

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

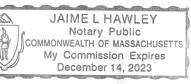
AS OF JUNE 30, 2022 OF THE CONDITION AND AFFAIRS OF THE

Citizens Insurance Company of the Midwest

NAIC Group Code 0088 0088 NAIC Company Code 10395 Employer's ID Number 35-1958418

Organized under the Laws of		iana	, State of Domicile or Port of I	Entry IN
Country of Domicile			ites of America	
Incorporated/Organized	03/24/1995		Commenced Business	03/08/1996
C4-4-4	0000 Dalamata - Da	0.11-100		- N. 110 100 100 100 100 100 100 100 100 10
Statutory Home Office	9229 Delegates Ro (Street and N			ndianapolis, IN, US 462403824 Town, State, Country and Zip Code)
	(Otroct and N	,	. ,	Town, Otate, Gountry and Zip Gode)
Main Administrative Office _			ncoln Street and Number)	
v	Vorcester, MA, US 01653-0002	,	and Number)	508-853-7200
(City or	Town, State, Country and Zip	Code)	(A	rea Code) (Telephone Number)
Mail Address	440 Lincoln Stree	et	V	Vorcester, MA, US 01653-0002
	(Street and Number or F			Town, State, Country and Zip Code)
Primary Location of Books and	d Records	440 Li	incoln Street	
Timary Location of Books and			and Number)	
	Vorcester, MA, US 01653-0002			508-853-7200-8557928
(City or	Town, State, Country and Zip	Code)	(A	rea Code) (Telephone Number)
Internet Website Address		WWW.H	ANOVER.COM	
Chatutain, Chatamant Cantast	Donnie	M. Hanakusad		F00 050 7000 0557000
Statutory Statement Contact	Dennis	M. Hazelwood (Name)		508-853-7200-8557928 (Area Code) (Telephone Number)
DH	AZELWOOD@HANOVER.CO	(508-853-6332
	(E-mail Address)			(FAX Number)
		OF	FICERS	
President	John Conn			Nathaniel William Clarkin
Senior Vice President &			vioo i rooidoni a rroaddioi	Hathanisi villiani olahan
Secretary _	Charles Frede	erick Cronin		
Willard Ty-Lunn Lee, E	utive Vice President & CFO Executive Vice President To Executive Vice President	Dennis Francis Kerrigan	THER Jr., Executive Vice President & GC lley, Executive Vice President	Richard William Lavey, Executive Vice President Bryan James Salvatore, Executive Vice President
•		DIRECTORS	OR TRUSTEES	
	ison Barnes	Daniel	Scott Couger	Jeffrey Mark Farber
	ce Greefield # reen Lowsley		ancis Kerrigan Jr. Conner Roche	Willard Ty-Lunn Lee Bryan James Salvatore
	Welzenbach	301111 C	John House	Bryan dames dalvatore
State of	Massachusetts Worcester	SS:		
all of the herein described as statement, together with relate condition and affairs of the sai in accordance with the NAIC rules or regulations require respectively. Furthermore, the	sets were the absolute proper dexhibits, schedules and explid reporting entity as of the reporting entity as of the reporting entity as of the reporting not receive scope of this attestation by the description of the scope of this attestation by the description of the scope of this attestation by the description of the scope of this attestation by the description of the scope of this attestation by the description of the scope of	by of the said reporting en anations therein contained period stated above, and Accounting Practices elated to accounting prac- ne described officers also c filing) of the enclosed sta	tity, free and clear from any liens, annexed or referred to, is a full a and of its income and deductions and Procedures manual except to tices and procedures, according includes the related correspondin	ent number
Jaime L. Hawley Notary December 14 2023			3. Number of pages a	artached





ASSETS

		<u> </u>	Current Statement Date		4
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	97,876,430	0	` '	96,885,804
2.	Stocks:			, ,	, ,
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks	0	0		0
3.	Mortgage loans on real estate:				
	3.1 First liens	0	0	0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less				
	\$0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5.	Cash (\$984,895), cash equivalents				
٥.	(\$				
	investments (\$0) and short-term	08/ 805	0	984,895	1 120 //56
6	Contract loans (including \$		0		1, 129,430
0.	Derivatives		0		0
7.					_
8.	Other invested assets		0		0
9.	Receivables for securities		0		0
10.	Securities lending reinvested collateral assets				0
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	98,861,325	0	98,861,325	98,015,260
13.	Title plants less \$				
	only)				0
14.	Investment income due and accrued	615,037	0	615,037	600,393
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0	0
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$0) and				
	contracts subject to redetermination (\$0)	0	0	0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies				0
	16.3 Other amounts receivable under reinsurance contracts				0
17.	Amounts receivable relating to uninsured plans				0
			0		0
	Net deferred tax asset		0		0
19.	Guaranty funds receivable or on deposit				0
20.	Electronic data processing equipment and software				0
21.	Furniture and equipment, including health care delivery assets				
21.	(\$0)	0	0	0	0
22	Net adjustment in assets and liabilities due to foreign exchange rates				0
22.	Receivables from parent, subsidiaries and affiliates				0
23.	Health care (\$				0
24.					
25.	Aggregate write-ins for other than invested assets	0	0	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	99.481.925	0	99,481,925	98,615,653
27.	From Separate Accounts, Segregated Accounts and Protected Cell				, , , , , , , , , , , , , , , , , , , ,
	Accounts		0		0
28.	Total (Lines 26 and 27)	99,481,925	0	99,481,925	98,615,653
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.					
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	·	1 Current Statement Date	2 December 31, Prior Year
1.	Losses (current accident year \$0)	0	0
2.	Reinsurance payable on paid losses and loss adjustment expenses		0
3.	Loss adjustment expenses	0	0
4.	Commissions payable, contingent commissions and other similar charges	0	0
5.	Other expenses (excluding taxes, licenses and fees)	0	0
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	0	0
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))	0	10,760
7.2	Net deferred tax liability	34,281	34,281
8.	Borrowed money \$0 and interest thereon \$	0	0
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$412,000,440 and		
	including warranty reserves of \$0 and accrued accident and health experience rating refunds		i
	including \$0 for medical loss ratio rebate per the Public Health Service Act)	0	0
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)	0	0
13.	Funds held by company under reinsurance treaties	0	0
14.	Amounts withheld or retained by company for account of others	0	0
15.	Remittances and items not allocated		0
16.	Provision for reinsurance (including \$0 certified)	0	0
17.	Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		9,749
20.	Derivatives		0
21.	Payable for securities		0
22.	Payable for securities lending		0
23.	Liability for amounts held under uninsured plans		0
24.	Capital notes \$0 and interest thereon \$		0
25.	Aggregate write-ins for liabilities		0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		54,790
27.	Protected cell liabilities	0	0
28.	Total liabilities (Lines 26 and 27)	43.391	54,790
29.	Aggregate write-ins for special surplus funds		0
30.	Common capital stock		2,000,000
31.	Preferred capital stock		0
32.	Aggregate write-ins for other than special surplus funds		0
33.	Surplus notes		0
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)		
36.	Less treasury stock, at cost:		
00.	36.10 shares common (value included in Line 30 \$	0	0
	36.20 shares preferred (value included in Line 31 \$		0
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)		98,560,863
38.	Totals (Page 2, Line 28, Col. 3)	99,481,925	98,615,653
00.	DETAILS OF WRITE-INS	00,401,020	00,010,000
2501.	DETAILS OF WRITE-INS		
2501.			
2502.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		0
2596. 2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	n	0
2901.	Totals (Lines 2501 tillough 2505 plus 2596)(Line 25 above)		
2901.			
2902.			
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page		0
2998. 2999.		0	0
	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		0
3201. 3202.			
3202.			
3203. 3298.	Summary of remaining write-ins for Line 32 from overflow page		0
		0	0
3299.	Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	U	U

