



QUARTERLY STATEMENT

AS OF MARCH 31, 2008
OF THE CONDITION AND AFFAIRS OF THE

LUMBERMENS MUTUAL CASUALTY COMPANY

NAIC Group Code 0108, 0108 NAIC Company Code 22977 Employer's ID Number 36-1410470
(Current Period) (Prior Period)

Organized under the Laws of Illinois, State of Domicile or Port of Entry Illinois
Country of Domicile United States

Incorporated/Organized 11/18/1912 Commenced Business 11/25/1912

Statutory Home Office 1 Kemper Drive, Long Grove, IL 60049-0001
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office 1 Kemper Drive Long Grove, IL 60049-0001 847-320-2000
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 1 Kemper Drive, Long Grove, IL 60049-0001
(Street and Number or P.O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 1 Kemper Drive Long Grove, IL 60049-0001 847-320-3127
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.kemperinsurance.com

Statutory Statement Contact Fredrick Thomas Griffith 847-320-3127
(Name) (Area Code) (Telephone Number) (Extension)
Fred.Griffith@kemperinsurance.com 847-320-3818
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OFFICERS

Name	Title	Name	Title
<u>Douglas Sean Andrews</u>	<u>President and CEO</u>	<u>John Keating Conway</u>	<u>Secretary</u>
<u>Fredrick Thomas Griffith</u>	<u>Chief Financial Officer</u>	<u>Geoffrey Andrew Cooke</u>	<u>Treasurer</u>

OTHER OFFICERS

<u>Frederick Otto Kist</u>	<u>Senior Vice President</u>	<u>Benjamin David Schwartz</u>	<u>Senior Vice President</u>
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DIRECTORS OR TRUSTEES

<u>Douglas Sean Andrews</u>	<u>Peter Bannerman Hamilton</u>	<u>George Ralph Lewis</u>	<u>Arthur James Massolo</u>
<u>David Barrett Mathis</u>			

State of Illinois

ss

County of Lake

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.

Douglas Sean Andrews
President and CEO

John Keating Conway
Secretary

Fredrick Thomas Griffith
Chief Financial Officer

a. Is this an original filing? Yes [X] No []

Subscribed and sworn to before me this
12th day of May, 2008

b. If no,
1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	1,138,494,053		1,138,494,053	1,142,842,600
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks	62,214,984		62,214,984	62,446,511
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$8,557,988), cash equivalents (\$0) and short-term investments (\$74,006,999)	82,564,987		82,564,987	155,761,516
6. Contract loans, (including \$premium notes)			0	0
7. Other invested assets	6,144,561	0	6,144,561	6,171,061
8. Receivables for securities			0	0
9. Aggregate write-ins for invested assets	0	0	0	0
10. Subtotals, cash and invested assets (Lines 1 to 9)	1,289,418,585	0	1,289,418,585	1,367,221,688
11. Title plants less \$ charged off (for Title insurers only)			0	0
12. Investment income due and accrued	10,620,484		10,620,484	9,527,871
13. Premiums and considerations:				
13.1 Uncollected premiums and agents' balances in the course of collection	19,812,151	15,243,889	4,568,262	7,243,968
13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	21,002,613	4,563,358	16,439,255	21,907,984
13.3 Accrued retrospective premiums	20,297,696	463,219	19,834,477	16,881,174
14. Reinsurance:				
14.1 Amounts recoverable from reinsurers	141,989,530		141,989,530	150,861,249
14.2 Funds held by or deposited with reinsured companies	11,428,183		11,428,183	11,568,086
14.3 Other amounts receivable under reinsurance contracts			0	0
15. Amounts receivable relating to uninsured plans			0	0
16.1 Current federal and foreign income tax recoverable and interest thereon			0	0
16.2 Net deferred tax asset	698,952,141	698,952,141	0	0
17. Guaranty funds receivable or on deposit			0	0
18. Electronic data processing equipment and software			0	0
19. Furniture and equipment, including health care delivery assets (\$)			0	0
20. Net adjustment in assets and liabilities due to foreign exchange rates			0	153,226
21. Receivables from parent, subsidiaries and affiliates	1,742,719	1,742,719	0	0
22. Health care (\$) and other amounts receivable			0	0
23. Aggregate write-ins for other than invested assets	116,750,876	15,479,602	101,271,274	98,882,268
24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 to 23)	2,332,014,978	736,444,928	1,595,570,050	1,684,247,514
25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
26. Total (Lines 24 and 25)	2,332,014,978	736,444,928	1,595,570,050	1,684,247,514
DETAILS OF WRITE-INS				
0901.				
0902.				
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	0	0	0	0
2301. Amounts receivable under high deductible policies.....	20,437,299	6,387,457	14,049,842	16,343,662
2302. Reinsurance accounted for as a deposit.....	746,924	0	746,924	811,766
2303. Advance to claims service provider.....	16,165,404	0	16,165,404	10,029,880
2398. Summary of remaining write-ins for Line 23 from overflow page	79,401,249	9,092,145	70,309,104	71,696,960
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	116,750,876	15,479,602	101,271,274	98,882,268

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$690,000)	840,380,151	908,734,516
2. Reinsurance payable on paid losses and loss adjustment expenses	19,786,472	21,314,152
3. Loss adjustment expenses	305,057,354	328,662,125
4. Commissions payable, contingent commissions and other similar charges	1,408,923	1,509,174
5. Other expenses (excluding taxes, licenses and fees)	10,136,158	14,016,142
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	38,123,251	38,989,454
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	5,717,376	6,079,827
7.2 Net deferred tax liability	0	0
8. Borrowed money \$ and interest thereon \$	0	0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$2,514,790 and including warranty reserves of \$427,285)	4,935,020	5,405,172
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)	5,693,887	5,621,847
13. Funds held by company under reinsurance treaties	3,020,132	3,031,038
14. Amounts withheld or retained by company for account of others	121,139,807	123,516,395
15. Remittances and items not allocated	1,570,753	9,227,740
16. Provision for reinsurance	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates	562,285	0
18. Drafts outstanding	0	0
19. Payable to parent, subsidiaries and affiliates	985,603	490,170
20. Payable for securities	11,400,000	0
21. Liability for amounts held under uninsured plans	0	0
22. Capital notes \$ and interest thereon \$	0	0
23. Aggregate write-ins for liabilities	60,360,626	66,985,376
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23)	1,430,277,798	1,533,583,128
25. Protected cell liabilities	0	0
26. Total liabilities (Lines 24 and 25)	1,430,277,798	1,533,583,128
27. Aggregate write-ins for special surplus funds	0	0
28. Common capital stock	0	0
29. Preferred capital stock	0	0
30. Aggregate write-ins for other than special surplus funds	1,500,000	1,500,000
31. Surplus notes	698,355,598	698,355,598
32. Gross paid in and contributed surplus	0	0
33. Unassigned funds (surplus)	(534,563,346)	(549,191,212)
34. Less treasury stock, at cost:		
34.1 shares common (value included in Line 28 \$)	0	0
34.2 shares preferred (value included in Line 29 \$)	0	0
35. Surplus as regards policyholders (Lines 27 to 33, less 34)	165,292,252	150,664,386
36. TOTALS	1,595,570,050	1,684,247,514
DETAILS OF WRITE-INS		
2301. Accounts payable and other liabilities	60,360,626	66,985,376
2302.		
2303.		
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	60,360,626	66,985,376
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	0	0
3001. Guaranty fund	1,500,000	1,500,000
3002.		
3003.		
3098. Summary of remaining write-ins for Line 30 from overflow page	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above)	1,500,000	1,500,000

