

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

NAIC Group Code

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021 OF THE CONDITION AND AFFAIRS OF THE

The Hanover National Insurance Company

Code 0088 0088 NAIC Company Code 13147 Employer's ID Number 74-3242673

| Organized under the Laws of Country of Domicile | New Ha | | , State of Domicile or Port of E States of America | ntry | NH |
|--|--|--|---|--|--|
| | 09/21/2007 | | Commenced Business | | |
| Statutory Home Office | 4 Bedford Farms Dri | ve. Suite 107 | _ | Bedford, NH, US | |
| | (Street and Nu | | (City o | | ountry and Zip Code) |
| Main Administrative Office | | | Lincoln Street | | |
| W | orcester. MA. US 01653-0002 | (Stre | et and Number) | 508-853- | .7200 |
| | Town, State, Country and Zip C | ode) | · (/ | Area Code) (Telep | |
| Mail Address | 440 Lincoln Street | t . | , | Worcester, MA, U | IS 01653-0002 |
| | (Street and Number or P. | O. Box) | (City o | r Town, State, Co | ountry and Zip Code) |
| Primary Location of Books and | Records | | Lincoln Street | | |
| W | orcester, MA, US 01653-0002 | , | et and Number) | 508-853-7200 | 1-8557928 |
| | Town, State, Country and Zip C | | | Area Code) (Tele | |
| Internet Website Address | | www | .HANOVER.COM | | |
| Statutory Statement Contact | Dennis | M. Hazelwood | | 508-853 | -7200-8557928 |
| DHA | AZELWOOD@HANOVER.COM | (Name) | | (Area Code) (508-853- | Telephone Number) |
| 510 | (E-mail Address) | | | (FAX Nu | |
| | | C | OFFICERS | | |
| President _ | John Conne | | Vice President & Treasurer _ | N | athaniel William Clarkin # |
| Senior Vice President & Secretary | Charles Freder | ick Cronin | | | |
| Jeffrey Mark Farber, Execu Denise Maureen Lowsley, Warren Ellis Dennis Franci | son Barnes | Bryan James Salva DIRECTO | RS OR TRUSTEES | Mark Joseph | Lunn Lee #, Executive Vice President Welzenbach, Executive Vice President indsay France Greenfield # Willard Ty-Lunn Lee # |
| Denise Maur | | | n Conner Roche | | Bryan James Salvatore |
| State of | Massachusetts Worcester | SS | | | |
| all of the herein described ass statement, together with related condition and affairs of the said in accordance with the NAIC A rules or regulations require d respectively. Furthermore, the exact copy (except for formattir to the enclosed statement. | ets were the absolute property of exhibits, schedules and explain reporting entity as of the reporting entity as of the reporting entity as of the reporting in the reporting in the reporting not release of this attestation by the reporting entity of the reporting entity in the reporting entities and entities entitled in the reporting entities entitled in the reporting entities entitled entities entitled entitle | y of the said reporting nations therein contain ting period stated abound Accounting Practic ated to accounting pre described officers also filling) of the enclosed Charles | entity, free and clear from any liens led, annexed or referred to, is a full a ve, and of its income and deductions less and Procedures manual except tractices and procedures, according so includes the related correspondir statement. The electronic filing may | s or claims there and true statemer s therefrom for the to the extent that: g to the best of ng electronic filing | that on the reporting period stated above on, except as herein stated, and that this not of all the assets and liabilities and of the period ended, and have been completed (1) state law may differ; or, (2) that state their information, knowledge and belief gowith the NAIC, when required, that is any various regulators in lieu of or in addition. Nathan William Clarkin |
| Subscribed and sworn to before 2nd day of Jaime L. Hawley Notary December 14, 2023 | | Senior Vice | President & Secretary a. Is this an original filin b. If no, 1. State the amendm 2. Date filed | nent number | |