STATEMENT OF INCOME

	3.7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	<u> </u>	-	
		1 Current	2 Prior Year	3 Prior Year Ended
		Year to Date	to Date	December 31
	UNDERWRITING INCOME	Tour to Bato	to Bate	December of
1	Premiums earned:			
١.	1.1 Direct (written \$425, 231, 458)	407 208 246	367 945 973	576 024 043
	1.2 Assumed (written \$			
	1.3 Ceded (written \$			
				0
	1.4 Net (written \$0)	U		0
	DEDUCTIONS:			
2.	Losses incurred (current accident year \$			
	2.1 Direct	· · ·		
	2.2 Assumed			
	2.3 Ceded			414,326,160
	2.4 Net			0
3.	Loss adjustment expenses incurred	0	0	0
4.	Other underwriting expenses incurred	0	0	0
5.	Aggregate write-ins for underwriting deductions	0	0	0
6.	Total underwriting deductions (Lines 2 through 5)	0	0	0
7.	Net income of protected cells		0	0
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	0	0	0
0.	INVESTMENT INCOME			
9.	Net investment income earned	1 116 262	1 181 846	2 418 442
10.	Net realized capital gains (losses) less capital gains tax of \$(1,300)	(9,614)	(12,884)	(75,300)
	Net realized capital gains (losses) less capital gains tax of \$(1,000)	1 100 040		
11.	Net investment gain (loss) (Lines 9 + 10)	1, 100,048	1, 100,902	2,343,142
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered	_	_	-
	\$0 amount charged off \$	0	0	0
13.	Finance and service charges not included in premiums		0	0
14.	Aggregate write-ins for miscellaneous income	0	0	0
15.	Total other income (Lines 12 through 14)	0	0	0
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal			
	and foreign income taxes (Lines 8 + 11 + 15)	1 , 106 , 648		2,343,142
17.	Dividends to policyholders	0	0	0
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and			
	foreign income taxes (Line 16 minus Line 17)			
19.	Federal and foreign income taxes incurred	228,977	230,684	463,536
20.	Net income (Line 18 minus Line 19)(to Line 22)	877,671	938,278	1,879,606
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year	98,560,863	96,690,070	96,690,070
22.	Net income (from Line 20)	877,671	938,278	1,879,606
23.	Net transfers (to) from Protected Cell accounts		0	0
24.	Change in net unrealized capital gains (losses) less capital gains tax of \$	0	0	0
25.	Change in net unrealized foreign exchange capital gain (loss)	0	0	0
26.	Change in net deferred income tax		0	(8,814)
27.	Change in nonadmitted assets	_	0	0
28.	Change in provision for reinsurance		0	0
29.	- ·	_	0	0
	Change in surplus notes		0	٥
30.				
31.	Cumulative effect of changes in accounting principles	U	0	0
32.	Capital changes:		•	
	32.1 Paid in		0	0
	32.2 Transferred from surplus (Stock Dividend)		0	0
	32.3 Transferred to surplus	0	0	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
36.	Change in treasury stock	0	0	0
37.	Aggregate write-ins for gains and losses in surplus	0	0	0
38.	Change in surplus as regards policyholders (Lines 22 through 37)	877,671	938,278	1,870,792
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	99,438,534	97,628,348	98,560,863
55.	DETAILS OF WRITE-INS	55, 150,00T	01,020,040	55,550,550
0501.	DETAILS OF WRITE-INS			
0501.				
0503.	Curaman, of remaining units in full in F form and for			
0598.	Summary of remaining write-ins for Line 5 from overflow page	,0		0
0599.	Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1401.				
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)	0	0	0
3701.				
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)	0	0	0
	, , , , , , , , , , , , , , , , , , , ,		- v l	

STATEMENT AS OF JUNE 30, 2022 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST CASH FLOW

	CASH FLOW	4		
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	0	0	0
2.	Net investment income	1,153,459	1,241,729	2,551,949
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	1,153,459	1,241,729	2,551,949
5.	Benefit and loss related payments	0	0	0
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions			0
8.	Dividends paid to policyholders		0	0
9.	Federal and foreign income taxes paid (recovered) net of \$(1,300) tax on capital			
	gains (losses)	244,000	256,999	490,000
10.	Total (Lines 5 through 9)	244,000	256,999	490,000
11.	Net cash from operations (Line 4 minus Line 10)	909,459	984,730	2,061,949
	, , ,	,	,	, ,
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	4,555,882	4,856,116	11,264,772
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets			0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			0
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	4.555.882	4.856.116	11.264.772
13.	Cost of investments acquired (long-term only):	, , , ,	, ,	, ,
	13.1 Bonds	5 609 263	7 382 489	14 029 133
		0		
	13.3 Mortgage loans			
	13.4 Real estate	0	0	0
			0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	5,609,263	7,382,489	14,029,133
1.1	·	0,009,200	7,302,409	14,029,100
14.	Net increase (or decrease) in contract loans and premium notes		_	(0.764.061
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(1,053,381)	(2,526,374)	(2,764,361
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0	0
	16.3 Borrowed funds	0	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders	0	0	0
	16.6 Other cash provided (applied)	(639)	2,408	1,632
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(639)	2,408	1,632
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	(444 504)	/4 500 000	/700 700
18.		(144,561)	(1,539,236)	(700,780
19.	Cash, cash equivalents and short-term investments:	4 460 150		
	19.1 Beginning of year			1,830,236
	19.2 End of period (Line 18 plus Line 19.1)	984,895	291,000	1,129,456

Note: Supplemental disclosures of cash flow information for non-cash transactions:		

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Citizens Insurance Company of the Midwest ("the Company") are presented on the basis of accounting practices prescribed or permitted by the State of Indiana Insurance Department.

The State of Indiana Insurance Department recognizes only statutory accounting practices prescribed or permitted by the State of Indiana for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Indiana Insurance Law. The National Association of Insurance Commissioners ("NAIC") "Accounting Practices and Procedures Manual" ("NAIC SAP") has been adopted as a component of prescribed or permitted practices by the State of Indiana. The State has not adopted any prescribed accounting practices that differ from those found in NAIC SAP.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Indiana is shown below:

		F/S	F/S		
	SSAP#	Page	Line #	 2022	 2021
NET INCOME					
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 877,671	\$ 1,879,606
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:					\$ -
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
HOIII NAIC GAL.				\$ -	\$ -
(4) NAIC SAP (1-2-3=4)	XXX	XXX	xxx	\$ 877,671	\$ 1,879,606
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 99,438,534	\$ 98,560,863
(6) State Prescribed Practices that are an increase/(decrease)	from NAIC SA	ιP:		\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) fr	rom NAIC SAF	P:		\$ -	\$ -
(8) NAIC SAP (5-6-7=8)	xxx	XXX	XXX	\$ 99,438,534	\$ 98,560,863

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

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

C. Accounting Policy

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds not backed by loans are stated at either amortized cost or fair value, using the scientific interest method, in accordance with the NAIC Purposes and Procedures of the Securities Valuation Office.
- (3,4) The Company does not own any preferred or common stocks.
- (5) The Company does not own any mortgage loans.
- (6) Loan-backed securities are stated at either amortized cost or fair value, in accordance with the NAIC Purposes and Procedures of the Securities Valuation Office.
- (7) The Company does not own any stocks of, or have any interest in, any subsidiaries.
- (8) The Company does not own any other invested assets.
- (9) The Company does not own any derivatives
- (10) The Company does utilize anticipated investment income as a factor in the premium deficiency calculation.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported ("IBNR"). Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified its capitalization policy from the prior year.
- (13) The Company does not write major medical insurance with prescription drug coverage.
- D. Going Concern

Not applicable

NOTE 2 Accounting Changes and Corrections of Errors

Not applicable

NOTE 3 Business Combinations and Goodwill

Not applicable

NOTE 4 Discontinued Operations

Not applicable

NOTE 5 Investments

A., B., C.

Not applicable

- D. Loan-Backed Securities
 - (1) Prepayment assumptions for loan-backed and structured securities were obtained from prepayment models that are sensitive to refinancing, turnover, equity take-out and other relevant factors. These assumptions are consistent with the current interest rate.
 - (2) Not applicable
 - (3) The Company had no securities with a recognized other-than-temporary impairment.
 - (4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):
 - a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ 351,266
2. 12 Months or Longer	\$ 72,184
b)The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 Months	\$ 4,279,046
2. 12 Months or Longer	\$ 427,784

(5) The Company employs a systematic methodology to determine if a decline in market value below book/adjusted carrying value is other-than-temporary. In determining whether a decline in fair value below book/adjusted carrying value is other-than-temporary, the Company evaluates several factors and circumstances, including the issuer's overall financial condition; the issuer's credit and financial strength ratings; the issuer's financial performance, including earnings trends, dividend payments, and asset quality; any specific events which may influence the operations of the issuer including governmental actions; a weakening of the general market conditions in the industry or geographic region in which the issuer operates; the length of time and degree to which the fair value of an issuer's securities remains below cost; the Company's intent and ability to hold the security until such time to allow for the expected recovery in value; and with respect to fixed maturity investments, any factors that might raise doubt about the issuer's ability to pay all amounts due according to the contractual terms. These factors are applied to all securities.