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ (572,346))	(389,754)	(163,289)	263,805
1.2 Assumed (written \$ (2,318,990))	(1,775,652)	3,033,351	8,966,558
1.3 Ceded (written \$ (3,164,499))	(2,908,721)	(424,596)	(4,500,874)
1.4 Net (written \$ 273,163)	743,315	3,294,658	13,731,237
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 815,000):			
2.1 Direct	(7,198,636)	6,300,853	92,365,589
2.2 Assumed	(43,179,053)	5,781,039	66,573,766
2.3 Ceded	(46,624,658)	(3,426,133)	21,957,313
2.4 Net	(3,753,031)	15,508,025	136,982,042
3. Loss adjustment expenses incurred	(3,180,297)	399,952	(42,036,268)
4. Other underwriting expenses incurred	16,407,576	16,160,103	57,956,166
5. Aggregate write-ins for underwriting deductions	0	0	0
6. Total underwriting deductions (Lines 2 through 5)	9,474,248	32,068,080	152,901,940
7. Net income of protected cells	0	0	0
8. Net underwriting gain or (loss) (Line 1.4 minus Line 6 + Line 7)	(8,730,933)	(28,773,422)	(139,170,703)
INVESTMENT INCOME			
9. Net investment income earned	13,286,974	15,269,546	68,422,989
10. Net realized capital gains (losses) less capital gains tax of \$	972,729	(1,449,451)	(3,662,654)
11. Net investment gain (loss) (Lines 9 + 10)	14,259,703	13,820,095	64,760,335
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 25,070 amount charged off \$ 1,119,603)	(1,094,533)	(4,033,974)	455,473
13. Finance and service charges not included in premiums	0	0	0
14. Aggregate write-ins for miscellaneous income	2,292,184	5,737,232	8,118,015
15. Total other income (Lines 12 through 14)	1,197,651	1,703,258	8,573,488
16. Net income before dividends to policyholders after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	6,726,421	(13,250,069)	(65,836,880)
17. Dividends to policyholders	(3,822,388)	3,067,614	5,082,057
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)	10,548,809	(16,317,683)	(70,918,937)
19. Federal and foreign income taxes incurred	(362,451)	(484,316)	(3,032,855)
20. Net income (Line 18 minus Line 19)(to Line 22)	10,911,260	(15,833,367)	(67,886,082)
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	150,664,386	173,592,612	173,592,612
22. Net income (from Line 20)	10,911,260	(15,833,367)	(67,886,082)
23. Net transfers (to) from Protected Cell accounts	0	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$	316,216	2,645,937	(3,031,350)
25. Change in net unrealized foreign exchange capital gain (loss)	(715,511)	712,761	5,146,261
26. Change in net deferred income tax	(6,094,046)	2,872,080	3,356,660
27. Change in nonadmitted assets	6,811,000	1,619,420	22,574,607
28. Change in provision for reinsurance	0	0	0
29. Change in surplus notes	0	0	0
30. Surplus (contributed to) withdrawn from protected cells	0	0	0
31. Cumulative effect of changes in accounting principles	0	0	0
32. Capital changes:			
32.1 Paid in	0	0	0
32.2 Transferred from surplus (Stock Dividend)	0	0	0
32.3 Transferred to surplus	0	0	0
33. Surplus adjustments:			
33.1 Paid in	0	0	0
33.2 Transferred to capital (Stock Dividend)	0	0	0
33.3 Transferred from capital	0	0	0
34. Net remittances from or (to) Home Office	0	0	0
35. Dividends to stockholders	0	0	0
36. Change in treasury stock	0	0	0
37. Aggregate write-ins for gains and losses in surplus	3,398,947	2,236,485	16,911,678
38. Change in surplus as regards policyholders (Lines 22 through 37)	14,627,866	(5,746,684)	(22,928,226)
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	165,292,252	167,845,928	150,664,386
DETAILS OF WRITE-INS			
0501.	0	0	0
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0
1401. Other income	2,292,184	5,737,232	8,118,015
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	2,292,184	5,737,232	8,118,015
3701. Provision for uncollectible reinsurance	3,398,947	2,236,485	16,911,678
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0	0
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)	3,398,947	2,236,485	16,911,678

CASH FLOW

	1 Current Year To Date	2 Prior Year Ended December 31
Cash from Operations		
1. Premiums collected net of reinsurance.....	10,195,220	42,446,084
2. Net investment income	12,907,209	67,565,430
3. Miscellaneous income	1,337,554	9,682,628
4. Total (Lines 1 to 3)	24,439,983	119,694,142
5. Benefits and loss related payments	57,257,295	242,014,407
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	41,676,488	189,036,101
8. Dividends paid to policyholders	(1,027,266)	(12,474,173)
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	(3,059,075)
10. Total (Lines 5 through 9)	97,906,517	415,517,260
11. Net cash from operations (Line 4 minus Line 10)	(73,466,534)	(295,823,118)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	169,326,033	707,352,244
12.2 Stocks	0	42,316,522
12.3 Mortgage loans	0	0
12.4 Real estate	0	4,015,225
12.5 Other invested assets	146,199	18,496,500
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	12,921	(673,404)
12.7 Miscellaneous proceeds	11,400,000	10,000
12.8 Total investment proceeds (Lines 12.1 to 12.7)	180,885,153	771,517,087
13. Cost of investments acquired (long-term only):		
13.1 Bonds	164,508,351	458,658,498
13.2 Stocks	0	16,324,000
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	840,000
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	164,508,351	475,822,498
14. Net increase (or decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	16,376,802	295,694,589
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	0	0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	(16,106,797)	24,911,100
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(16,106,797)	24,911,100
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(73,196,529)	24,782,571
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	155,761,516	130,978,945
19.2 End of period (Line 18 plus Line 19.1)	82,564,987	155,761,516

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

No change.

2. ACCOUNTING CHANGES AND CORRECTION OF ERRORS

No change.

3. BUSINESS COMBINATIONS AND GOODWILL

No change.

4. DISCONTINUED OPERATIONS

No change.

5. INVESTMENTS

No change.

6. JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

No change.

7. INVESTMENT INCOME

No change.

8. DERIVATIVE INSTRUMENTS

No change.

9. INCOME TAXES

A. The components of the Company's net deferred tax asset are as follows:

		March 31, 2008		December 31, 2007
		(in thousands)		
Total of gross deferred tax assets	\$	704,335		710,429
Total of deferred tax liabilities		(5,383)		(5,383)
Net deferred tax asset		698,952		705,046
Deferred tax asset nonadmitted		(698,952)		(705,046)
Net admitted deferred tax asset		0		0
Decrease in nonadmitted asset	\$	6,094		

C2. The change in net deferred income taxes is comprised of the following:

		March 31, 2008		December 31, 2007		Change
		(in thousands)				
Total deferred tax assets	\$	704,335		710,429	\$	(6,094)
Total deferred tax liabilities		(5,383)		(5,383)		0
Net deferred tax asset	\$	698,952		705,046		(6,094)
Tax effect of unrealized gains (losses)						0
Changes in net deferred income tax					\$	(6,094)

NOTES TO FINANCIAL STATEMENTS

- D. The provision for Federal and foreign income taxes incurred plus the change in deferred income taxes is different from that which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

		March 31, 2008
		(in thousands)
Provision computed at statutory rate	\$	3,692
Receivables		2,051
Loss carryforwards		(11)
Total	\$	5,732
Federal and foreign income taxes incurred	\$	(362)
Change in net deferred income taxes		6,094
Total statutory income taxes	\$	5,732

- F. No change.

