	29,670	31,822	32,879	33,626	34,183	34,512	34,688	34,707	X X X	X X X
3. 2003	X X X	16,151	21,557	23,998	25,539	26,661	27,705	28,153	28,287	28,370	X X X	X X X
4. 2004	X X X	X X X	13,635	18,886	21,156	22,481	23,257	24,307	24,200	24,430	X X X	X X X
5. 2005	X X X	X X X	X X X	12,281	18,504	20,752	22,636	23,415	24,132	24,464	X X X	X X X
6. 2006	X X X	X X X	X X X	X X X	12,184	17,417	20,252	22,001	23,208	23,459	X X X	X X X
7. 2007	X X X	X X X	X X X	X X X	X X X	12,461	18,119	19,981	21,060	21,988	X X X	X X X
8. 2008	X X X	X X X	X X X	X X X	X X X	X X X	11,765	17,848	19,821	21,862	X X X	X X X
9. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	9,062	16,201	18,782	X X X	X X X
10. 2010	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	11,611	18,617	X X X	X X X
11. 2011	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	10,357	X X X	X X X

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011
1. Prior	0	0	0	0	0	0	0	0	0	10
2. 2002	13,980	3,703	1,244	0	0	0	0	0	0	20
3. 2003	X X X	11,226	4,118	728	0	100	100	0	20	0
4. 2004	X X X	X X X	8,925	3,430	918	150	50	25	0	20
5. 2005	X X X	X X X	X X X	10,650	4,382	1,832	338	50	25	0
6. 2006	X X X	X X X	X X X	X X X	12,694	5,472	1,831	338	90	25
7. 2007	X X X	X X X	X X X	X X X	X X X	11,857	5,471	1,824	398	90
8. 2008	X X X	X X X	X X X	X X X	X X X	X X X	11,113	4,853	2,155	393
9. 2009	X X X	X X X	X X X	X X X	X X X	X X X	X X X	9,929	3,240	1,859
10. 2010	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	9,670	1,858
11. 2011	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	11,466

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1		Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9	
	Active Status	2	3	Direct Premiums Written							Direct Premiums Earned
1. Alabama	AL	N	0	0	0	0	0	0	0	0	0
2. Alaska	AK	N	0	0	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0	0	0
9. Dist. Columbia	DC	N	0	0	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0	0	0
14. Illinois	IL	N	0	0	0	0	0	0	0	0	0
15. Indiana	IN	N	0	0	0	0	0	0	0	0	0
16. Iowa	IA	N	0	0	0	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0	0	0	0
18. Kentucky	KY	N	0	0	0	0	0	0	0	0	0
19. Louisiana	LA	N	0	0	0	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0	0	0
34. North Carolina	NC	N	0	0	0	0	0	0	0	0	0
35. North Dakota	ND	N	0	0	0	0	0	0	0	0	0
36. Ohio	OH	N	0	0	0	0	0	0	0	0	0
37. Oklahoma	OK	N	0	0	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0	0	0
39. Pennsylvania	PA	N	0	0	0	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0	0	0	0
41. South Carolina	SC	N	0	0	0	0	0	0	0	0	0
42. South Dakota	SD	N	0	0	0	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0	0	0
54. Puerto Rico	PR	N	77,761,573	79,464,179	0	24,924,263	27,248,836	39,635,478	0	0	0
55. U.S. Virgin Islands	VI	N	530,223	538,733	0	0	105,500	176,000	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0	0	0
57. Canada	CN	N	0	0	0	0	0	0	0	0	0
58. Aggregate other alien	OT	X X X	0	0	0	0	0	0	0	0	0
59. Totals	(a)		78,291,796	80,002,912	0	24,924,263	27,354,336	39,811,478	0	0	0
DETAILS OF WRITE-INS											
5801.		X X X	0	0	0	0	0	0	0	0	0
5802.		X X X	0	0	0	0	0	0	0	0	0
5803.		X X X	0	0	0	0	0	0	0	0	0
5898. Summary of remaining write-ins for Line 58 from overflow page		X X X	0	0	0	0	0	0	0	0	0
5899. Totals (Line 5801 through Line 5803 plus Line 5898) (Line 58 above)		X X X	0	0	0	0	0	0	0	0	0

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

Explanation of basis of allocation of premiums by states, etc.

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(a) Insert the number of "L" responses except for Canada and Other Alien.

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE INTEGRAND Assurance Company
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