E., F., G., H., I., J., K.

Not applicable

- L. Restricted Assets
 - 1. Restricted Assets (Including Pledged)

No change

2-4.

Not applicable

M., N., O., P.

Not applicable

Q. Prepayment Penalty and Acceleration Fees

	Gene	ral Account	Pro	tected Cell
1. Number of CUSIPs		2		0
2 Aggregate Amount of Investment Income	\$	4 724	\$	_

R. Reporting Entity's Share of Cash Pool by Asset Type

Not applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

Not applicable

NOTE 7 Investment Income

Not Applicable

NOTE 8 Derivative Instruments

Not applicable

NOTE 9 Income Taxes

No change

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of Relationships

The Company is a wholly-owned subsidiary of The Hanover Insurance Company ("Hanover") which, in turn, is a wholly-owned subsidiary of Opus Investment Management, Inc. ("Opus"), which, in turn, is a wholly-owned non-insurance subsidiary of The Hanover Insurance Group, Inc. ("THG"), a publicly traded company incorporated in Delaware.

B. Detail of Transactions Greater than 1/2% of Admitted Assets

Not applicable

C. Transactions with related party who are not reported on Schedule Y

Not applicable

D. Amounts Due to or from Related Parties

At the end of the current reporting period, the Company reported \$9,110 as amounts due to an affiliated company. These arrangements require that intercompany balances be settled within 30 days.

E. Management, Service Contracts, Cost Sharing Arrangements

Companies affiliated with Hanover have entered into an intercompany Consolidated Service Agreement. Under the agreement, legal entities will be charged the cost of the service provided or expenses paid by the entity providing the service or paying the expense. In addition, these entities will be charged a portion of the costs associated with activities that are performed for the good of THG legal entities.

Investment related services are provided by Opus pursuant to an intercompany Advisory Agreement.

F. Guarantees or Contingencies for Related Parties

Not applicable

G. Nature of Relationships that Could Affect Operations

All outstanding shares of the Company are owned by Hanover.

H., I., J., K., L., M., N., O.

Not applicable

NOTE 11 Debt

Not applicable

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

The labor for the Company is provided and paid for by Hanover. As such, the Company is included in the benefit plans in force for Hanover. Charges for actual salary and benefit costs for services provided to the Company by Hanover employees are ceded 100% pursuant to the Company's Intercompany Reinsurance Agreement.

A., B., C., D., E., F., G., H., I.

Not applicable

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

A. Outstanding Shares

The Company has 400 shares of \$5,000 par value common stock authorized and 400 shares issued and outstanding

B. Dividend Rate of Preferred Stock

Not applicable

C-F. Dividend Restrictions

Pursuant to Indiana's statute, the maximum dividend and other distributions that an insurer may pay in any twelve-month period, without prior approval of the Indiana Insurance Commissioner, is limited to the greater of 10% of such insurer's statutory policyholder surplus as of the preceding December 31 or net income. Accordingly, the maximum dividend that may be paid at January 1, 2022 without prior approval from the Indiana Commissioner of Insurance is \$8,556,086. Dividends or distributions made within the preceding twelve months were considered in the above computations.

G-M.

Not applicable

NOTE 14 Liabilities, Contingencies and Assessments

A., B., C., D., E., F.

Not applicable

G. All Other Contingencies

The Company routinely engages in various legal proceedings in the normal course of business, including claims for punitive damages. In the opinion of management, none of such contingencies are expected to have a material effect on the Company's financial position, although it is possible that the results of operations in a particular quarter or annual period would be materially affected by an adverse development or unfavorable outcome.

NOTE 15 Leases

The Company has no material lease obligations at this time.

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not applicable

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A., B.

Not applicable

C. Wash Sales

The Company generally does not sell and reacquire securities within 30 days of the sale date. There were no wash sale transactions with a NAIC designation of 3 or below in the current year.

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not applicable

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

Not applicable

NOTE 20 Fair Value Measurements

Α.

- (1) Fair Value Measurements at Reporting Date
 - a. There were no assets carried at fair value at the end of the reporting period.
 - b. There were no liabilities carried at fair value at the end of the reporting period.
- (2) The Company does not have any Level 3 assets or liabilities measured at fair value at the end of the reporting period.
- (3) The reporting entity's policy is to recognize transfers in and transfers out as of the actual date of the event or change in circumstances that caused the transfer
- (4) For fair value measurements categorized within Level 2 of the fair value hierarchy, fair values of bonds are obtained by a quoted market price if available, otherwise, fair values are estimated using independent pricing sources or internally developed pricing models using discounted cash flow analyses.

The Company utilizes a third party pricing service for the valuation of the majority of its fixed maturity securities and receives one quote per security. When quoted market prices in an active market are available, they are provided by the pricing service as the fair value and such values are classified as Level 1. Since fixed maturities other than U.S. Treasury securities generally do not trade on a daily basis, the pricing service prepares estimates of fair value for those securities using pricing applications based on a market approach. Inputs into the fair value pricing applications which are common to all asset classes include benchmark U.S. Treasury security yield curves, reported trades of identical or similar fixed maturity securities, broker/dealer quotes of identical or similar fixed maturity securities and structural characteristics of the security, such as maturity date, coupon, mandatory principal payment dates, frequency of interest and principal payments and optional principal redemption features. Inputs into the fair value applications that are unique by asset class include, but are not limited to:

- U.S. government determination of direct versus indirect government support and whether any contingencies exist with respect to the timely payment of principal and interest.
- All other governments estimates of appropriate market spread versus underlying related sovereign treasury curves dependent on liquidity and direct or contingent support.
- Corporate bonds, which are included in Industrial and miscellaneous bonds overall credit quality, including assessments of the level and variability of: economic sensitivity; liquidity; corporate financial policies; management quality; regulatory environment; competitive position; ownership; restrictive covenants; and security or collateral.
- Municipal bonds, which are included in States, territories and possessions; Political subdivisions of states, territories and possessions; and Special revenue
 and special assessment obligations overall credit quality, including assessments of the level and variability of: sources of payment such as income, sales
 or property taxes, levies or user fees; credit support such as insurance; state or local economic and political base; natural resource availability; and
 susceptibility to natural or man-made catastrophic events such as hurricanes, earthquakes or acts of terrorism.
- Residential mortgage-backed securities, U.S. agency pass-thrus and collateralized mortgage obligations ("CMOs") which are included in U.S. governments and Special revenue and special assessment obligations estimates of prepayment speeds based upon: historical prepayment rate trends; underlying collateral interest rates; geographic concentration; vintage year; borrower credit quality characteristics; interest rate and yield curve forecasts; government or monetary authority support programs; tax policies; and delinquency/default trends.
- Residential mortgage-backed securities, non-agency CMOs, which are included in Industrial and miscellaneous estimates of prepayment speeds based
 upon: historical prepayment rate trends; underlying collateral interest rates; geographic concentration; vintage year; borrower credit quality characteristics;
 interest rate and yield curve forecasts; government or monetary authority support programs; tax policies; delinquency/default trends; and severity of loss
 upon default and length of time to recover proceeds following default.
- Commercial mortgage-backed securities, which are included in Industrial and miscellaneous bonds overall credit quality, including assessments of the
 value and supply/demand characteristics of: collateral type such as office, retail, residential, lodging, or other; geographic concentration by region, state,
 metropolitan statistical area and locale; vintage year; historical collateral performance including defeasance, delinquency, default and special servicer
 trends; and capital structure support features.
- Asset-backed securities, which are included in Industrial and miscellaneous bonds overall credit quality, including assessments of the underlying
 collateral type such as credit card receivables, auto loan receivables and equipment lease receivables; geographic diversification; vintage year; historical
 collateral performance including delinquency, default and casualty trends; economic conditions influencing use rates and resale values; and contract
 structural support features.

Generally, all prices provided by the pricing service, except actively traded securities with quoted market prices, are reported as Level 2.

The Company holds privately placed corporate bonds and certain other bonds that do not have an active market and for which the pricing service cannot provide fair values. The Company determines fair values for these securities using either matrix pricing or broker quotes. The Company will use observable market data to the extent it is available, but is also required to use a certain amount of unobservable judgment due to the illiquid nature of the securities involved. Additionally, the Company may obtain nonbinding broker quotes which are reported as Level 3.