10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES

No change.

11. DEBT

No change.

12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

No change.

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

Each payment of interest on and repayment of principal of the surplus notes issued by the Company in 1996 and 1997 may be made only with the prior approval of the Director of the Illinois Department of Financial and Professional Regulation – Division of Insurance (the “Division of Insurance”), which approval will only be granted if, in the judgment of the Director, the financial condition of the Company warrants the making of such payments and the Company's policyholders' surplus reflects sufficient funds to cover the amount of such payment. All payments of interest scheduled since January 1, 2003 have not been paid due to disapprovals by the Director based on the Company's financial condition. The cumulative amount of interest that was scheduled to be paid but is unpaid, plus the amount otherwise accruing in the first quarter of 2008 for which scheduled interest payment dates have not yet arrived, totaled \$325,750,000 as of March 31, 2008. In accordance with statutory accounting principles, this total amount is not reflected as a liability on the Company's statutory statement of assets, liabilities, surplus and other funds as of March 31, 2008. On May 9, 2008, the Division of Insurance disapproved the payments of interest due on June 1, 2008 and July 1, 2008 (and all previously disapproved interest payments) on the \$400,000,000 9.15% Surplus Notes due on July 1, 2026, the \$200,000,000 8.30% Surplus Notes due on December 1, 2037, and the \$100,000,000 8.45% Surplus Notes due on December 1, 2097.

14. CONTINGENCIES

No change.

15. LEASES

No change.

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

No change.

NOTES TO FINANCIAL STATEMENTS

17. **SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES**
No change.
18. **GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS**
No change.
19. **DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS**
No change.
20. **OTHER ITEMS**
No change.
21. **EVENTS SUBSEQUENT**
No change.
22. **REINSURANCE**
No change.
23. **RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION**
No change.
24. **CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES**
No change.
25. **INTERCOMPANY POOLING ARRANGEMENTS**
No change.
26. **STRUCTURED SETTLEMENTS**
No change.
27. **HEALTH CARE RECEIVABLES**
No change.
28. **PARTICIPATING POLICIES**
No change.
29. **PREMIUM DEFICIENCY RESERVES**
No change.
30. **HIGH DEDUCTIBLE**
No change.
31. **DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES OR UNPAID LOSS ADJUSTMENT EXPENSE**
No change.
32. **ASBESTOS/ENVIRONMENTAL RESERVES**
No change.
33. **SUBSCRIBER SAVINGS ACCOUNT**
No change.
34. **MULTIPLE PERIL CROP INSURANCE**
No change.

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since the prior year end unless otherwise noted.)

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
If not previously filed, furnish herewith a certified copy of the instrument as amended.
3. Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
If yes, complete the Schedule Y - Part 1 - organizational chart.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [] NA [X]
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2005
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2005
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 07/11/2007
- 6.4 By what department or departments?
Illinois.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [X] No [] NA []
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] NA []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [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 below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the 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

GENERAL INTERROGATORIES

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?..... Yes No
- (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.

9.11 If the response to 9.1 is No, please explain:

9.2 Has the code of ethics for senior managers been amended?..... Yes No

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

9.3 Have any provisions of the code of ethics been waived for any of the specified officers?..... Yes No

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

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?..... Yes No

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

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes No

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$5,315,221

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

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes No

14.2 If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$	\$
14.22 Preferred Stock	\$	\$
14.23 Common Stock	\$59,677,331	\$59,463,587
14.24 Short-Term Investments	\$	\$
14.25 Mortgage Loans on Real Estate	\$	\$
14.26 All Other	\$5,315,221	\$5,315,221
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$64,992,552	\$64,778,808
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes No

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

GENERAL INTERROGATORIES

16. Excluding items in Schedule E, 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 3, III Conducting Examinations, G - Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes No

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

1 Name of Custodian(s)	2 Custodian Address
BNY Midwest Trust Company.....	209 W. Jackson Blvd., Suite 800, Chicago, IL 60606...

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

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

16.3 Have there been any changes, including name changes in the custodian(s) identified in 16.1 during the current quarter?

Yes No

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

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

16.5 Identify all investment advisors, brokers/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	2 Name(s)	3 Address
109875.....	Asset Allocation & Management Company, L.L.C.....	30 North LaSalle St., 35th Floor, Chicago, IL 60602.....

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

Yes No

17.2 If no, list exceptions:

.....

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted.)

PART 2

PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [] No [X] NA []
 If yes, attach an explanation.
2. Has the 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 the risk, or portion thereof, reinsured? Yes [] No [X]
 If yes, attach an explanation.
- 3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [] No [X]
- 3.2 If yes, give full and complete information thereto.

- 4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see annual statement instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? Yes [X] No []
- 4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Discount Rate	TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 TOTAL	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 TOTAL
1.Homeowners/Farmowners.....		4.200			216,417	216,417			(4,264)	(4,264)
2.Private Passenger Auto Liability.....		4.200			651,606	651,606			(12,837)	(12,837)
3.Commercial Auto Liability.....		4.200			11,477,422	11,477,422			(237,642)	(237,642)
4.Workers Compensation.....		4.200			158,393,595	158,393,595			(28,566,711)	(28,566,711)
5.Commercial Multiple Peril.....		4.200			16,134,730	16,134,730			(328,586)	(328,586)
6.Medical Malpractice-Occurrence.....		4.200			62,570	62,570			(1,233)	(1,233)
7.Medical Malpractice-Claims Made.....		4.200			87,463	87,463			(1,725)	(1,725)
8.Special Liability.....		4.200			675,916	675,916			(7,662)	(7,662)
9.Other Liability-Occurrence.....		4.200			39,870,270	39,870,270			(893,974)	(893,974)
10.Other Liability-Claims Made.....		4.200			9,023,783	9,023,783			(160,348)	(160,348)
11.Special Property.....		4.200			(112,652)	(112,652)			(9,141)	(9,141)
12.Auto Physical Damage.....		4.200			(6,334)	(6,334)			126	126
13.Fidelity/Surety.....		4.200			2,342,269	2,342,269			(10,680)	(10,680)
14.Other.....		4.200			80,768	80,768			(1,590)	(1,590)
17.Reinsurance Nonproportional Assumed Liability.....		4.200			13,615,809	13,615,809			(285,009)	(285,009)
19.Products Liability - Occurrence.....		4.200			15,012,984	15,012,984			(1,608,176)	(1,608,176)
20.Products Liability - Claims Made.....		4.200			5,478	5,478			5,478	5,478
TOTAL			0	0	267,532,094	267,532,094	0	0	(32,123,974)	(32,123,974)