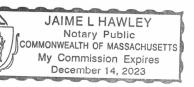




EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| | NAIC Group Code 0088 BUSINESS II | N THE STATE O | OF New Hamps | | IOMO AND | LUSSES | Clatatory | | RING THE YEAR | R 2021 | NAIC Com | pany Code 13 | 3147 |
|----------------|---|--|--|-------------------------------------|-------------------------------------|--|---------------------------|-------------------------|-----------------------------|---------------------------------|--|---------------------------|-----------------------------|
| | | Gross Premi Policy and Me Less Return Premiums on P | ums, Including embership Fees, Premiums and olicies not Taken | 3 Dividends Paid or Credited to | 4 | 5 | 6 | 7 | 8 Direct Defense and Cost | 9 Direct Defense and Cost | 10 Direct Defense and Cost Containment | 11 Commissions | 12 |
| | Line of Business | Direct Premiums Written | Direct Premiums Earned | Policyholders on Direct Business | Direct Unearned Premium Reserves | Direct Losses Paid (deducting salvage) | Direct Losses Incurred | Direct Losses Unpaid | Containment Expense Paid | Containment Expense Incurred | Expense Unpaid | and Brokerage Expenses | Taxes, Licenses and Fees |
| | Fire | 0 | 0 | 0 | 0 | 00 | 0 | 00 | 0 | 0 | 0 | 0 | 0 |
| | Allied lines | 0 | 0 | 0 | 0 | 0 | ļ | 0 | 0 | 0 | 0 | 0 | 0 |
| | Multiple peril crop | 0 | 0 | 0 | 0 | 0 | 0 |) | 0 | 0 | 0 | 0 | 0 |
| | Federal flood | 0 | 0 | 0 | | | 0 | | 0 | 0 | 0 | 0 | 0 |
| | Private crop | D | | 0 | | U | | , I | 0 | | | | U |
| | Private flood | | u | U | ν | V | | | | ν | ν | J | u |
| | Homeowners multiple peril | n | ν | υ | ν | ν | | | 0 | ν | Λ | | ν |
| | Commercial multiple peril (non-liability portion) | n | 0 | 0 | 0 | 0 | |) | 0 | Q | | n | 0 |
| | Commercial multiple peril (liability portion) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6. | Mortgage guaranty | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8. | Ocean marine | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 |
| 9. | Inland marine | 0 | | 0 | 0 | 0 | 0 | o | 0 | | 0 | | 0 |
| 10. | Financial quaranty | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 11. | Medical professional liability | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 12. | Earthquake | 0 | 0 | Ω | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 13. | Group accident and health (b) | 0 | 0 | 0 | 0 | 0 | 0 | 00 | 0 | 0 | 0 | 0 | 0 |
| 14. | Credit accident and health (group and individual) | 0 | 0 | 0 | 0 | 0 | 0 | | 0 | 0 | 0 | 0 | 0 |
| | Collectively renewable accident and health (b). | 0 | 0 | 0 | 0 | 00 | 0 | , | 0 | 0 | 0 | 0 | 0 |
| | Non-cancelable accident and health(b) | 0 | 0 | 0 | 0 | 0 | O | | 0 | 0 | 0 | 0 | 0 |
| | Guaranteed renewable accident and health(b) | . 0 | 0 | 0 | 0 | 0 | o | , | 0 | 0 | 0 | 0 | 0 |
| | Non-renewable for stated reasons only (b) | 0 | 0 | 0 | 0 | 0 | ļ0 |) 0 | 0 | 0 | 0 | 0 | 0 |
| | Other accident only | 0 | 0 | 0 | 0 | 0 | ļ |) 0 | 0 | 0 | 0 | 0 | 0 |
| | Medicare Title XVIII exempt from state taxes or fees | | | | | 0 | J | , | 0 | 0 | 0 | 0 | 0 |
| | All other accident and health (b) | u | | 0 | | Q0 | 0 | | | U | | | 0 |
| | Federal employees health benefits plan premium (b) | | u | 0 | | Q | | | | u | | u | J |
| | Workers' compensation | | n | u | | J | | , | 0 | u | | u | u |
| | Other Liability - occurrence Other Liability - claims made | n | n | 0 | 0 | 0 | | ۷ | 0 | ۷ | ۱ | o | o |
| | Excess workers' compensation | n | 0 | 0 | 0 | 0 | 0 | | 0 | ۵ | | 0 | 0 |
| | Products liability | 0 | 0 | 0 | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 |
| | Private passenger auto no-fault (personal injury protection) | 0 | 0 | 0 | 0 | 0 | 0 | | 0 | 0 | 0 | 0 | 400 |
| | Other private passenger auto liability | 0 | 0 | 0 | 0 | 0 | 0 | | 0 | 0 | 0 | 0 | 240 |
| | Commercial auto no-fault (personal injury protection) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Other commercial auto liability | Ĺō | ō | 0 | 0 | 0 | | ō [ō | 0 | 0 | 0 | | 0 |
| | Private passenger auto physical damage | I0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Commercial auto physical damage | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | Aircraft (all perils) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 23. | Fidelity | 0 | 0 | 0 | 0 | 0 | o | 0 | 0 | 0 | 0 | 0 | 0 |
| 24. | Surety | 0 | 0 | 0 | 0 | 0 | 0 | , | 0 | 0 | 0 | 0 | 0 |
| 26. | Burglary and theft | 0 | 0 | 0 | 0 | 0 | 0 | 00 | 0 | 0 | 0 | 0 | 0 |
| 27. | · · · · · · · · · · · · · · · · · · · | 0 | 0 | 0 | 0 | 0 | ļ0 | 00 | 0 | 0 | 0 | 0 | 0 |
| 28. | Credit | ō | ļ0 | 0 | 0 | 0 | L | | o | 0 | ō | ō | <u>0</u> |
| 29. | International | 0 | ļ0 | 0 | 0 | 0 | 0 | | ļ0 | ļ0 | <u>0</u> | J | J0 |
| 30. | Warranty | <u>0</u> | ļ0 | 0 | 0 | 0 | 0 | | ļ0 | ļ0 | 0 | }0 | }0 |
| 34. | Aggregate write-ins for other lines of business | .†0 | ļ0 | 0 | 0 | 0 | O | | ļ0 | ļ0 | 0 | ļ0 | 0 |
| 35. | TOTALS (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 640 |
| 0.407 | DETAILS OF WRITE-INS | | | | | | | | | | | | |
| 3401. | | | | | | | † | | | | | | |
| 3402. 3403. | | | | | | | t | | | | | | |
| | Summary of remaining write-ins for Line 34 from overflow page | 0 | 0 | 0 | 0 | 0 | † | n † | n | 0 | Λ | n | n |
| | Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | 0 | | 0 | 0 | | | | n | 0 | ر ۱ | n | n |
| J433. | rotato (Enico oto i tiliu otoo piuo otoo)(Enic ot above) | | | | 1 | | | , | 1 | U | U | | |