- (5) Not applicable
- B. Not applicable

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Ac	Imitted Assets	(Level 1)	(Level 2)	(Level 3)	Net	Asset Value (NAV)	Not Praction (Carrying V	
Bonds	\$ 89,798,809	\$	97,876,430	\$ 15,381,805	\$ 74,417,004	\$ 1	\$	1	\$	-
Cash and Short Term										
Investments	\$ 984,895	\$	984,895	\$ 984,895	\$ -	\$ _	\$	-	\$	-

D., E.

Not applicable

NOTE 21 Other Items

A. Unusual or Infrequent Items

Not applicable

B. Troubled Debt Restructuring: Debtors

Not applicable

C. Other Disclosures

IBNR loss and loss adjustment expense reserves are allocated to the Company based on the proportion of the Company's earned premiums and case loss reserves relative to other affiliates in the Hanover Insurance Group. Fluctuations by affiliate and state may occur as a result of this re-estimation process.

The Company elected to use rounding to the nearest dollar in reporting amounts in the Statement, except as otherwise directed by instructions.

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-transferable Tax Credits

Not applicable

F. Subprime Mortgage Related Risk Exposure

The Company has reviewed its investments in mortgage-backed securities and has determined that these investments are not subprime.

G. Insurance-Linked Securities (ILS) Contracts

Not applicable

H. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

Not applicable

NOTE 22 Events Subsequent

Not applicable

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables

Individual Reinsurers with Unsecured Reinsurance Recoverables Exceeding 3% of Policyholder Surplus

No Change

B. Reinsurance Recoverable in Dispute

The Company had no reinsurance recoverable on paid and unpaid losses in dispute which exceeds 5% of the Company's policyholder surplus. The aggregate of the Company's disputed items did not exceed 10% of policyholder surplus.

C. Reinsurance Assumed and Ceded

No change

D.,E.,F.,G.,H.,I.,J.,K.

Not applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not applicable

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Not applicable

NOTE 26 Intercompany Pooling Arrangements

Not applicable

NOTE 27 Structured Settlements

Not applicable

NOTE 28 Health Care Receivables

Not applicable

NOTE 29 Participating Policies

Not applicable

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves

2. Date of the most recent evaluation of this liability

06/30/2022

3. Was anticipated investment income utilized in the calculation?

Yes [X] No []

NOTE 31 High Deductibles

Not applicable

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not applicable

NOTE 33 Asbestos/Environmental Reserves

Not applicable

NOTE 34 Subscriber Savings Accounts

Not applicable

NOTE 35 Multiple Peril Crop Insurance

Not applicable

NOTE 36 Financial Guaranty Insurance

Not applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring the filin 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?							
2.2	If yes, date of change:		<u>-</u>					
3.1	Is the reporting entity a member of an Insurance Holding Company System of an insurer? If yes, complete Schedule Y, Parts 1 and 1A.			Yes [X] No []				
3.2	Have there been any substantial changes in the organizational chart since the	ne prior quarter end?		Yes [] No [X]				
3.3	If the response to 3.2 is yes, provide a brief description of those changes.							
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?	?		Yes [X] No []				
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued	d by the SEC for the entity/group		0000944695				
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 the entity, NAIC Company Code, and state of don ceased to exist as a result of the merger or consolidation.	nicile (use two letter state abbreviation) for a	ny entity that has					
	1 Name of Entity	2 NAIC Company Code State of						
5.	If the reporting entity is subject to a management agreement, including third-in-fact, or similar agreement, have there been any significant changes regard if yes, attach an explanation.	party administrator(s), managing general age ding the terms of the agreement or principals	ent(s), attorney- involved? Yes [] No [] N/A [X				
6.1	State as of what date the latest financial examination of the reporting entity w	was made or is being made.	<u>-</u>	12/31/2019				
6.2	State the as of date that the latest financial examination report became avail date should be the date of the examined balance sheet and not the date the			12/31/2019				
6.3	State as of what date the latest financial examination report became available the reporting entity. This is the release date or completion date of the examinate).	nation report and not the date of the examina	tion (balance sheet	06/01/2021				
6.4	By what department or departments?							
6.5	Indiana Department of Insurance Have all financial statement adjustments within the latest financial examination statement filed with Departments?] No [] N/A [X				
6.6	Have all of the recommendations within the latest financial examination repo	ort been complied with?	Yes [] No [] N/A [X				
7.1	Has this reporting entity had any Certificates of Authority, licenses or registra 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 Fed	deral Reserve Board?		Yes [] No [X]				
8.2	If response to 8.1 is yes, please identify the name of the bank holding compa	any.						
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?			Yes [X] No []				
8.4	If response to 8.3 is yes, please provide below the names and location (city a regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office Insurance Corporation (FDIC) and the Securities Exchange Commission (SE	e of the Comptroller of the Currency (OCC), the	ne Federal Deposit					
	1 Aggillata Nama	2	3 4 5	6				
	Affiliate Name Opus Investment Management, Inc	ter, MA	FRB OCC FDIC	SEC YES				

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
Opus Investment Management, Inc	Worcester, MA				YES
	,				

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? (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;		Yes [X] No []
	(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 [X]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).		
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [] No [X]
	FINANCIAL		
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?		
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	\$	0
	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		
11.2	use by another person? (Exclude securities under securities lending agreements.) If yes, give full and complete information relating thereto:		Yes [] No [X]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		
13.	Amount of real estate and mortgages held in short-term investments:		
14.1 14.2	If yes, please complete the following:		
	1 Prior Year-End		2 Current Quarter
	Book/Adjusted		Book/Adjusted
1101	Carrying Value	_	Carrying Value
	Bonds \$ Preferred Stock \$		\$0 \$0
	Common Stock \$		\$0
	Short-Term Investments \$		\$0
	Mortgage Loans on Real Estate \$		\$0
	All Other \$		\$0
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	0	\$0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above\$	0	\$0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		Yes [] No [X]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?		
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date:		
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	q	
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2		
	16.3 Total payable for securities lending reported on the liability page.		