SCHEDULE F—CEDED REINSURANCE

Showing all new reinsurers - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Name of Reinsurer	4 Location	5 Is Insurer Authorized? (Yes or No)
		AFFILIATES		
		US INSURERS		
		POOLS AND ASSOCIATIONS		
		ALL OTHER INSURERS		
NONE				

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

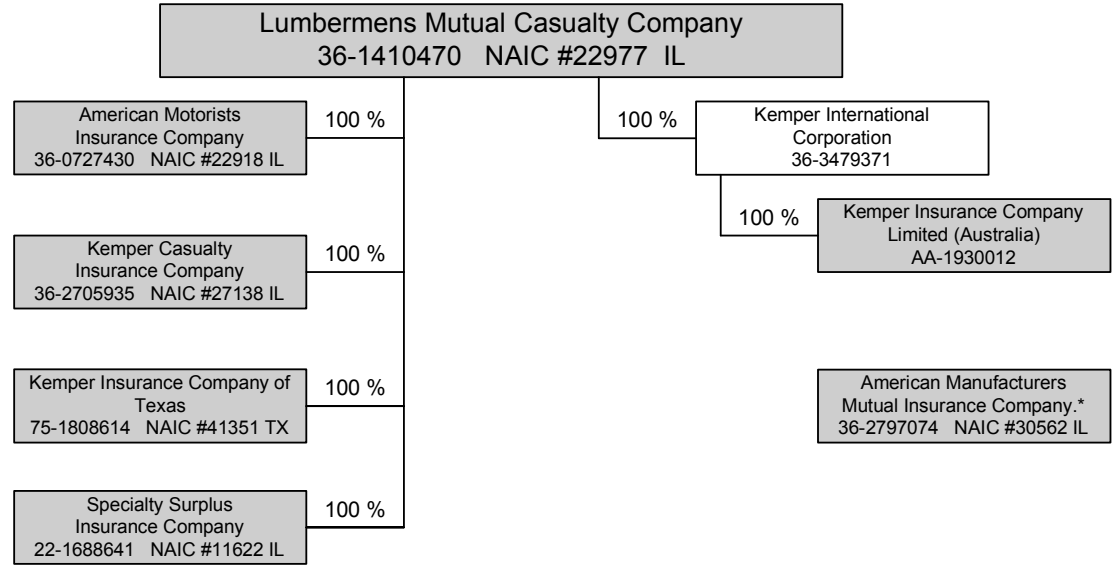
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

	1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid		
		2	3	4	5	6	7	
States, etc.	Active Status	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	
1. Alabama	AL	L	(1,903)	(1,539)	180,311	286,147	8,449,900	9,280,453
2. Alaska	AK	L	16	(42)	917,220	80,959	1,094,217	1,337,744
3. Arizona	AZ	L	(14,882)	(33,412)	253,664	681,440	13,119,717	9,090,483
4. Arkansas	AR	L	14	0	(1,451,073)	1,719,974	3,564,846	4,502,268
5. California	CA	L	1,362	(233,843)	6,160,051	22,188,744	77,056,814	92,140,748
6. Colorado	CO	L	(301)	(45,832)	125,297	217,213	2,438,647	2,431,305
7. Connecticut	CT	L	8,957	21,283	316,057	2,637,610	12,744,290	18,518,943
8. Delaware	DE	L	17,630	2,441	112,745	56,351	2,387,543	2,109,229
9. District of Columbia	DC	L	(1,627)	(669)	157,439	224,472	5,505,500	5,944,034
10. Florida	FL	N	(36,376)	14,843	311,473	6,810,376	19,004,383	27,263,769
11. Georgia	GA	L	4,547	(37,996)	8,324,000	207,243	36,575,694	34,504,553
12. Hawaii	HI	L	5,680	26,821	119,345	197,548	2,238,141	2,196,451
13. Idaho	ID	L	75	44	(16,540)	7,954	5,932	(52,845)
14. Illinois	IL	L	319	(538,793)	1,491,603	(5,584,533)	45,535,038	42,640,262
15. Indiana	IN	L	(60,807)	17,075	1,856,908	373,000	5,153,143	7,054,493
16. Iowa	IA	L	130,953	28,625	58,922	200,581	2,071,657	2,546,275
17. Kansas	KS	L	(11,080)	(8,933)	19,809	94,974	2,278,775	2,158,867
18. Kentucky	KY	L	(6,743)	(4,009)	376,978	205,088	18,406,548	14,907,648
19. Louisiana	LA	L	(202)	(19,081)	(34,383)	72,727	2,966,259	7,392,631
20. Maine	ME	L	158	(11,380)	(48,452)	12,049	163,426	140,218
21. Maryland	MD	L	4,821	16,418	1,370,574	654,811	20,382,365	20,694,593
22. Massachusetts	MA	L	13,228	191,499	952,220	758,003	23,696,126	20,700,496
23. Michigan	MI	L	8,497	139,177	448,193	522,154	19,270,106	10,323,908
24. Minnesota	MN	L	(394)	(18,500)	259,495	315,722	7,825,635	9,705,940
25. Mississippi	MS	L	7	(437)	32,409	95,732	594,696	3,533,811
26. Missouri	MO	L	65,430	457	325,205	234,884	3,745,631	3,865,344
27. Montana	MT	L	80	133	72,461	21,395	(521,473)	502,963
28. Nebraska	NE	L	(46)	(333)	143,109	27,306	1,754,695	1,726,059
29. Nevada	NV	L	6,919	26,514	206,582	112,379	2,070,725	3,709,289
30. New Hampshire	NH	L	606	(165)	97,164	100,986	3,011,762	2,875,837
31. New Jersey	NJ	L	(245,090)	(28,559)	3,792,887	2,034,608	52,608,231	56,095,529
32. New Mexico	NM	L	(340)	(2,222)	(139,607)	138,660	480,702	353,123
33. New York	NY	L	6,395	19,069	19,323,472	12,336,688	90,542,311	168,391,292
34. North Carolina	NC	L	(337)	(699,453)	461,493	560,449	10,349,064	10,912,319
35. North Dakota	ND	L	47	0	725	(6,000)	(1,523)	209,467
36. Ohio	OH	L	(65)	764	361,160	1,919,361	15,508,595	20,210,638
37. Oklahoma	OK	L	0	608,780	1,600	48,616	2,174,388	1,318,826
38. Oregon	OR	L	(238)	(19,477)	623,514	105,293	5,417,198	5,930,005
39. Pennsylvania	PA	L	19,009	7,215	1,352,556	2,637,672	21,012,588	23,460,301
40. Rhode Island	RI	L	(540)	85,818	145,119	82,796	6,300,417	5,363,776
41. South Carolina	SC	L	(12,216)	(4,595)	319,756	1,046,123	10,992,361	14,355,715
42. South Dakota	SD	L	(228)	11	2,015	4,437	615,147	376,883
43. Tennessee	TN	L	(542)	9,711	133,055	701,739	11,383,882	10,902,210
44. Texas	TX	L	(99,060)	31,314	1,180,563	89,647	77,830,358	85,328,745
45. Utah	UT	L	51	(14,771)	51,623	(25,468)	375,451	465,375
46. Vermont	VT	L	432	564	120,954	49,869	572,817	821,078
47. Virginia	VA	L	5,731	2,280	307,013	684,546	7,481,489	6,862,207
48. Washington	WA	L	(10,029)	443	765,545	2,359,764	12,480,446	11,794,445
49. West Virginia	WV	L	(1)	(24)	(25,277)	9,407	133,219	29,753
50. Wisconsin	WI	L	(297,864)	357,778	1,160,318	610,759	11,100,135	7,470,990
51. Wyoming	WY	L	(6)	10	3,078	12,119	195,995	189,134
52. American Samoa	AS	N	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	(22,504)	538,343	763,277	1,114,535
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0
56. Northern Mariana Islands	MP	L	0	0	0	0	0	0
57. Canada	CN	L	(72,446)	2,810	12,743	0	26,772,065	20,224,943
58. Aggregate Other Alien	OT	XXX	53	(242,981)	3,128	712,075	(15,448,778)	2,630,042
59. Totals	(a)	51	(572,346)	(355,149)	53,073,715	60,184,792	692,230,573	818,557,100
DETAILS OF WRITE-INS								
5801. Asia	XXX		0	0	3,128	702,713	468,925	987,878
5802. Australia	XXX		0	0	0	0	(16,412,997)	(6,587)
5803. Europe	XXX		(721)	(721)	0	9,474	506,588	1,908,227
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX		53	(242,260)	0	(112)	(11,294)	(259,476)
5899. Totals (Lines 5801 through 5803 plus 5898) (Line 58 above)	XXX		53	(242,981)	3,128	712,075	(15,448,778)	2,630,042