⁽a) Finance and service charges not included in Lines 1 to 35 \$

⁽b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

| | | Gross Premiu Policy and Mer Less Return F Premiums on Po | nbership Fees, Premiums and licies not Taken | 3 Dividends Paid or Credited to | 4 | 5 | 6 | 7 | 8 Direct Defense and Cost | 9 Direct Defense and Cost | 10 Direct Defense and Cost Containment | 11 Commissions | 12 |
|-------|---|--|--|-------------------------------------|---|---|---------------------------|-------------------------|-----------------------------|---------------------------------|--|---------------------------|--------------------------|
| | Line of Business | Direct Premiums Written | 2 Direct Premiums Earned | Policyholders on Direct Business | | Direct Losses Paid (deducting salvage) | Direct Losses Incurred | Direct Losses Unpaid | Containment Expense Paid | Containment Expense Incurred | Expense Unpaid | and Brokerage Expenses | Taxes, Licenses and Fees |
| | Fire | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Allied lines | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Multiple peril crop | 0 | 0 | 0 | 0 | 0 | J | 0 | 0 | 0 | 0 | 0 | |
| | Federal flood | | | 0 | J | U | L | U | 0 | 0 | | D | |
| | Private crop | | | 0 | U | | J | | U | 0 | | D | |
| | Private flood | | | 0 | ν | | | ν | | n | | | |
| | Farmowners multiple peril | | | 0 | ν | u | o | | ν | 0 | | | |
| | Homeowners multiple peril | | o | 0 | ν | | o | | | 0 | D | u | |
| | Commercial multiple peril (liability portion) | | Ω | 0 | ν | | o | | ν | 0 | | n | |
| | Mortgage guaranty | | ر ۱ | 0 | | ٥ | n | 0 | ο | 0 | o | Λ | |
| | Ocean marine | n | n | 0 | n | n | n | n | n | 0 | n | n | |
| | Inland marine | n | n | 0 | n | n | n | n | n | 0 | n | n | |
| | Financial guaranty | n | n | 0 | n | n | n | n | n | 0 | n | n | |
| | Medical professional liability | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Earthquake | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Group accident and health (b) | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Credit accident and health (group and individual) | | 0 | 0 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Collectively renewable accident and health (b) | | 0 | 0 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Non-cancelable accident and health(b) | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Guaranteed renewable accident and health(b) | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Non-renewable for stated reasons only (b) | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Other accident only | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Medicare Title XVIII exempt from state taxes or fees | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | All other accident and health (b) | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Federal employees health benefits plan premium (b) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Workers' compensation | 0 | 0 | 0 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Other Liability - occurrence | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Other Liability - claims made | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Excess workers' compensation | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Products liability | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Private passenger auto no-fault (personal injury protection) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4 |
| | Other private passenger auto liability | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Commercial auto no-fault (personal injury protection) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Other commercial auto liability | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Private passenger auto physical damage | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Commercial auto physical damage | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Aircraft (all perils) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Fidelity | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Surety | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Burglary and theft | Ō | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Boiler and machinery | Ō | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Credit | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | International | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Warranty | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Aggregate write-ins for other lines of business | 0 | 0 | 0 | 0 | 0 | 0 | L0 | 0 | 0 | 0 | 0 | L |
| | TOTALS (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 6 |
| | DETAILS OF WRITE-INS | | <u> </u> | | 1 | | | | | | | | |
| | | | | | | | | | | | | | |
| 3402. | | | | | | | | | | | | | |
| 3403. | | | | | | | | | | | | | |
| | Summary of remaining write-ins for Line 34 from overflow page | 0 | 0 | 0 | 0 | | J0 | 0 | 0 | 0 | 0 | 0 | |
| 3499. | Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) | 1 0 | 0 | 0 | 0 | 1 0 | 1 0 | 1 0 | 1 0 | 0 | 1 0 | 1 0 | 1 |

⁽a) Finance and service charges not included in Lines 1 to 35 \$

Schedule F - Part 1 - Assumed Reinsurance

NONE

Schedule F - Part 2 - Premium Portfolio Reinsurance Effected or (Canceled)

NONE

Schedule F - Part 3 - Ceded Reinsurance

NONE

Schedule F - Part 4 - Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3

NONE

Schedule F - Part 5 - Interrogatories for Schedule F - Part 3

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

| | Restatement of Balance Sheet to Identify Net C | 1 | 2 | 3 |
|-----|--|----------------------------|----------------------------|---------------------------|
| | | As Reported (Net of Ceded) | Restatement Adjustments | Restated (Gross of Ceded) |
| | | | - | |
| | ASSETS (Page 2, Col. 3) | | | |
| 1. | Cash and invested assets (Line 12) | 12,163,335 | 0 | 12,163,335 |
| | | | _ | _ |
| 2. | Premiums and considerations (Line 15) | 0 | 0 | 0 |
| 3. | Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) | 0 | 0 | 0 |
| | Funds held by or deposited with reinsured companies (Line 16.2) | 0 | 0 | 0 |
| 4. | Funds neid by or deposited with reinsured companies (Line 16.2) | 0 | 0 | 0 |
| 5. | Other assets | 77,971 | 0 | 77,971 |
| 6. | Net amount recoverable from reinsurers | 0 | 0 | 0 |
| 0. | Net amount recoverable from reinsurers | | 0 | 0 |
| 7. | Protected cell assets (Line 27) | 0 | 0 | 0 |
| 8. | Totals (Line 28) | 12,241,306 | 0 | 12,241,306 |
| 0. | Totals (Line 20) | 12,241,000 | 0 | 12,241,000 |
| | LIABILITIES (Page 3) | | | |
| 9. | Losses and loss adjustment expenses (Lines 1 through 3) | 0 | 0 | 0 |
| 9. | | | | |
| 10. | Taxes, expenses, and other obligations (Lines 4 through 8) | 4,974 | 0 | 4,974 |
| 11. | Unearned premiums (Line 9) | 0 | 0 | 0 |
| | | | | |
| 12. | Advance premiums (Line 10) | 0 | 0 | 0 |
| 13. | Dividends declared and unpaid (Line 11.1 and 11.2) | 0 | 0 | 0 |
| | | | | |
| 14. | Ceded reinsurance premiums payable (net of ceding commissions (Line 12) | 0 | 0 | 0 |
| 15. | Funds held by company under reinsurance treaties (Line 13) | 0 | 0 | 0 |
| | | | | |
| 16. | Amounts withheld or retained by company for account of others (Line 14) | 0 | 0 | 0 |
| 17. | Provision for reinsurance (Line 16) | 0 | 0 | 0 |
| | | | • | |
| 18. | Other liabilities | 886 | 0 | 886 |
| 19. | Total liabilities excluding protected cell business (Line 26) | 5,860 | 0 | 5,860 |
| - | Port of the W. A. W. a. (1) a. (27) | | • | _ |
| 20. | Protected cell liabilities (Line 27) | | 0 | 0 |
| 21. | Surplus as regards policyholders (Line 37) | 12,235,446 | XXX | 12,235,446 |
| | | | | |
| 22. | Totals (Line 38) | 12,241,306 | 0 | 12,241,306 |