GENERAL INTERROGATORIES

	that comply with the re	al or Safekeeping Agreemen equirements of the NAIC Fina				ollowing:			
Rank of New York N	Name of Custoo	dian(s)	225 Liberty S	Cust	odian Address				
Dalik Of New TOLK W	le i i oii		223 Liberty 3	ireet, New Tork,	N1 10200				
or all agreements t		h the requirements of the NA	IC Financial Condi	tion Examiners Ha	andbook, provide	the name,			
1 Nam		2 Location(s)		Com	3 plete Explanation	(9)			
	` ′	2000001(0)				(0)			
	y changes, including r nation relating thereto	name changes, in the custodi	ian(s) identified in 1	7.1 during the cu	rrent quarter?		Yes]	No I
1 Old Cus		2 New Custodian	Date o	3 of Change	R	4 eason			
make investment de	ecisions on behalf of th	estment advisors, investment ne reporting entity. For assets nent accounts"; "handle sec	s that are managed curities"]						
	1 Name of Firm o	or Individual	2 Affiliati	on					
•	,								
17.5097 For those fi	irms/individuals listed	in the table for Question 17.5	5, do any firms/indiv	 viduals unaffiliated					
designated	with a "U") manage m	nore than 10% of the reporting	g entity's invested	assets?			Yes	[]	No
total assets	s under management a	with the reporting entity (i.e. daggregate to more than 50%	designated with a "l of the reporting en	J") listed in the ta tity's invested ass	ble for Question ets?	17.5, does the	Yes	[]	No
For those firms or in able below.	dividuals listed in the	table for 17.5 with an affiliation	on code of "A" (affil	iated) or "U" (una	ffiliated), provide	the information for th	ne		
able below.		table for 17.5 with an affiliatio	on code of "A" (affil	iated) or "U" (una	ffiliated), provide	the information for th		Inve: Mana	geme
able below. 1 Central Registratio Depository Numbe	n .r	2 Name of Firm or Individual		3 Legal Entity Iden	tifier (LEI)	4 Registered With		Inve: Mana Agre (IMA	stmer geme emer) File
able below. 1 Central Registratio	n er Opus Investment Ma	2 Name of Firm or Individual anagement,Inc		3 Legal Entity Iden	tifier (LEI)	4 Registered With		Inve Mana Agre (IMA	stmer geme emer) File
able below. 1 Central Registratio Depository Numbe 107569	n .r Opus Investment Ma quirements of the Pun	2 Name of Firm or Individual		3 Legal Entity Iden	tifier (LEI)	4 Registered With		Inve Mana Agre (IMA DS	stmer geme emer) File
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Able below. 1 Central Registratio Depository Number 107569	quirements of the Purpon necessary to permit available. gor is current on all coas an actual expectation as an actual expectation as an actual expectation and the purchased prior to entity is holding capitation was derived rivate letter rating held entity is not permitted	Name of Firm or Individual anagement, Inc	following elements security does not exact al payments. I contracted interested following elements. AIC Designation repeat by an NAIC CRE for examination by the PL security with	astment Analysis of for each self-designate or an NAIC Class of each self-designate or the security in its legal capacy state insurance in the SVO.	tifier (LEI) SEC Office been follow gnated 5GI secur RP credit rating for ignated PLGI security. city as a NRSRO regulators.	Registered With red? ity: or an FE or PL curity: which is shown	Yes	Invei	stmer geme emer) File No
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GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting If yes, attach a		per of a pooling a	arrangement, di	d the agreement	t or the reportin	ng entity's partic	cipation change?	γ Υε	es [] No [] N/A [X]
2.		ng entity reinsurd loss that may oc n explanation.								Yes [] M	No [X]
3.1	Have any of the	e reporting entity	s primary reins	urance contracts	s been canceled	?				Yes [] M	No [X]
3.2	If yes, give full	and complete in	formation theret	0.							
4.1	(see Annual St interest greater	liabilities for unpatement Instruct rathen zero?	ions pertaining t	o disclosure of	discounting for d	lefinition of " ta	bular reserves") discounted at	a rate of	Yes [] N	No [X]
			1		TOTAL DIS	COLINIT		DISC	COLINIT TAKE	N DURING PER	IOD
	1	2	3	4	5	6	7	8	9	10	11
Line	of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
		0.0	0.000			0	0	0	0		(
			TOTAL	0	0	0	0	0	0	0	(
5.	Operating Pero	J									0.000
	5.2 A&H cost c	ontainment perc	cent								0.000
	5.3 A&H expen	ise percent exclu	uding cost conta	inment expense	s						0.000
6.1	Do you act as a	a custodian for h	ealth savings ac	counts?						Yes [] M	No [X]
6.2	If yes, please p	rovide the amou	ınt of custodial f	unds held as of	the reporting dat	te			\$		0
6.3	Do you act as a	an administrator	for health saving	gs accounts?						Yes [] M	No [X]
6.4	If yes, please p	rovide the balan	ice of the funds	administered as	of the reporting	date			\$		0
7.	Is the reporting	entity licensed	or chartered, reg	jistered, qualifie	d, eligible or writ	ting business ir	n at least two st	ates?		Yes [X] N	No []

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

Yes [] No []

SCHEDULE F - CEDED REINSURANCE

		Snowing All Nev	w Reinsurers - Current Year to Date			_
1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
				7	(1 113 1/	
·····						
	+					
	-					
·····	•					• • • • • • • • • • • • • • • • • • • •
·····						· · · · · · · · · · · · · · · · · · ·
	<u> </u>					
·····						
	-					
	†					
·····						

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

		4	Current Year to Direct Premiu	Date - Allocated b	y States and Terr Direct Losses Paid (Dimentin	oo I Inneid
		1 Active	2	ims vvritten 3	Ulrect Losses Paid (Deducting Salvage) 5	Direct Loss 6	es Unpaid 7
		Status	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
	States, etc.	(a)	To Date	To Date	To Date	To Date	To Date	To Date
1.	AlabamaAL	N	0	0	0	0	0	0
2.	AlaskaAK	NN	0	0	0	0	0	0
3.	ArizonaAZ	NN.	0	0	0	0	 n	٥٥
4.	ArkansasAR	NN.	0			0	۰	٥٥
5.	CaliforniaCA Colorado CO	NN.	0			0		0
6.	ColoradoCO ConnecticutCT	N	0	0	0	0		٥٥
7. 8.	DelawareDE	N	Λ			0	۰	0
	District of ColumbiaDC	N.	0			0	0 N	0
10.	FloridaFL	N	0	0	0		0	٥
11.	GeorgiaGA	N	0	0	0	0	0	
12.	HawaiiHI	N	0	0	0	0	0	
13.	IdahoID	N	0	0	0	0	0	0
14.	Illinois IL	N.	0	0	0	0	0	0
15.	Indiana IN	L	508,382	5,054,892	2,186,245	3,825,768	2,856,871	6,787,903
16.	lowaIA	N	0	0	0	0	0	0
17.	Kansas KS	N	0	0	0	0	0	0
18.	KentuckyKY	N	0	0	0	0	0	0
19.	LouisianaLA	N		0	0	0	0	0
20.	MaineME	N.	0	0	0	0	0	0
21.	MarylandMD	N	0	0	0	0	0	0
	MassachusettsMA	N	0	0	0	0	0	0
23.	MichiganMI	L	424,723,076	366,498,753	228,792,760	180,626,249	655,973,109	679,269,495
24.	MinnesotaMN	N	0	0	0	0	0	0
25.	MississippiMS	N	0	0	0	0	0	0
26.	MissouriMO	N	0	0	0	0	0	0
27.	MontanaMT	N	0	0	0	0	0	0
28.	NebraskaNE	N	0	0	0	0	0	0
29.	NevadaNV	N	0	0	0	0	0	0
30.	New HampshireNH	N	0	0	0	0	0	0
31.	New JerseyNJ	N	0	0	0	0	0	0
32.	New MexicoNM	N	0	0	0	0	0	0
33.	New YorkNY	N	0	0	0	0	0	0
34.	North CarolinaNC	N	0	0	0	0	0	0
35.	North DakotaND	N	0	0	0	0	0	0
36.	OhioOH	N	0	0	0	0	0	0
37.	OklahomaOK	N	0	0	0	0	0	0
38.	OregonOR	N	0	0	0	0	0	0
39.	PennsylvaniaPA	N	0	0	0	0	0	0
40.	Rhode IslandRI	N	0	0	0	0	0	0
41.	South CarolinaSC	N	0	0	0	0	0	0
	South DakotaSD	N	0	0	0	0	0	0
43.	TennesseeTN	N	0	0	0	0	0	0
44.	TexasTX	N	0	0	0	0	0	0
	UtahUT	N	0	0	0	0	0	0
	VermontVT	N	0	0	0	0	0	0
47.	VirginiaVA	N	0	0	0	0	0	0
	WashingtonWA	N	0	0	0	0	0	0
	West VirginiaWV	N	0	0	0	0	0	0
	WisconsinWI	N	0	0	0	0	0	0
	WyomingWY	N	0	0	0	0	0	0
	American SamoaAS	N	0	0	0	0	0	0
	GuamGU	N	0	0		0	0	0
	Puerto RicoPR	NN	0		0	0	0	
	U.S. Virgin IslandsVI	N.	U		0	0	0	0
56.	Northern Mariana IslandsMP	N.	n	n	0	n	n	n
57.	CanadaCAN		n	n	n .	n	n	 N
	Aggregate Other Alien OT	XXX	.0	0	0	0	0	0
59.	Totals	XXX	425,231,458	371,553,645	230,979,005	184,452,017	658,829,980	686,057,398
55.	DETAILS OF WRITE-INS	////	120,201,400	37 1,000,010	_55,070,000	101, 102,011	300,020,000	333,307,000
58001.		XXX						
		XXX	<u> </u>					
58002.		XXX	1					
58003.		XXX						
oo998.	Summary of remaining write-ins for Line 58 from							
	overflow page	XXX	0	0	0	0	0	0
58999.	Totals (Lines 58001 through	1						
	58003 plus 58998)(Line 58	;						0
	above)	XXX	0	0	0	0	0	

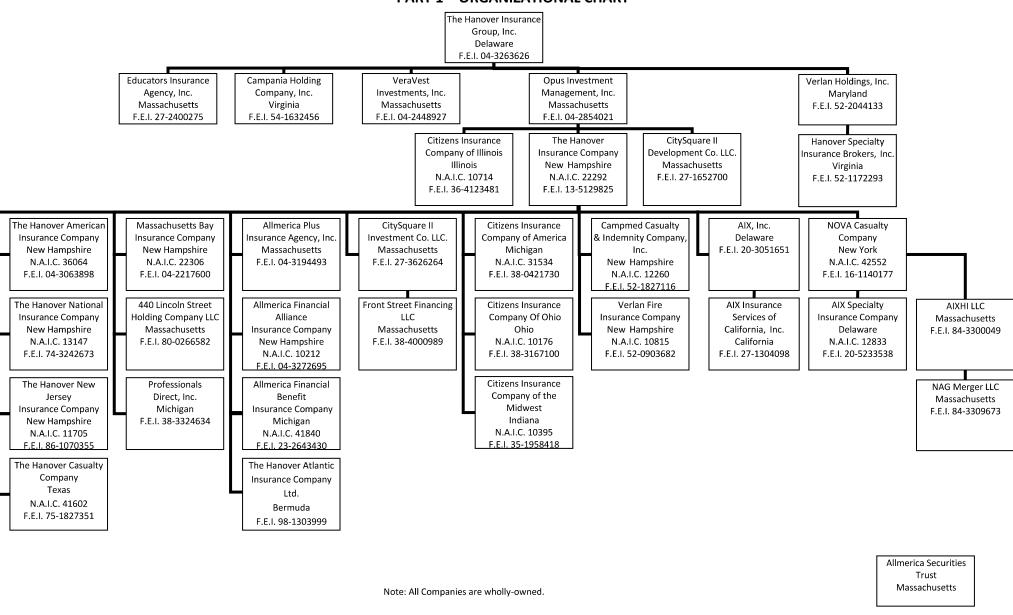
(a) Active Status Counts:

lines in the state of domicile.