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

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



* American Manufacturers Mutual Insurance Company is an affiliated mutual company.
Insurers are identified by shaded boxes. Percentages show common stock ownership as of 3/31/2008.

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire	581	7,323	1,260.4	(34.8)
2. Allied Lines	386	(32)	(8.3)	59.2
3. Farmowners multiple peril			0.0	0.0
4. Homeowners multiple peril	38	1,043	2,744.7	0.0
5. Commercial multiple peril	(90,643)	17,276	(19.1)	17.9
6. Mortgage guaranty			0.0	0.0
8. Ocean marine		252	0.0	0.0
9. Inland marine	26	3	11.5	132.8
10. Financial guaranty			0.0	0.0
11.1 Medical malpractice - occurrence		39	0.0	0.0
11.2 Medical malpractice - claims-made		1,725	0.0	0.0
12. Earthquake		(26)	0.0	0.0
13. Group accident and health		903,663	0.0	0.0
14. Credit accident and health			0.0	0.0
15. Other accident and health		1,548	0.0	18.4
16. Workers' compensation	(615,566)	(10,115,685)	1,643.3	(863.6)
17.1 Other liability - occurrence	(68,117)	503,659	(739.4)	(173,891.8)
17.2 Other liability - claims-made	198,337	154,865	78.1	(1,787.5)
18.1 Products liability - occurrence	73,815	1,243,110	1,684.1	(45,334.3)
18.2 Products liability - claims-made		(5,478)	0.0	0.0
19.1,19.2 Private passenger auto liability		3,918	0.0	88,047.6
19.3,19.4 Commercial auto liability	(3,522)	179,699	(5,102.2)	1,056.0
21. Auto physical damage		(1,807)	0.0	190.3
22. Aircraft (all perils)	(212)	8,739	(4,122.2)	0.0
23. Fidelity		24	0.0	0.0
24. Surety	115,123	(206,692)	(179.5)	(512.8)
26. Burglary and theft			0.0	0.0
27. Boiler and machinery		(108)	0.0	0.0
28. Credit		6	0.0	0.0
29. International			0.0	0.0
30. Warranty		104,300	0.0	0.0
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business	0	0	0.0	0.0
35. TOTALS	(389,754)	(7,198,636)	1,847.0	(3,858.7)
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0.0	0.0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire	(85)	(85)	0
2. Allied Lines	(187)	(187)	0
3. Farmowners multiple peril	0	0	0
4. Homeowners multiple peril	0	0	0
5. Commercial multiple peril	0	0	0
6. Mortgage guaranty	0	0	0
8. Ocean marine	0	0	0
9. Inland marine	0	0	502
10. Financial guaranty	0	0	0
11.1 Medical malpractice - occurrence	0	0	0
11.2 Medical malpractice - claims-made	0	0	0
12. Earthquake	0	0	0
13. Group accident and health	0	0	0
14. Credit accident and health	0	0	0
15. Other accident and health	0	0	12,372
16. Workers' compensation	(615,569)	(615,569)	(527,247)
17.1 Other liability - occurrence	(68,091)	(68,091)	(2,666)
17.2 Other liability - claims-made	(3,000)	(3,000)	10,645
18.1 Products liability - occurrence	69,339	69,339	(7,353)
18.2 Products liability - claims-made	0	0	0
19.1,19.2 Private passenger auto liability	0	0	0
19.3,19.4 Commercial auto liability	(3,522)	(3,522)	18,786
21. Auto physical damage	0	0	(913)
22. Aircraft (all perils)	(212)	(212)	0
23. Fidelity	0	0	0
24. Surety	48,981	48,981	141,446
26. Burglary and theft	0	0	0
27. Boiler and machinery	0	0	0
28. Credit	0	0	(721)
29. International	0	0	0
30. Warranty	0	0	0
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business	0	0	0
35. TOTALS	(572,346)	(572,346)	(355,149)
DETAILS OF WRITE-INS			
3401.			
3402.			
3403.			
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2008 Loss and LAE Payments on Claims Reported as of Prior Year-End	2008 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2008 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11 + 12)
1. 2005 + Prior	1,299,783	(71,679)	1,228,104	82,768	1,927	84,695	1,239,475	7,435	(135,909)	1,111,001	22,460	(54,868)	(32,408)
2. 2006	756	5,453	6,209	23		23	1,208		(2,899)	(1,691)	475	(8,352)	(7,877)
3. Subtotals 2006 + Prior	1,300,539	(66,226)	1,234,313	82,791	1,927	84,718	1,240,683	7,435	(138,808)	1,109,310	22,935	(63,220)	(40,285)
4. 2007	784	2,300	3,084	67		67	478		32,143	32,621	(239)	29,843	29,604
5. Subtotals 2007 + Prior	1,301,323	(63,926)	1,237,397	82,858	1,927	84,785	1,241,161	7,435	(106,665)	1,141,931	22,696	(33,377)	(10,681)
6. 2008	XXX	XXX	XXX	XXX	241	241	XXX	106	3,401	3,507	XXX	XXX	XXX
7. Totals	1,301,323	(63,926)	1,237,397	82,858	2,168	85,026	1,241,161	7,541	(103,264)	1,145,438	22,696	(33,377)	(10,681)
8. Prior Year-End's Surplus As Regards Policyholders	150,664										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1. 1.7	2. 52.2	3. (0.9)
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4. (7.1)

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

RESPONSE

- | | |
|---|---------------|
| 1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? |NO..... |
| 2. Will Supplement A to Schedule T (Medical Malpractice Supplement) be filed with this statement? |YES..... |
| 3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? |NO..... |

Explanation:

1.
3.

Bar Code:



OVERFLOW PAGE FOR WRITE-INS

PQ002 Additional Aggregate Lines for Page 02 Line 23.