| 20. | Protected cell liabilities (Line 27) | 0 | 0 | |
|-------|---|------------|-----|------------|
| 21. | Surplus as regards policyholders (Line 37) | 12,235,446 | xxx | 12,235,44 |
| 22. | Totals (Line 38) | 12,241,306 | 0 | 12,241,30 |
| NOTE: | Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percarrangements? | | |] No [X] |
| | If yes, give full explanation: | | | |
| | | | | |
| | | | | |

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

Schedule P - Part 1A - Homeowners/Farmowners

NONE

Schedule P - Part 1B - Private Passenger Auto Liability/Medical

NONE

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical

NONE

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

Schedule P - Part 1E - Commercial Multiple Peril

NONE

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

NONE

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

NONE

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

NONE

Schedule P - Part 1H - Section 1 - Other Liability - Occurrence

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made NONE

Schedule P - Part 1I - Special Property (Fire, Allied Lines...)

NONE

Schedule P - Part 1J - Auto Physical Damage

NONE

Schedule P - Part 1K - Fidelity/Surety

NONE

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 1M - International

NONE

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 10 - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 1T - Warranty

NONE

Schedule P - Part 2A - Homeowners/Farmowners

Schedule P - Part 2B - Private Passenger Auto Liability/Medical

NONE

Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical

NONE

Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

Schedule P - Part 2E - Commercial Multiple Peril

NONE

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

NONE

Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made

NONE

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

NONE

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

NONE

Schedule P - Part 2H - Section 2- Other Liability - Claims-Made

NONE

Schedule P - Part 2I - Special Property

NONE

Schedule P - Part 2J - Auto Physical Damage

NONE

Schedule P - Part 2K - Fidelity/Surety

NONE

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 2M - International

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made NONE

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 2T - Warranty **N O N E**

Schedule P - Part 3A - Homeowners/Farmowners

NONE

Schedule P - Part 3B - Private Passenger Auto Liability/Medical **NONE**

Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical **NONE**

Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

Schedule P - Part 3E - Commercial Multiple Peril

NONE

Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence

NONE

Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made NONE

Schedule P - Part 3G - Special Liability

NONE

Schedule P - Part 3H - Section 1 - Other Liability - Occurrence **NONE**

Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made **NONE**

Schedule P - Part 3I - Special Property

NONE

Schedule P - Part 3J - Auto Physical Damage

NONE

Schedule P - Part 3K - Fidelity/Surety

NONE

Schedule P - Part 3L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 3M - International

NONE

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

NONE

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made

NONE

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

Schedule P - Part 3T - Warranty

NONE

Schedule P - Part 4A - Homeowners/Farmowners

NONE

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

NONE

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

NONE

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

NONE

Schedule P - Part 4E - Commercial Multiple Peril

NONE

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

NONE

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

NONE

Schedule P - Part 4G - Special Liability

NONE

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

NONE

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

NONE

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J - Auto Physical Damage

NONE

Schedule P - Part 4K - Fidelity/Surety

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 4M - International NONE

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property **N O N E**

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability **N O N E**

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence **NONE**

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made NONE

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty **NONE**

Schedule P - Part 4T - Warranty

NONE

Schedule P - Part 5A - Homeowners/Farmowners - Section 1 **NONE**

Schedule P - Part 5A - Homeowners/Farmowners - Section 2 **NONE**

Schedule P - Part 5A - Homeowners/Farmowners - Section 3 **NONE**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1

NONE

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2

NONE

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3 **NONE**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1

NONE

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2 **N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3 **N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

NONE

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

NONE

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3 **NONE**

Schedule P - Part 5E - Commercial Multiple Peril - Section 1

NONE

Schedule P - Part 5E - Commercial Multiple Peril - Section 2

NONE

Schedule P - Part 5E - Commercial Multiple Peril - Section 3 **N O N E**

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

NONE

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

NONE

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B **NONE**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B **NONE**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B **NONE**

Schedule P - Part 5H - Other Liability - Occurrence - Section 1A **N O N E**

Schedule P - Part 5H - Other Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5H - Other Liability - Occurrence - Section 3A **NONE**

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B **N O N E**

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B **N O N E**

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B **N O N E**

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B **NONE**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B NONE

Schedule P - Part 5T - Warranty - Section 1

NONE

Schedule P - Part 5T - Warranty - Section 2

NONE

Schedule P - Part 5T - Warranty - Section 3

NONE

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

NONE

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

NONE

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

NONE

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

NONE

Schedule P - Part 6E - Commercial Multiple Peril - Section 1

NONE

Schedule P - Part 6E - Commercial Multiple Peril - Section 2

NONE

Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

NONE

Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

NONE

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 6M - International - Section 1