.....2 R - Registered - Non-domiciled RRGs..... Q - Qualified - Qualified or accredited reinsurer.0 N - None of the above - Not allowed to write business in the state ...

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG..... E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other0

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



Affiliated Investment Management Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	2	J	7	5	6	,	8	9	10	11	_12	13	14	15	16
											Type	It .			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filina	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact.	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
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		Code		KSSD	CIK	international)			,	(5		\/	7
	The Hanover Insurance Group		80-0266582				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	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-1304098					CA	NIA	AIX, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
880Q.	The Hanover Insurance Group		20-5233538				AIX Specialty Insurance Company	DE	IA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
0000	The Hanover Insurance Group		20-3051651				AIX, Inc.	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
8800.	The Hanover Insurance Group	10212	04-3272695				Allmerica Financial Alliance Insurance Co	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
8800	The Hanover Insurance Group	41840	23-2643430				Allmerica Financial Benefit Insurance Co	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		04-3194493				Allmerica Plus Insurance Agency, Inc.	MA MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group						Allmerica Securities Trust		NIA	The Hanover Insurance Group, Inc.	Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group	40000	54-1632456				Campania Holding Company, Inc.	VA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
8800	The Hanover Insurance Group		52-1827116				Campmed Casualty & Indemnity Co. Inc.	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
8800.	The Hanover Insurance Group		38-0421730				Citizens Insurance Company of America	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
8800	The Hanover Insurance Group		36-4123481				Citizens Insurance Company of Illinois	IL	IA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
8800.	The Hanover Insurance Group		38-3167100				Citizens Insurance Company of Ohio	OH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
880Q	The Hanover Insurance Group	10395	35-1958418				Citizens Insurance Company of the Midwest	IN	RE	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		27-1652700				CitySquare II Development Co., L.L.C	MA	NIA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		27-3626264				CitySquare II Investment Co., L.L.C	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		27-2400275				Educators Insurance Agency, Inc.	MA	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		38-4000989				Front Street Financing LLC	MA	NIA	CitySquare II Investment Co. LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		52-1172293				Hanover Specialty Insurance Brokers, Inc	VA	NIA	Verlan Holdings, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
880Q	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	N0	
	The Hanover Insurance Group		84-3309673				NAG Merger LLC	MA	NIA	AIXHI LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
880Q	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	N0	
	The Hanover Insurance Group		04-2854021				Opus Investment Management, Inc.	MA	UIP	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		38-3324634				Professionals Direct, Inc.	MI	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
8800	The Hanover Insurance Group		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	
8800	The Hanover Insurance Group		75-1827351				The Hanover Casualty Company	TX	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
8800	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	
8800	The Hanover Insurance Group		04-3263626			New York Stock Exchange	The Hanover Insurance Group, Inc.	DE	UIP			0.000		N0	
880Q	The Hanover Insurance Group	13147	74-3242673				The Hanover National Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
8800	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	
8800	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	
						1		_							

		'			
Asterisk			EX	a n	
	. .				

PART 1 - LOSS EXPERIENCE

	Line of Business	1 Direct Premiums Earned	Current Year to Date 2 Direct Losses Incurred	3 Direct Loss Percentage	4 Prior Year to Date Direct Loss Percentage
1.	Fire			218.1	133.
2.1	Allied Lines			2.2	18.
2.1	Multiple peril crop		,	0.0	0.
2.2	Federal flood			0.0	0.
2.3	Private crop		0		0.
2.4	Private flood		0		0.
3.	Farmowners multiple peril		0		0.
	Homeowners multiple peril		63,008,403		91.
4. -	Commercial multiple peril		68,827		105.
5. 6.	Mortgage guaranty		*	0.0	0.
8.	Ocean marine		0		0.
9.	Inland marine		814,513		26.
10.	Financial guaranty		014,510		0.
11.1	Medical professional liability - occurrence		0		0.
11.2	Medical professional liability - claims-made		0		0.
12.	Earthquake		(6,768)		
13.1	Comprehensive (hospital and medical) individual			0.0	0.
13.1	Comprehensive (nospital and medical) individual Comprehensive (hospital and medical) group			0.0	0. 0.
13.2	Credit accident and health			0.0	0.
15.1	Vision only			0.0	0.
15.1	Dental only			0.0	0.
15.2	Disablity income			0.0	0.
15.4	Medicare supplement			0.0	0.
15.5	Medicaid Title XIX			0.0	0.
15.6	Medicare Title XVIII			0.0	0.
15.7	Long-term care			0.0	0.
15.7	Federal employees health benefits plan			0.0	0.
15.6	Other health			0.0	0.
16.	Workers' compensation			122.2	203.
17.1	Other liability - occurrence			69.2	30.
17.1	Other liability - claims-made			0.0	0.
17.2	Excess workers' compensation			0.0	0.
18.1	Products liability - occurrence			0.0	0.
18.2	Products liability - claims-made		0		0.
19.1	Private passenger auto no-fault (personal injury protection)				49.
19.1	Other private passenger auto liability		25,858,675		44.
19.2	Commercial auto no-fault (personal injury protection)		(23,616)		0.
19.4	Other commercial auto liability			0.0	0.
21.1	Private passenger auto physical damage			75.7	52.
21.1	Commercial auto physical damage			0.0	0.
22.	Aircraft (all perils)		0		0.
23.	Fidelity		0		0.
24.	Surety		0		0.
26.	Burglary and theft		0		0.
27.	Boiler and machinery		0		0.
28.	Credit		0		0.
20. 29.	International		0		00.
30.	Warranty		0		0
31.	Reinsurance - Nonproportional Assumed Property				
31.	Reinsurance - Nonproportional Assumed Property Reinsurance - Nonproportional Assumed Liability				
32. 33.	Reinsurance - Nonproportional Assumed Liability				
33. 34.	Aggregate write-ins for other lines of business		0	0.0	0.
		407,208,246	241,500,955	59.3	56.
35.	Totals	407,208,240	241,500,955	39.3	30.
2404	DETAILS OF WRITE-INS			0.0	_
3401.			0		0.
3402.			0		0.
3403.	0				-
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0.0	0.