*ASSETS

	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
2304. Other admitted assets.....	79,401,249	9,092,145	70,309,104	71,696,960
2305.	0	0	0	0
2397. Summary of remaining write-ins for Line 23 from Page 02	79,401,249	9,092,145	70,309,104	71,696,960

PQ010 Additional Aggregate Lines for Page 10 Line 58.

*SCT

	1	2	3	4	5	6	7
	Active Status	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date
5804. Central & South America.....	.XXX		0		0	(11,178)	(256,236)
5805. Africa.....	.XXX	53	(242,260)		(112)	(116)	(3,240)
5897. Summary of remaining write-ins for Line 58 from Page 10	.XXX	53	(242,260)	0	(112)	(11,294)	(259,476)

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	4,172,747
2. Cost of acquired:		
2.1 Actual cost at time of acquisitions		
2.2 Additional investment made after acquisitions		
3. Current year change in encumbrances		0
4. Total gain (loss) on disposals		(63,775)
5. Deduct amounts received on disposals		4,015,225
6. Total foreign exchange change in book/adjusted carrying value		0
7. Deduct current year's other than temporary impairment recognized		93,747
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amount		0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
NONE		
1. Book value/recorded investment excluding accrued interest receivable at prior year end	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisitions		0
2.2 Additional investment made after acquisitions		0
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		0
7. Deduct amounts received on disposals		0
8. Deduct amortization of premium and mortgage interest points and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other than temporary impairment recognized		0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Deduct total nonadmitted accounts		0
13. Statement value at end of current period (Line 11 minus Line 12)	0	0

SCHEDULE BA - VERIFICATION

Other Long Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	6,171,061	28,898,383
2. Cost of acquired:		
2.1 Actual cost at time of acquisitions		840,000
2.2 Additional investment made after acquisitions		0
3. Capitalized deferred interest and other		
4. Accrual of discount	119,699	245,925
5. Unrealized valuation increase (decrease)		(6,026,820)
6. Total gain (loss) on disposals		710,073
7. Deduct amounts received on disposals	146,199	18,496,500
8. Deduct amortization of premium and depreciation		0
9. Total foreign exchange change in book/adjusted carrying value		0
10. Deduct current year's other than temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	6,144,561	6,171,061
12. Deduct total nonadmitted amounts		0
13. Statement value at end of current period (Line 11 minus Line 12)	6,144,561	6,171,061

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,205,289,111	1,482,155,699
2. Cost of bonds and stocks acquired	164,508,351	474,982,498
3. Accrual of discount	916,875	3,576,895
4. Unrealized valuation increase (decrease)	(603,164)	1,658,898
5. Total gain (loss) on disposals	959,808	105,050
6. Deduct consideration for bonds and stocks disposed of	169,326,033	749,668,765
7. Deduct amortization of premium	1,035,911	3,864,312
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	3,656,851
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	1,200,709,037	1,205,289,111
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	1,200,709,037	1,205,289,111

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

SCHEDULE D - PART 1B

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

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1 (a).....	1,270,489,167	414,115,623	486,233,705	208,346	1,198,579,432	0	0	1,270,489,167
2. Class 2 (a).....	17,105,282	0	5,027,919	(6,745)	12,070,618	0	0	17,105,282
3. Class 3 (a).....	0	0	0	0	0	0	0	0
4. Class 4 (a).....	0	0	0	0	0	0	0	0
5. Class 5 (a).....	0	0	0	0	0	0	0	0
6. Class 6 (a).....	2,455,367	0	232,727	(371,637)	1,851,003	0	0	2,455,367
7. Total Bonds	1,290,049,817	414,115,623	491,494,351	(170,036)	1,212,501,052	0	0	1,290,049,817
PREFERRED STOCK								
8. Class 1.....	0	0	0	0	0	0	0	0
9. Class 2.....	0	0	0	0	0	0	0	0
10. Class 3.....	0	0	0	0	0	0	0	0
11. Class 4.....	0	0	0	0	0	0	0	0
12. Class 5.....	0	0	0	0	0	0	0	0
13. Class 6.....	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	1,290,049,817	414,115,623	491,494,351	(170,036)	1,212,501,052	0	0	1,290,049,817

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

S102

SCHEDULE DA - PART 1**Short-Term Investments Owned End of Current Quarter**

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
8299999 Totals	74,006,999	XXX	73,768,092	162,794	0

SCHEDULE DA - VERIFICATION**Short-Term Investments**

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	146,965,401	114,732,314
2. Cost of short-term investments acquired	249,607,272	817,094,784
3. Accrual of discount.....	321,104	1,579,502
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	7,039	(4)
6. Deduct consideration received on disposals.....	322,892,271	786,432,663
7. Deduct amortization of premium.....	1,546	8,531
8. Total foreign exchange change in book/adjusted carrying value.....		0
9. Deduct current year's other than temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	74,006,999	146,965,401
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	74,006,999	146,965,401

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

SCHEDULE E-VERIFICATION

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	241,815	29,371,289
2. Cost of cash equivalents.....	0	4,378,568
3. Accrual of discount.....	1,079	60,200
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	0	0
6. Deduct consideration received on disposals.....	242,894	33,565,000
7. Deduct amortization of premium.....	0	3,241
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	0	241,815
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	0	241,815

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED During the Current Quarter

1 CUSIP Identification	2 Name or Description	Location		5 Name of Vendor or General Partner	6 NAIC Designation	7 Date Originally Acquired	8 Type and Strategy	9 Actual Cost at Time of Acquisition	10 Additional Investment Made After Acquisition	11 Amount of Encumbrances	12 Commitment for Additional Investment	13 Percentage of Ownership
		3 City	4 State									
NONE												
3999999 – Total Unaffiliated								0	0	0	0	XXX
4099999 – Total Affiliated								0	0	0	0	XXX
4199999 Totals								0	0	0	0	XXX

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets **DISPOSED, Transferred or Repaid** During the Current Quarter

1 CUSIP Identification	2 Name or Description	3 Location		5 Name of Purchaser or Nature of Disposal	6 Date Originally Acquired	7 Disposal Date	8 Book/Adjusted Carrying Value Less Encumbrances, Prior Year	Change in Book/Adjusted Carrying Value					15 Book/Adjusted Carrying Value Less Encumbrances on Disposal	16 Consideration	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Investment Income	
		3 City	4 State					9 Unrealized Valuation Increase (Decrease)	10 Current Year's (Depreciation) or (Amortization)/ Accretion	11 Current Year's Other Than Temporary Impairment Recognized	12 Capitalized Deferred Interest and Other	13 Total Change in B./A.C.V. (9+10-11+12)							14 Total Foreign Exchange Change in B./A.C.V.
000000-00-0	Community Eldercare Svcs, LLC 5% Nt 09/30/2010 Par = \$1,566,818	Tupelo	MS	Paydown	07/31/2007	02/29/2008	68,186		78,013				78,013		146,199	146,199		0	78,622
	0799999 - Fixed or Variable Rate - Bonds - Unaffiliated						68,186		78,013				78,013		146,199	146,199			78,622
	3999999 - Total Unaffiliated						68,186	0	78,013	0	0	0	78,013	0	146,199	146,199	0	0	78,622
	4099999 - Total Affiliated						0	0	0	0	0	0	0	0	0	0	0	0	0
	4199999 Totals						68,186	0	78,013	0	0	0	78,013	0	146,199	146,199	0	0	78,622