Schedule P - Part 6M - International - Section 2

NONE

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1 **NONE**

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2 **N O N E**

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1 **NONE**

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2 **NONE**

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A

NONE

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A NONE

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B **NONE**

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B **NONE**

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts **N O N E**

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts NONE

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts

NONE

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Interrogatories
NONE

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

| | | Allocated by . | States and Terri | Direct Bus | iness Only | | |
|------------|-----------------------------|------------------------|------------------------|------------------------|------------------------|---------------------------|--------|
| | | 1 | 2 | 3 | 4 | 5 | 6 |
| | | Life | Annuities | Disability Income | Long-Term Care | | |
| | States, Etc. | (Group and Individual) | (Group and Individual) | (Group and Individual) | (Group and Individual) | Deposit-Type Contracts | Totals |
| 1. | Alabama | | | | | | |
| 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. | lowa IA | | | | | | |
| 17. | Kansas KS | | | | | | |
| 18. | Kentucky KY | | | | | | |
| 19. | Louisiana LA | | | ļ | | ļ | |
| 20. | Maine ME | | | | | | |
| 21. | Maryland MD | | | | | | |
| 22. | Massachusetts MA | | | | | | |
| 23. | Michigan MI | | | | | | |
| 24. | Minnesota MN | | | | | | |
| | | | | | | | |
| 25. | Mississippi MS | | | | | | |
| 26. | Missouri MC | | | | | | |
| 27. | MontanaMT | | | | | | |
| 28. | Nebraska | | | | | | |
| 29. | Nevada | <u> </u> | | | | | |
| 30. | New HampshireNH | | | | l | - | |
| 31. | New Jersey NJ | | | | | | |
| 32. | New Mexico NM | | | | | | |
| 33. | New York | | | | | | |
| 34. | North Carolina NC | | | | | | |
| 35. | North Dakota | | | | | | |
| 36. | Ohio OH | | | | | | |
| 37. | Oklahoma OK | | | | | | |
| 38. | Oregon OR | | | | | | |
| 39. | Pennsylvania PA | | | | | | |
| 40. | Rhode Island RI | | | | | | |
| 11. | South Carolina SC | | | | | | |
| 12. | South Dakota | | | | | | |
| +2. 13. | Tennessee TN | | | | | | |
| | | | | | | | |
| 44. 45 | Texas TX | | | | | † | |
| 15. | Utah UT | | | | | † | |
| 16. | Vermont VT | | | 1 | | - | |
| 17. | Virginia VA | | | | | <u> </u> | |
| 8. | Washington WA | | | | | | |
| 9. | West Virginia WV | ′ | | | | | |
| 0. | Wisconsin WI | | | | | | |
| 1. | Wyoming WY | , | | | | | |
| 52. | American Samoa AS | | | | | | |
| 3. | Guam GU | | | | | ļ | |
| 54. | Puerto Rico PR | | | | | | |
| 55. | U.S. Virgin Islands VI | | | | | | |
| 56. | Northern Mariana Islands MP | | | | | | |
| 57. | Canada CA | | | | | | |
| 58. | | | | | | | |
| | Total | | | | | | |