PART 2 - DIRECT PREMIUMS WRITTEN

	Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire	516,972	843,810	436,561
2.1	Allied Lines	982,727	1,651,071	963,492
2.2	Multiple peril crop	0	0	0
2.3	Federal flood	0	0	0
2.4	Private crop	0	0	0
2.5	Private flood	0	0	
3.	Farmowners multiple peril	0	0	0
4.	Homeowners multiple peril	63,362,958	106,106,927	66,357,334
5.	Commercial multiple peril	(12,681)	140,239	130,264
6.	Mortgage guaranty	0	0	c
8.	Ocean marine			
9.	Inland marine	2,716,460	4,482,043	3,050,636
10.	Financial guaranty	0	0	
11.1	Medical professional liability - occurrence			0
11.2	Medical professional liability - claims-made			0
12.	Earthquake			244.854
13.1	Comprehensive (hospital and medical) individual			
13.2	Comprehensive (hospital and medical) group			
14.	Credit accident and health			
15.1	Vision only			0
15.2	Dental only		0	
15.3	Disablity income			
15.4	Medicare supplement			0
15.5	Medicaid Title XIX		0	0
15.6	Medicare Title XVIII		0	
15.7	Long-term care			
15.7	Federal employees health benefits plan			0
15.9	Other health			0
16.	Workers' compensation			211,288 4,575,728
17.1	Other liability - occurrence			
17.2	Other liability - claims-made		0	0
17.3	Excess workers' compensation			ں
18.1	Products liability - occurrence			0
18.2	Products liability - claims-made			0
19.1	Private passenger auto no-fault (personal injury protection)			
19.2	Other private passenger auto liability			69,534,438
19.3	Commercial auto no-fault (personal injury protection)			0
19.4	Other commercial auto liability			0
21.1	Private passenger auto physical damage			138,799,861
21.2	Commercial auto physical damage		0	
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety			
26.	Burglary and theft	0	0	0
27.	Boiler and machinery	0	0	0
28.	Credit	0	0	0
29.	International	0	0	(
30.	Warranty	0	0	(
31.	Reinsurance - Nonproportional Assumed Property	xxx	xxx	XXX
32.	Reinsurance - Nonproportional Assumed Liability	xxx	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines		2007	xxx
34.	Aggregate write-ins for other lines of business	0	0	(
35.	Totals	229,605,071	425,231,458	371,553,647
	DETAILS OF WRITE-INS			
3401.				
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	(

PART 3 (000 omitted) LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
											Prior Year-End	Prior Year-End	
					00001		0.0 0.1.1/	Q.S. Date Known			Known Case Loss	IBNR Loss and	Prior Year-End
			Total Prior	2022 Loss and	2022 Loss and LAE Payments on		Q.S. Date Known Case Loss and	Case Loss and LAE Reserves on			and LAE Reserves Developed	LAE Reserves Developed	Total Loss and LAE Reserve
		Prior Year-	Year-End Loss	LAE Payments on		Total 2022 Loss	LAE Reserves on			Total Q.S. Loss	(Savings)/	(Savings)/	Developed
Years in Which	Prior Year-End	End IBNR	and LAE	Claims Reported	Unreported	and LAE	Claims Reported	or Reopened	Q.S. Date IBNR	and LAE	Deficiency	Deficiency	(Savings)/
Losses	Known Case Loss	Loss and LAE	Reserves	as of Prior	as of Prior	Payments	and Open as of	Subsequent to	Loss and LAE	Reserves	(Cols.4+7	(Cols. 5+8+9	Deficiency
Occurred	and LAE Reserves	Reserves	(Cols. 1+2)	Year-End	Year-End	(Cols. 4+5)	Prior Year End	Prior Year End	Reserves	(Cols.7+8+9)	minus Col. 1)	minus Col. 2)	(Cols. 11+12)
1. 2019 + Prior													
2. 2020													
3. Subtotals 2020 + Prior													
4. 2021													
5. Subtotals 2021 + Prior													
6. 2022	xxx	xxx	xxx	xxx			XXX				xxx	xxx	xxx
7. Totals													
8. Prior Year-End Surplus											Col. 11, Line 7	Col. 12, Line 7	Col. 13, Line 7
As Regards Policyholders											As % of Col. 1 Line 7	As % of Col. 2 Line 7	As % of Col. 3 Line 7
. 55,5.3010	I										4	2.	2
											1.	۷.	J.

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 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.

	<u>-</u>	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 Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
	AUGUST FILING	
5.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	YES
	Explanations:	
1.		
2.		
3.		
4.		
	Bar Codes:	
1.	Trusteed Surplus Statement [Document Identifier 490]	
2.	Supplement A to Schedule T [Document Identifier 455]	
3.	Medicare Part D Coverage Supplement [Document Identifier 365]	
4.	Director and Officer Supplement [Document Identifier 505]	

STATEMENT AS OF JUNE 30, 2022 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted rying		
7.	Deduct current year's other than temporary impailment recognized		
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)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	wortgage Loans	1	2
		ı	Prior Year Ended
		Year to Date	December 31
			December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in lest parameter and symitment ees		
9.	Total foreign exchange change in book value/recorded investment excurse accrued atterest		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long-Term invested Assets		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
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)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	96,885,804	94,300,063
2.	Cost of bonds and stocks acquired		14,029,133
3.	Accrual of discount	26,946	80,292
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	(10,914)	(50,500)
6.	Deduct consideration for bonds and stocks disposed of	4,560,605	11,437,134
7.	Deduct amortization of premium	78,786	208,411
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.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	4,724	172,362
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	97,876,430	96,885,804
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	97,876,430	96,885,804

SCHEDULE D - PART 1B

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

<u> </u>	Ouring the Current Quarter to	2	3	/ Designation	5	6	7	8
	Book/Adjusted	2	3	4	Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Carrying Value	Carrying Value	Carrying Value	Carrying Value
	Beginning	During	During	During	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)		1,808,402	1, 178,559	171,424	88,262,954	89,064,221	0	86,415,922
2. NAIC 2 (a)	10,066,315	0	1,050,963	(203, 143)	10,066,315	8,812,209	0	10,469,882
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	98,329,269	1,808,402	2,229,522	(31,719)	98,329,269	97,876,430	0	96,885,804
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
14. Total Freiereu Stock					Ì	İ	i	

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open **N O N E**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE**

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	(Odon Equivalente)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	0
2.	Cost of cash equivalents acquired	0	3,099,811
3.	Accrual of discount	0	189
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	0	3,100,000
7.	Deduct amortization of premium	0	0
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	0
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	0	0

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **N O N E**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid **NONE**

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STATEMENT AS OF JUNE 30, 2022 OF THE CITIZENS INSURANCE COMPANY OF THE MIDWEST

SCHEDULE D - PART 3

Show All Long-Term	Pande and Stack	Acquired During the	Current Quarter

		SHOW All I	Long-Term Bonds and Stock Acquired During the Current Quarte	:1				
1 2	3	4	5	6	7	8	9	10
								NAIC
								Designation,
								NAIC
								Designation
								Modifier
								and
								SVO
				Number of			Paid for Accrued	Admini-
CUSIP		Date		Shares of			Interest and	strative
Identification Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
912828-V9-8 UNITED STATES TREASURY	1 Oreign	06/08/2022	MORGAN STANLEY CO	Otock		500,000	3,574	
91282C-ET-4 UNITED STATES TREASURY			JP Morgan Securities LLC		497,598	500,000	0	1.A
0109999999. Subtotal - Bonds - U.S. Governments	•	•			979,805	1,000,000	3.574	XXX
438701-Y9-9 HONOLULU HAWAII CITY & CNTY WASTEWTR SYS		06/22/2022	Southwest Securities			300,000		1.C FE
64990F-S9-6 NEW YORK STATE DORMITORY AUTHORITY		05/19/2022	PIPER JAFFRAY		567,024	600,000	4,340	1.B FE
090999999. Subtotal - Bonds - U.S. Special Revenues					828,597	900,000	5,779	XXX
250999997. Total - Bonds - Part 3					1,808,402	1,900,000	9,352	XXX
250999998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX
250999999. Total - Bonds					1,808,402	1,900,000	9,352	XXX
450999997. Total - Preferred Stocks - Part 3					0	XXX	0	XXX
450999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
450999999. Total - Preferred Stocks					0	XXX	0	XXX
598999997. Total - Common Stocks - Part 3					0	XXX	0	XXX
598999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX
598999999. Total - Common Stocks					0	XXX	0	XXX
599999999. Total - Preferred and Common Stocks					0	XXX	0	XXX
	-							
	-			ļ				
6009999999 - Totals		F			1.808.402	XXX	9.352	XXX