E03.1

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
977100-AP-1	WISCONSIN ST GEN REV		03/20/2008	CITIGROUP		4,400,000	4,400,000	0	1FE
977100-AQ-9	WISCONSIN ST GEN REV		03/20/2008	CITIGROUP		7,000,000	7,000,000	0	1FE
3199999 - Total	Bonds - Special Revenue					11,400,000	11,400,000	0	XXX
084670-C@-5	BERKSHIRE HATHAWAY, INC. BOND		03/31/2008	VARIOUS		37,175,515	37,175,515	0	1
161505-DK-5	CCMSC 1999-2 A2		02/06/2008	GOLDMAN SACHS & CO		22,838,142	22,132,663	44,253	1FE
201728-DP-4	CMAC 1998-C2		02/13/2008	GOLDMAN SACHS & CO		4,994,531	5,000,000	16,319	1FE
23322B-DA-3	DLJCM 1998-CF2 A2		03/07/2008	MERRILL LYNCH		6,000,000	6,000,000	11,880	1FE
23322B-DB-1	DLJCM 1998-CF2 A3		03/07/2008	MERRILL LYNCH		4,850,000	4,850,000	9,855	1FE
337366-AG-3	FUNCM 1999-C2 E		02/28/2008	MERRILL LYNCH		4,068,750	4,000,000	2,382	1FE
361849-EW-8	GMACC 1999-C1 D		01/28/2008	MERRILL LYNCH		17,280,898	17,000,000	99,915	1FE
44924E-AB-6	IBM INTL GROUP CAPITAL		03/26/2008	BARCLAYS BANK		10,444,300	10,000,000	223,042	1FE
501773-CE-3	LBCMT 1998-C4 D		02/25/2008	VARIOUS		20,254,675	20,110,014	106,221	1FE
57117P-AD-6	MLR 2006-1A A3		02/27/2008	JP MORGAN SECURITIES		6,532,500	6,500,000	17,355	1FE
92344G-AL-0	VERIZON GLOBAL FDG CORP		03/26/2008	BANK OF AMERICA		8,325,240	7,700,000	186,083	1FE
949746-NW-7	WELLS FARGO COMPANY		03/26/2008	JP MORGAN SECURITIES		10,343,800	10,000,000	230,417	1FE
4599999 - Total	Bonds - Industrial, Misc.					153,108,351	150,468,192	947,721	XXX
6099997 - Total	Bonds - Part 3					164,508,351	161,868,192	947,721	XXX
6099999 - Total	Bonds					164,508,351	161,868,192	947,721	XXX
6599999 - Total	Preferred Stocks					0	XXX	0	XXX
7299999 - Total	Common Stocks					0	XXX	0	XXX
7399999 - Total	Preferred and Common Stocks					0	XXX	0	XXX
7499999 - Totals						164,508,351	XXX	947,721	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

E04

STATEMENT AS OF MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Maturity Date	NAIC Designation or Market Indicator (a)
6099999	Total - Bonds					169,326,033	167,058,756	169,553,880	168,393,294	0	(81,748)	0	(81,748)	0	168,366,225	0	959,808	959,808	2,102,734	XXX	XXX
6599999	Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
91338#-10-8	UNIVERSAL BONDING HOLDING CO INC.		02/01/2008	DISSOLUTION	366,350,000	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6999999	Common Stocks - Parent, Subsidiaries and Affiliates					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
7299997	Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
7299999	Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
7399999	Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
7499999 Totals						169,326,033	XXX	169,553,880	168,393,294	0	(81,748)	0	(81,748)	0	168,366,225	0	959,808	959,808	2,102,734	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

E05.1

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule E - Part 2 - Cash Equivalents

NONE



SUPPLEMENT FOR MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

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

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

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama AL								
2. Alaska AK								
3. Arizona AZ								
4. Arkansas AR								
5. California CA								
6. Colorado CO								
7. Connecticut CT								
8. Delaware DE								
9. District of Columbia DC								
10. Florida FL								
11. Georgia GA								
12. Hawaii HI								
13. Idaho ID								
14. Illinois IL								
15. Indiana IN								
16. Iowa IA								
17. Kansas KS								
18. Kentucky KY								
19. Louisiana LA								
20. Maine ME								
21. Maryland MD								
22. Massachusetts MA								
23. Michigan MI								
24. Minnesota MN								
25. Mississippi MS								
26. Missouri MO								
27. Montana MT								
28. Nebraska NE								
29. Nevada NV								
30. New Hampshire NH								
31. New Jersey NJ								
32. New Mexico NM								
33. New York NY								
34. North Carolina NC								
35. North Dakota ND								
36. Ohio OH								
37. Oklahoma OK								
38. Oregon OR								
39. Pennsylvania PA								
40. Rhode Island RI								
41. South Carolina SC								
42. South Dakota SD								
43. Tennessee TN								
44. Texas TX								
45. Utah UT								
46. Vermont VT								
47. Virginia VA								
48. Washington WA								
49. West Virginia WV								
50. Wisconsin WI								
51. Wyoming WY								
52. American Samoa AS								
53. Guam GU								
54. Puerto Rico PR								
55. U.S. Virgin Islands VI								
56. Northern Mariana Islands MP								
57. Canada CN								
58. Aggregate other alien OT	0	0	0	0	0	0	0	0
59. Totals	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS								
5801.								
5802.								
5803.								
5898. Summary of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
5899. Totals (Lines 5801 thru 5803 plus 5898) (Line 58 above)	0	0	0	0	0	0	0	0

NONE



SUPPLEMENT FOR MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

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

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

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama AL								
2. Alaska AK								
3. Arizona AZ								
4. Arkansas AR								
5. California CA								
6. Colorado CO								
7. Connecticut CT								
8. Delaware DE								
9. District of Columbia DC								
10. Florida FL								
11. Georgia GA								
12. Hawaii HI								
13. Idaho ID								
14. Illinois IL								
15. Indiana IN								
16. Iowa IA								
17. Kansas KS								
18. Kentucky KY								
19. Louisiana LA								
20. Maine ME								
21. Maryland MD								
22. Massachusetts MA								
23. Michigan MI								
24. Minnesota MN								
25. Mississippi MS								
26. Missouri MO								
27. Montana MT								
28. Nebraska NE								
29. Nevada NV								
30. New Hampshire NH								
31. New Jersey NJ								
32. New Mexico NM								
33. New York NY								
34. North Carolina NC								
35. North Dakota ND								
36. Ohio OH								
37. Oklahoma OK								
38. Oregon OR								
39. Pennsylvania PA								
40. Rhode Island RI								
41. South Carolina SC								
42. South Dakota SD								
43. Tennessee TN								
44. Texas TX								
45. Utah UT								
46. Vermont VT								
47. Virginia VA								
48. Washington WA								
49. West Virginia WV								
50. Wisconsin WI								
51. Wyoming WY								
52. American Samoa AS								
53. Guam GU								
54. Puerto Rico PR								
55. U.S. Virgin Islands VI								
56. Northern Mariana Islands MP								
57. Canada CN								
58. Aggregate other alien OT	0	0	0	0	0	0	0	0
59. Totals	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS								
5801.								
5802.								
5803.								
5898. Summary of remaining write-ins from Line 58 from overflow page	0	0	0	0	0	0	0	0
5899. Totals (Lines 5801 thru 5803 plus 5898) (Line 58 above)	0	0	0	0	0	0	0	0