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | | _12 | 13 | 14 | 15 | 16 |
|-------|-----------------------------|---------|------------|---------|------|-------------------------|--|---------|-----------|-----------------------------------|------------|---------------------|---------|------------------------------------|---------|----|
| | | | 1 | | | | | | | | | Type | lf | | | 1 |
| | | | | | | | | | | | | of Control | Control | | | |
| | | | | | | | | | | | (| Ownership, | is | | Is an | |
| | | | | | | Name of Securities | | | Relation- | | | Board, | Owner- | | SCA | |
| | | | | | | Exchange | | Domi- | ship | | M | lanagement, | ship | | Filina | |
| | | NAIC | | | | if Publicly Traded | Names of | ciliary | to | | | orney-in-Fact, | Provide | | Re- | |
| Group | | Company | ID | Federal | | (U.S. or | Parent. Subsidiaries | Loca- | Reporting | Directly Controlled by | , | Influence. | Percen- | Ultimate Controlling | auired? | 2 |
| Code | Group Name | Code | Number | RSSD | CIK | International) | Or Affiliates | tion | Entity | (Name of Entity/Person) | | Other) | tage | Entity(ies)/Person(s) | (Yes/No | |
| Code | The Hanover Insurance Group | Code | 80-0266582 | ROOD | CIIX | international) | 440 Lincoln Street Holding Company LLC | MA | NIA | The Hanover Insurance Company | Ownership | Board.Management | 100.000 | The Hanover Insurance Group, Inc. | N0 | , |
| | The Hanover Insurance Group | | 84-3300049 | | | | AIXHI LLC | MA | NIA | Nova Casualty Company | | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| | The Hanover Insurance Group | | 27-1304098 | | | | AIX Insurance Services of California, Inc. | CA | NIA | AIX. Inc. | | Board.Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| 088 | The Hanover Insurance Group | 12833 | 20-5233538 | | | | AIX Specialty Insurance Company | DE | IA | Nova Casualty Company | | Board.Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| 000 | The Hanover Insurance Group | 12000 | 20-3051651 | | | | AIX. Inc. | DE | NIA | The Hanover Insurance Company | | Board, Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| 088 | The Hanover Insurance Group | 10212 | 04-3272695 | | | | Allmerica Financial Alliance Insurance Co. | NH | IA | The Hanover Insurance Company | | Board.Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| 088 | The Hanover Insurance Group | 41840 | 23-2643430 | | | | Allmerica Financial Benefit Insurance Co | MI | IA | The Hanover Insurance Company | | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| | The Hanover Insurance Group | | 04-3194493 | | | | Allmerica Plus Insurance Agency, Inc. | MA | NIA | The Hanover Insurance Company | | Board, Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| | The Hanover Insurance Group | | | | | | Allmerica Securities Trust | MA | NIA | The Hanover Insurance Group, Inc. | Management | Doar a, managomorri | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| | The Hanover Insurance Group | | 54-1632456 | | | | Campania Holding Company, Inc. | VA | NIA | | | Board, Management | 100.000 | The Hanover Insurance Group, Inc. | NO | 1 |
| 088 | The Hanover Insurance Group | 12260 | 52-1827116 | | | | Campmed Casualty & Indemnity Co. Inc. | NH | IA | The Hanover Insurance Company | | Board.Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
|)88 | The Hanover Insurance Group | 31534 | 38-0421730 | | | | Citizens Insurance Company of America | MI | IA | The Hanover Insurance Company | | Board Management | 100.000 | The Hanover Insurance Group, Inc. | NO | 1 |
| 88 | The Hanover Insurance Group | 10714 | 36-4123481 | | | | Citizens Insurance Company of Illinois | IL | IA | Opus Investment Management, Inc. | | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| 088 | The Hanover Insurance Group | 10176 | 38-3167100 | | | | Citizens Insurance Company of Ohio | OH | IA | The Hanover Insurance Company | | Board, Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| 088 | The Hanover Insurance Group | 10395 | 35-1958418 | | | | Citizens Insurance Company of the Midwest | IN | IA | The Hanover Insurance Company | | Board, Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| | The Hanover Insurance Group | | 27-1652700 | | | | CitySquare II Development Co., L.L.C | MA | NIA | Opus Investment Management, Inc. | | Board, Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| | The Hanover Insurance Group | | 27-3626264 | | | | CitySquare II Investment Co., L.L.C | MA | NIA | The Hanover Insurance Company | | Board.Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| | The Hanover Insurance Group | | 27-2400275 | | | | Educators Insurance Agency, Inc. | MA | NIA | The Hanover Insurance Group, Inc. | | Board, Management | 100.000 | The Hanover Insurance Group, Inc. | NO | |
| | The Hanover Insurance Group | | 38-4000989 | | | | Front Street Financing LLC | MA | NIA | CitySquare II Investment Co. LLC | | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| | The Hanover Insurance Group | | 52-1172293 | | | | Hanover Specialty Insurance Brokers, Inc. | VA | NIA | Verlan Holdings. Inc. | | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| 088 | The Hanover Insurance Group | 22306 | 04-2217600 | | | | Massachusetts Bay Insurance Company | NH | IA | The Hanover Insurance Company | Ownership. | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| | The Hanover Insurance Group | | 84-3309673 | | | | NAG Merger LLC | MA | NIA | AIXHI LLC | | Board, Management | 100,000 | The Hanover Insurance Group, Inc | NO | |
| 088 | The Hanover Insurance Group | 42552 | 16-1140177 | | | | NOVA Casualty Company | NY | IA | The Hanover Insurance Company | Ownership. | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| | The Hanover Insurance Group | | 04-2854021 | | | | Opus Investment Management, Inc. | MA | UIP | The Hanover Insurance Group, Inc. | | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| | The Hanover Insurance Group | | 38-3324634 | | | | Professionals Direct, Inc. | MI | NIA | The Hanover Insurance Company | | Board, Management | 100.000 | The Hanover Insurance Group, Inc | NO | |
| 088 | The Hanover Insurance Group | 36064 | 04-3063898 | | | | The Hanover American Insurance Company | NH | IA | The Hanover Insurance Company | Ownership, | Board, Management | 100.000 | The Hanover Insurance Group, Inc | N0 | |
| | The Hanover Insurance Group | | 98-1303999 | | | | The Hanover Atlantic Insurance Company Ltd | BMU | IA | The Hanover Insurance Company | Ownership, | Board, Management | 100.000 | . The Hanover Insurance Group, Inc | YES | |
| 088 | The Hanover Insurance Group | 41602 | 75-1827351 | | | | The Hanover Casualty Company | TX | IA | The Hanover Insurance Company | Ownership, | Board, Management | 100.000 | The Hanover Insurance Group, Inc | N0 | |
|)88 | The Hanover Insurance Group | 22292 | 13-5129825 | | | | The Hanover Insurance Company | NH | UDP | Opus Investment Management, Inc | Ownership, | Board, Management | 100.000 | . The Hanover Insurance Group, Inc | N0 | |
| 088 | The Hanover Insurance Group | | 04-3263626 | | | New York Stock Exchange | The Hanover Insurance Group, Inc. | DE | UIP | | | - | 0.000 | | N0 | |
|)88 | The Hanover Insurance Group | 13147 | 74-3242673 | | | | The Hanover National Insurance Company | NH | RE | The Hanover Insurance Company | Ownership, | Board, Management | 100.000 | . The Hanover Insurance Group, Inc | N0 | |
| 88 | The Hanover Insurance Group | 11705 | 86-1070355 | | | | The Hanover New Jersey Insurance Company | NH | IA | The Hanover Insurance Company | Ownership, | Board, Management | 100.000 | The Hanover Insurance Group, Inc | N0 | |
| | The Hanover Insurance Group | | 04-2448927 | | | | VeraVest Investments, Inc. | MA | NIA | The Hanover Insurance Group, Inc | Ownership, | Board, Management | 100.000 | . The Hanover Insurance Group, Inc | N0 | |
| 088 | The Hanover Insurance Group | 10815 | 52-0903682 | | | | Verlan Fire Insurance Company | NH | IA | The Hanover Insurance Company | Ownership, | Board, Management | 100.000 | The Hanover Insurance Group, Inc | N0 | |
| | The Hanover Insurance Group | | 52-2044133 | | | | Verlan Holdings, Inc. | MD | NIA | The Hanover Insurance Group, Inc | Ownership, | Board, Management | 100.000 | The Hanover Insurance Group, Inc | N0 | |
| | • | l | 1 | 1 | ı | | | 1 | I | * ' | 1 | - | 1 | 1 | 1 | |

| | | | 1 | | |
|----------|----------|---|---|--------|--|
| Asterisk | | | | x) a n | |
| | | | | | |
| | ' | • | | | |