SCHEDULE D - PART 4

				Show All Lo	ong-Term Bo	onds and Sto	ck Sold, Red	deemed or C	Otherwise I	Disposed c	of During t	he Current	Quarter							
1	2	3 4	5	6	7	8	9	10	Ch	nange In Boo	k/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
	_						-		11	12	13	14	15					_,		NAIC
											10									Desig-
																				nation,
																				NAIC
												T-4-1	T-4-1							
												Total	Total					Daniel		Desig-
											Current	Change in	Foreign	5				Bond		nation
											Year's	Book/	Exchange	Book/				Interest/		Modifier
								Prior Year		Current	Other Than	n Adjusted	Change in	Adjusted	Foreign			Stock	Stated	and
								Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Dividends	Con-	SVO
CUSIP				Number of				Adjusted	Valuation	(Amor-	Impairmen	t Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For- Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	` 13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
36179V-DN-7	G2 MA6409 - RMBS		Paydown		17,867	17,867	18,344	18,615	0	(748)	0	(748)	0	17,867	0	0	0	217	01/20/2050	1.A
	G2 MA6530 - RMBS		Paydown		11,920	11,920	11,931	11,974	0	(54)	0	(54)	0	11,920	0	0	0	107	03/20/2050	1.A
	G2 MA7051 - RMBS		Paydown		23,280	23,280	24,284	24,278	0	(997)	0	(997)	0	23,280	0	0	0	190	12/20/2050	1.A
	GNR 2020-013 HB - CMO/RMBS		Paydown		48,984	48,984	50,331	49,945	0	(961)	0	(961)	0	48,984	0		0	585	12/20/2048	
	99. Subtotal - Bonds - U.S. Governme		_		102,051	102,051	104,890	104,811	0	(2,760)	0	(=,:,	0	102,051	0		0	1,099	XXX	XXX
882722-KE-0			Call @ 100.00		15,000	15,000	16,849	16,281	0	(37)	0			16,244	0	,,,,,	(1,244)	403	04/01/2029	
	99. Subtotal - Bonds - U.S. States, Te				15,000	15,000	16,849	16,281	0	(37)		(01)		16,244	0	(. , = ,	(1,244)	403	XXX	XXX
	COMMONWEALTH FING AUTH PA REV				20,000	20,000	20,100	20,014	0	(4)	0		0	20,010	0	(10)	(10)	563	06/01/2023	
	FH G08659 - RMBS				6,852	6,852	6,811	6,804	0	49	0	49	0	6,852	0	0	0	97	. 08/01/2045	
	FH G08727 - RMBS FH J18818 - RMBS		Paydown		13,051	13,051	13,359	13,369	0	(318)		(318)		13,051		0	0	180	10/01/2046 04/01/2027	1.A
	FH G60037 - RMBS		PaydownPaydown		6.626	6,626	6,442	6.438		188	0	188		6.626	o	0		83	10/01/2043	1.4
	FH G60602 - RMBS	06/01/2022	Pavdown		24,068	24,068	25,411	25,343	0	(1,274)	0	(1,274)	0	24.068	0	0	0	372	11/01/2043	1 A
	FNR 2012-129 TD - CMO/RMBS		Paydown		1,563	1,563	1,577	1,576	0	(13)	0	(13)	0	1,563	0	0	0	12	.05/25/2040	1.A
	FNR 2013-130 A - CMO/RMBS		Paydown		5,575	5,575	5,524	5,528	0	47	0	47	0	5,575	0	0	0	67	01/25/2044	1.A
	FHR 3936 AB - CMO/RMBS		Paydown		11,591	11,591	11,815	11,625	0	(35)	0	(35)	0	11,591	0	0	0	142	10/15/2026	1.A
	FN AS1380 - RMBS		Paydown		1,919	1,919	2,073	2, 156	0	(237)	0	(237)	0	1,919	0	0	0	33	12/01/2043	1.A
	FN ASS384 - RMBS		Paydown		7,114	7,114	7,491	7,548	0	(434)	0	(434)	0	7,114	0	0	0	116	07/01/2045	
	FHR 2666 BD - CMO/RMBS		Paydown		1,960	1,960	2,007	1,964	0	(4)	0	(4)	0	1,960	0	0	0	37	08/15/2023 02/01/2046	
	FN BC0247 - RMBS FN CA0522 - RMBS		Paydown Paydown		25,688	25,688	26,884	26,871		(1, 184)		(1, 184)	0	25,688		0	0	399 62	10/01/2046	1.4
	FN MA4366 - RMBS		Paydown		13,667	13.667	14,203	14, 159	n	(492)	0	(492)	0	13,667	n	0		141	06/01/2041	1.A
	KENTUCKY HSG CORP HSG REV		Call @ 100.00		100,000	100,000	100,000	100.000	0	0	0	0	0	100.000	0	0	0	2.808	.07/01/2022	
	NEBRASKA PUB PWR DIST REV		PIPER JAFFRAY		241,420	250,000	250,000	250,000	0	0	0	0	0	250,000	0	(8,580)	(8,580)	6,536		
090999999	99. Subtotal - Bonds - U.S. Special Re	evenues	•		489.445	498.025	502.033	501.694	0	(3,659)	0	(3,659)	0	498.035	0	(8.590)	(8.590)	11.683	XXX	XXX
012725-AC-1	ALBEMARLE CORP		Call @ 100.00		204,596	200,000	203,976	201,885	0	(302)	0	(302)	0	201,583	0	(1,583)	(1,583)	9,000	12/01/2024	2.C FE
	CVS HEALTH CORP				450,000	450,000	459,389	450,868	0	(868)	0	(868)	0	450,000	0	0	0	13,606		
	CATERPILLAR FINANCIAL SERVICES CORP		Maturity @ 100.00		0	0	0	0	0	0	0	0	0	0	0	0	0	(41)	02/26/2022	
	DIAGEO INVESTMENT CORP		Maturity @ 100.00		250,000	250,000	249,613	249,985	0	15	0	15	0	250,000	0	0	0	3,594	05/11/2022	
	DUKE ENERGY CORP HOME DEPOT INC		Call @ 100.00		200,000	200,000	189,538	199, 149	0	563	0	563	0	199,712	0	288	288 49	4,846 2.734	08/15/2022	
62944T-AE-5			Call @ 100.00		200,000	250,000	246,265	249,751		595		595		249,951	0	332	332	5,925	06/01/2022 09/15/2022	
	WFRBS 2012-C9 A3 - CMBS		Pavdown		62.279	62.279	63,205	62.338	0	(59)	0	(59)	0	62,279	0		0			
	99. Subtotal - Bonds - Industrial and N				1.616.875	1.612.279	1,607,326	1.613.049	0	143	0		0	1,613,192	0	(913)	(913)	40,450	XXX	XXX
	97. Total - Bonds - Part 4		iaiiiiatou)		2,223,370	2,227,354	2,231,098	2,235,836	0	(6,314)	0		0	2,229,522	0	(7	(10,748)	53,635	XXX	XXX
	98. Total - Bonds - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Bonds				2.223.370	2,227,354	2.231.098	2.235.836	0	(6.314)	0		0	2,229,522	0	_	(10.748)	53,635	XXX	XXX
	97. Total - Preferred Stocks - Part 4				2,223,370	XXX	2,231,090	2,200,000	0	(0,314)	0	(-,,	·	2,229,322	0		(10,740)	30,000	XXX	XXX
	98. Total - Preferred Stocks - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Preferred Stocks - Part 5				0	XXX	0		^^^	^^^	^^^		^^^	0	0		0	^^^	XXX	XXX
	99. Total - Preferred Stocks 97. Total - Common Stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0		0	0	XXX	XXX
					XXX	XXX	XXX	XXX	XXX		XXX	1 777	XXX	XXX	XXX	Ū	VVV 0	VVV	XXX	XXX
	98. Total - Common Stocks - Part 5							^^^		XXX		XXX		XXX		XXX	XXX	XXX		
	99. Total - Common Stocks	-1			0	XXX	0	0	0	0	0	0		Ů	0		0	0	XXX	XXX
	99. Total - Preferred and Common Sto	OCKS			0	XXX	0	0	0	0	0	v		0	0		0	0	XXX	XXX
600999999	99 - I Otais				2,223,370	XXX	2,231,098	2,235,836	0	(6,314)	0	(6,314)	0	2,229,522	0	(10,748)	(10,748)	53,635	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees **N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2 3 4			5	5 Book Balance at End of Each Month During Current Quarter				
			Amount of Interest Received	Amount of Interest Accrued	6	7	8		
		Rate of	During Current	at Current					
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*	
Bank of New York Mellon New York, NY		0.000	0	0	352,574	792,285	984,895	XXX	
0199998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See		2001	0				0	2001	
instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX	
0199999. Totals - Open Depositories	XXX	XXX	0	0	352,574	792,285	984,895	XXX	
0299998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	xxx	
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX	
0399999. Total Cash on Deposit	XXX	XXX	0	0	352,574	792,285	984,895	XXX	
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX	
					• • • • • • • • • • • • • • • • • • • •				
	· · · · · · · · · · · · · · · · · · ·								
								•	
								+	
								+	
								+	
					• • • • • • • • • • • • • • • • • • • •			*	
								*	
0599999. Total - Cash	XXX	XXX	0	0	352,574	792,285	984,895	XXX	

Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter NONE