NONE



SUPPLEMENT FOR MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

Designate the type of health care providers reported on this page
Other Health Care Professionals

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

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama	AL				446	0		442
2. Alaska	AK				0	0		0
3. Arizona	AZ				8,419	0		8,397
4. Arkansas	AR				672	0		668
5. California	CA				25,918	0		25,805
6. Colorado	CO				5,011	0		4,999
7. Connecticut	CT				1,444	0		1,437
8. Delaware	DE				2,011	0		2,011
9. District of Columbia	DC				101	0		101
10. Florida	FL				13,148	0		13,146
11. Georgia	GA				3,007	0		2,994
12. Hawaii	HI				514	0		510
13. Idaho	ID				2,078	0		2,070
14. Illinois	IL				23,685	0		23,654
15. Indiana	IN				10,689	0		10,379
16. Iowa	IA				137,216	0		137,015
17. Kansas	KS				655	0		648
18. Kentucky	KY				560	0		559
19. Louisiana	LA				0	0		0
20. Maine	ME				792	0		790
21. Maryland	MD				637	0		632
22. Massachusetts	MA				1,219	0		1,217
23. Michigan	MI				7,217	0		7,157
24. Minnesota	MN				3,733	0		3,725
25. Mississippi	MS				206	0		202
26. Missouri	MO				8,346	0		7,331
27. Montana	MT				383	0		382
28. Nebraska	NE				336	0		334
29. Nevada	NV		20,000	1	7,036	0		843
30. New Hampshire	NH				1,228	0		1,221
31. New Jersey	NJ				1,966	0		1,958
32. New Mexico	NM				14,387	0		14,385
33. New York	NY				21,038	55,000	2	68,222
34. North Carolina	NC				1,137	0		1,135
35. North Dakota	ND				144	0		144
36. Ohio	OH				2,729	0		2,716
37. Oklahoma	OK				45,776	0		45,780
38. Oregon	OR		595,000	2	(431,822)	0		20,408
39. Pennsylvania	PA				7,977	0		7,918
40. Rhode Island	RI				56	0		56
41. South Carolina	SC				761	0		758
42. South Dakota	SD				127	0		126
43. Tennessee	TN				40,799	0		40,792
44. Texas	TX				3,066	0		3,049
45. Utah	UT				1,223	0		1,207
46. Vermont	VT				228	0		223
47. Virginia	VA				1,430	0		1,422
48. Washington	WA				21,990	0		21,937
49. West Virginia	WV				143	0		142
50. Wisconsin	WI				1,864	0		1,844
51. Wyoming	WY				36	0		36
52. American Samoa	AS							
53. Guam	GU							
54. Puerto Rico	PR							
55. U.S. Virgin Islands	VI							
56. Northern Mariana Islands	MP							
57. Canada	CN							
58. Aggregate other alien	OT	0	0	0	0	0	0	0
59. Totals	0	0	615,000	3	1,762	55,000	2	492,927
DETAILS OF WRITE-INS								
5801.								
5802.								
5803.								
5898. Summary of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
5899. Totals (Lines 5801 thru 5803 plus 5898) (Line 58 above)	0	0	0	0	0	0	0	0



SUPPLEMENT FOR MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

Designate the type of health care providers reported on this page
Other Health Care Facilities

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

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama AL								
2. Alaska AK								
3. Arizona AZ								
4. Arkansas AR								
5. California CA								
6. Colorado CO								
7. Connecticut CT								
8. Delaware DE								
9. District of Columbia DC								
10. Florida FL								
11. Georgia GA								
12. Hawaii HI								
13. Idaho ID								
14. Illinois IL								
15. Indiana IN								
16. Iowa IA								
17. Kansas KS								
18. Kentucky KY								
19. Louisiana LA								
20. Maine ME								
21. Maryland MD								
22. Massachusetts MA								
23. Michigan MI								
24. Minnesota MN								
25. Mississippi MS								
26. Missouri MO								
27. Montana MT								
28. Nebraska NE								
29. Nevada NV								
30. New Hampshire NH								
31. New Jersey NJ								
32. New Mexico NM								
33. New York NY								
34. North Carolina NC								
35. North Dakota ND								
36. Ohio OH								
37. Oklahoma OK								
38. Oregon OR								
39. Pennsylvania PA								
40. Rhode Island RI								
41. South Carolina SC								
42. South Dakota SD								
43. Tennessee TN								
44. Texas TX								
45. Utah UT								
46. Vermont VT								
47. Virginia VA								
48. Washington WA								
49. West Virginia WV								
50. Wisconsin WI								
51. Wyoming WY								
52. American Samoa AS								
53. Guam GU								
54. Puerto Rico PR								
55. U.S. Virgin Islands VI								
56. Northern Mariana Islands MP								
57. Canada CN								
58. Aggregate other alien OT	0	0	0	0	0	0	0	0
59. Totals	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS								
5801.								
5802.								
5803.								
5898. Summary of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
5899. Totals (Lines 5801 thru 5803 plus 5898) (Line 58 above)	0	0	0	0	0	0	0	0

NONE



SUPPLEMENT FOR MARCH 31, 2008 OF THE LUMBERMENS MUTUAL CASUALTY COMPANY

Designate the type of health care providers reported on this page
 Medical Malpractice Policies

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

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama AL								
2. Alaska AK								
3. Arizona AZ								
4. Arkansas AR								
5. California CA								
6. Colorado CO								
7. Connecticut CT								
8. Delaware DE								
9. District of Columbia DC								
10. Florida FL								
11. Georgia GA								
12. Hawaii HI								
13. Idaho ID								
14. Illinois IL								
15. Indiana IN								
16. Iowa IA								
17. Kansas KS								
18. Kentucky KY								
19. Louisiana LA								
20. Maine ME								
21. Maryland MD								
22. Massachusetts MA								
23. Michigan MI								
24. Minnesota MN								
25. Mississippi MS								
26. Missouri MO								
27. Montana MT								
28. Nebraska NE								
29. Nevada NV								
30. New Hampshire NH								
31. New Jersey NJ								
32. New Mexico NM								
33. New York NY								
34. North Carolina NC								
35. North Dakota ND								
36. Ohio OH								
37. Oklahoma OK								
38. Oregon OR								
39. Pennsylvania PA								
40. Rhode Island RI								
41. South Carolina SC								
42. South Dakota SD								
43. Tennessee TN								
44. Texas TX								
45. Utah UT								
46. Vermont VT								
47. Virginia VA								
48. Washington WA								
49. West Virginia WV								
50. Wisconsin WI								
51. Wyoming WY								
52. American Samoa AS								
53. Guam GU								
54. Puerto Rico PR								
55. U.S. Virgin Islands VI								
56. Northern Mariana Islands MP								
57. Canada CN								
58. Aggregate other alien OT	0	0	0	0	0	0	0	0
59. Totals	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS								
5801.								
5802.								
5803.								
5898. Summary of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
5899. Totals (Lines 5801 thru 5803 plus 5898) (Line 58 above)	0	0	0	0	0	0	0	0

NONE