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 11 | 12 | 13 |
|-------------|-------------|--|---------------|---------------|------------------------------------|-----------------------------------|-------------------|-----------------------------------|---|-----------------|-------------------------------|
| | | | | | | Income/ | | | | | |
| | | | | | | (Disbursements) | | | | | |
| | | | | | Purchases, Sales | Incurred in | | | | | Reinsurance |
| | | | | | or Exchanges of | Connection with | | Income/ | Any Other Material | | Recoverable/ |
| NAIC | | | | | Loans, Securities, Real Estate, | Guarantees or Undertakings for | Management | (Disbursements) Incurred Under | Activity Not in the Ordinary Course of | | (Payable) on Losses and/or |
| Company | ID | Names of Insurers and Parent. | Shareholder | Capital | Mortgage Loans or | the Benefit of any | Agreements and | Reinsurance | the Insurer's | | Reserve Credit |
| Code | Number | Subsidiaries or Affiliates | Dividends | Contributions | Other Investments | Affiliate(s) | Service Contracts | Agreements | * Business | Totals | Taken/(Liability) |
| 12833 | 20-5233538 | AIX Specialty Insurance Co. | (2,000,000) | 0 | 0 | 0 | 0 | 0 | 0 | (2,000,000) | 371,833,595 |
| 10212 | 04-3272695 | Allmerica Financial Alliance Ins Co | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 213,533,092 |
| | 23-2643430 | Allmerica Financial Benefit Ins Co | 0 | 10,000,000 | 0 | 0 | 0 | (131,039,184) | 0 | (121,039,184) | 802,278,969 |
| | 04-3194493 | Allmerica Plus Insurance Agency, Inc | (200,000) | 0 | 0 | 0 | 0 | 0 | 0 | (200,000) | 0 |
| 12260 | 52-1827116 | Campmed Casualty & Indemnity Company, | | | | | | | | | |
| | | Inc | (400,000) | 0 | 0 | 0 | 0 | 0 | 0 | (400,000) | 8,953,906 |
| | 38-0421730 | Citizens Insurance Co. of America | (90,000,000) | 0 | (87,037,902) | 0 | 172 , 155 , 084 | 78,314,018 | 0 | 73,431,200 | (125,953,536) |
| | 36-4123481 | Citizens Insurance Co. of Illinois | 0 | 1,000,000 | 0 | 0 | 0 | 0 | 0 | 1,000,000 | 45 , 184 , 938 |
| | 38-3167100 | Citizens Insurance Co. of Ohio | (1,100,000) | 0 | 0 | 0 | 0 | 0 | 0 | (1,100,000) | 10,216,497 |
| | 35-1958418 | Citizens Insurance Co. of the Midwest | 0 | 0 | 0 | 0 | 0 | (210, 161, 763) | 0 | (210, 161, 763) | 1, 102, 456, 882 |
| | 04-3063898 | The Hanover American Insurance Co | 0 | 0 | 0 | 0 | 0 | (64,019,195) | 0 | (64,019,195) | 499,251,390 |
| | 98-1300399 | The Hanover Atlantic Insurance Company | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 52,303,728 |
| | 13-5129825 | The Hanover Insurance Company | (161,000,000) | (10,000,000) | (77,885,190) | 0 | (105,433,591) | 426,607,350 | (125,000,000) | (52,711,431) | (4,773,976,908) |
| | 86-1070355 | Hanover New Jersey Insurance Company | (600,000) | 0 | 0 | 0 | 0 | 0 | 0 | (600,000) | 0 |
| | 75-1827351 | The Hanover Casualty Company | (900,000) | 0 | 0 | 0 | 0 | 0 | 0 | (900,000) | 103,932,484 |
| | 04-2217600 | Massachusetts Bay Insurance Company | 0 | 0 | 0 | 0 | 0 | (152,599,893) | 0 | (152,599,893) | 960,231,405 |
| | 16-1140177 | NOVA Casualty Co. | 2,000,000 | 0 | 0 | 0 | 0 | 0 | 0 | 2,000,000 | 590, 166, 544 |
| | 04-3263626 | The Hanover Insurance Group, Inc | 256,756,357 | 0 | 164,923,092 | 0 | (66,721,493) | 0 | 125,000,000 | 479,957,956 | 0 |
| | 74-3242673 | The Hanover National Insurance Company | (200,000) | 0 | 0 | 0 | 0 | 0 | 0 | (200,000) | 0 |
| | 52-0903682 | Verlan Fire Insurance Co | (600,000) | 0 | 0 | 0 | 0 | 52,898,667 | 0 | 52,298,667 | 139,587,014 |
| | 04-2854021 | Opus Investment Management, Inc | 0 | (1,000,000) | 0 | 0 | 0 | 0 | 0 | (1,000,000) | 0 |
| | 27-3626264 | CitySquare II Investment Co., LLC | (1,756,357) | 0 | 0 | 0 | 0 | 0 | 0 | (1,756,357) | 0 |
| 9999999 Con | trol Totals | | 0 | 0 | 0 | 0 | 0 | 0 | XXX 0 | 0 | 0 |

SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

| PART 3 - ULTIMATE CONTRO | LLING PARTY AND LISTING OF O | THER U.S. INS | URANCI | E GROUPS OR ENTITIES UNDER | THAT ULTIMATE CONTROLLING F | ARTY'S CON | IROL |
|--|--|---------------|-------------------------------|-----------------------------------|--|--------------|-------------------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | | Granted | | | | Granted |
| | | | Disclaimer | | | | Disclaimer |
| | | | of Control\ Affiliation of | | | | of Control\ Affiliation of |
| | | Ownership | Column 2 | | | Ownership | Column 5 |
| | | Percentage | Over | | | Percentage | Over |
| | | Column 2 of | Column 1 | | U.S. Insurance Groups or Entities Controlled | (Column 5 of | Column 6 |
| Insurers in Holding Company | Owners with Greater Than 10% Ownership | Column 1 | (Yes/No) | Ultimate Controlling Party | by Column 5 | Column 6) | (Yes/No) |
| AIX Specialty Insurance Insurance Company | NOVA Casualty Company | 100.000 | N0 | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | N0 |
| Allmerica Financial Allicance Insurance Co | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | NO |
| Allmerican Financial Benefit Insurance Co | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | NO |
| Campmed Causalty & Indemnity Co. Inc. | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | |
| Citizens Insurance Company of America | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | |
| Citizens Insurance Company of Illinois | Opus Investment Management, Inc. | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | NO |
| Citizens Insurance Company of Ohio | The Hanover Insurance Company | | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | |
| Citizens Insurance Company of the Midwest | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | NO |
| Massachusetts Bay Insurance Company | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | |
| NOVA Casualty Company | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | NO |
| The Hanover American Insurance Company | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | NO |
| The Hanover Atlantic Insurance Company | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | |
| The Hanover Casualty Company | The Hanover Insurance Company | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | NO |
| The Hanover Insurance Company | Opus Investment Management, Inc. | 100.000 | NO | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | |
| The Hanover National Insurance Company | The Hanover Insurance Company | 100.000 | NO | | | 100.000 | NO |
| The Hanover New Jersey Insurance Company | The Hanover Insurance Company | 100.000 | NO | | | 100.000 | N0 |
| Verlan Fire Insurance Company | The Hanover Insurance Company | 100.000 | N0 | The Hanover Insurance Group, Inc. | The Hanover Insurance Group | 100.000 | N0 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

| | | Responses |
|-----|--|-----------|
| | MARCH FILING | |
| 1. | Will an actuarial opinion be filed by March 1? | YES |
| 2. | Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? | YES |
| 3. | Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? | YES |
| 4. | Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? | YES |
| | APRIL FILING | |
| 5. | Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? | YES |
| 6. | Will Management's Discussion and Analysis be filed by April 1? | YES |
| 7. | Will the Supplemental Investment Risk Interrogatories be filed by April 1? | YES |
| | MAY FILING | |
| 8. | Will this company be included in a combined annual statement which is filed with the NAIC by May 1? | YES |
| | JUNE FILING | |
| 9. | Will an audited financial report be filed by June 1? | YES |
| 10. | Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? | YES |

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

MARCH FILING

| | MARCH FILING |
|-----|--|
| 11. | Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? |
| 12. | Will the Financial Guaranty Insurance Exhibit be filed by March 1? |
| 13. | Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? |
| 4. | Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? |
| 5. | Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? |
| 6. | Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? |
| 7. | Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? |
| 3. | Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? |
| 9. | Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)? |
| 0. | Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? |
| 1. | Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? |
| 2. | Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? |
| 3. | Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? |
| 4. | Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? |
| 5. | Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? |
| ô. | Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? |
| | Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1? |
| | APRIL FILING |
| 3. | Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? |
| | Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? |
| | Will the Accident and Health Policy Experience Exhibit be filed by April 1? |
| | Will the Supplemental Health Caré Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? |
| | Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the |
| | NAIC by April 1? |
| | Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the |
| | NAIC by April 1? |
| | Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? |
| | Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1? |
| 7. | Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? |

Bar Codes:

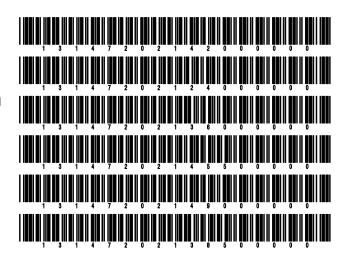
12. 13. 14. 15. 16. 17. 18.

20. 21. 22. 23. 24. 25. 26. 27.

29. 30. 31. 32.

33. 34. 35. 36.

- SIS Stockholder Information Supplement [Document Identifier 420]
- 12. Financial Guaranty Insurance Exhibit [Document Identifier 240]
- 13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
- 14. Supplement A to Schedule T [Document Identifier 455]
- 15. Trusteed Surplus Statement [Document Identifier 490]
- 16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 17. Reinsurance Summary Supplemental Filing [Document Identifier 401]
- 18. Medicare Part D Coverage Supplement [Document Identifier 365]
- 20. Reinsurance Attestation Supplement [Document Identifier 399]
- 21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]
- 22. Bail Bond Supplement [Document Identifier 500]
- 23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]
- Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 25. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 26. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 27. Reinsurance Counterparty Reporting Exception Asbestos and Pollution Contracts [Document Identifier 555]
- 28. Credit Insurance Experience Exhibit [Document Identifier 230]
- 29. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 30. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 31. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- 33. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]
- Life, Health & Annuity Guaranty Association Assessable Premium Exhibit -Parts 1 and 2 [Document Identifier 290]
- 35. Private Flood Insurance Supplement [Document Identifier 560]
- 36. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]

