

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2022

OF THE CONDITION AND AFFAIRS OF THE

Sompany Code 12833 Employer's ID Number 20-5233538
ited States of America Commenced Business 12/22/2006 , Wilmington, DE, US 19801-1120 , (City or Town, State, Country and Zip Code) 440 Lincoln Street (Street and Number) , 508-853-7200 , Garca Code) (Telephone Number) , Worcester, MA, US 01653-0002 , City or Town, State, Country and Zip Code) 440 Lincoln Street 440 Lincoln Street
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,508-853-7200-8557928
(Area Code) (Telephone Number)
WW.HANOVER.COM
508-853-7200-8557928
(Area Code) (Telephone Number)
,,508-853-6332
(FAX Number)
OFFICERS
Vice President & Treasurer Nathaniel William Clarkin
OTHER errigan Jr., Executive Vice President & GC Willard Ty-Lunn Lee, Executive Vice Presiden
Salvatore, Executive Vice President
TORS OR TRUSTEES Jeffrey Mark Farber Lindsay France Greenfield Willard Ty-Lunn Lee Denise Maureen Lowsley
Sa

State of Massachusetts County of Worcester

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

SS:

November 2022

John Conner Ro President

Charles Frederick Cronin Senior Vice President & Secretary

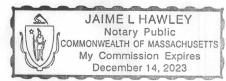
Subscribed and sworp to befo re me this 2nd dawo

a. Is this an original filing?...

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

Jaime L. Hawley Notary December 14, 2023





Yes [X] No []

	A33	ETS			
		1	Current Statement Date	3	4 December 31
			_	Net Admitted Assets	Prior Year Net
1	Bonds	Assets 53 967 941	Nonadmitted Assets	(Cols. 1 - 2) 53 967 941	Admitted Assets
2.	Stocks:		0		
۷.	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks		0	0	0
3.	Mortgage loans on real estate:	0			
5.	3.1 First liens	0	0	0	0
	3.2 Other than first liens.			0	0
4.	Real estate:				
ч.	4.1 Properties occupied by the company (less \$0				
	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
-		0			
5.	Cash (\$743,574), cash equivalents				
	(\$0) and short-term	740 574		740 574	1 000 000
	investments (\$				
6.	Contract loans (including \$0 premium notes)				0
7.	Derivatives				
8.	Other invested assets				0
9.	Receivables for securities				0
10.	Securities lending reinvested collateral assets			0	0
11.	Aggregate write-ins for invested assets	0	0		0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	54,711,515	0		
13.	Title plants less \$0 charged off (for Title insurers				
	only)				
14.	Investment income due and accrued		0		
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
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
	Amounts receivable relating to uninsured plans				0
	Current federal and foreign income tax recoverable and interest thereon				0
18.2	Net deferred tax asset		0		
19.	Guaranty funds receivable or on deposit				0
20.	Electronic data processing equipment and software	1,081,845	1,081,845	0	0
21.	Furniture and equipment, including health care delivery assets				
	(\$0)				0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23.	Receivables from parent, subsidiaries and affiliates	0	0	0	
24.	Health care (\$0) and other amounts receivable				0
25.	Aggregate write-ins for other than invested assets	1,541,151	1,541,151	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and	F0 445 460	0.000.000	FF 100 110	F4 453 663
	Protected Cell Accounts (Lines 12 to 25)		2,622,996		
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	58,115,409	2,622,996	55,492,413	54,457,807
	DETAILS OF WRITE-INS	,,	_,,	,,	•••,••••,•••
101.		0	0	0	0
101.					0
102.					
	Summary of remaining write-ins for Line 11 from overflow page				
198. 100		0		0	0
199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)		-	0	0
501.	Other Non-admitted Assets				0
2502.					
503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	1,541,151	1,541,151	0	0

ASSETS

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Statement Date	2 December 31, Prior Year
1.	Losses (current accident year \$0)		0
2.	Reinsurance payable on paid losses and loss adjustment expenses		0
3.	Loss adjustment expenses		0
4.	Commissions payable, contingent commissions and other similar charges	0	0
5.	Other expenses (excluding taxes, licenses and fees)		0
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		0
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		
7.2	Net deferred tax liability		0
8.	Borrowed money \$0 and interest thereon \$0		0
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
	including warranty reserves of \$		
	including \$0 for medical loss ratio rebate per the Public Health Service Act)		0
10.	Advance premium		0
11.	Dividends declared and unpaid:		
	11.1 Stockholders		0
	11.2 Policyholders		0
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties		0
14.	Amounts withheld or retained by company for account of others		0
15.	Remittances and items not allocated		0
16.	Provision for reinsurance (including \$0 certified)		0
17.	Net adjustments in assets and liabilities due to foreign exchange rates		0
18.	Drafts outstanding		0
19.	Payable to parent, subsidiaries and affiliates		0
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		0
25.	Aggregate write-ins for liabilities		0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		263,640
20.			
	Protected cell liabilities		
28.			
29.	Aggregate write-ins for special surplus funds		
30.			
31.	Preferred capital stock		0
32.	Aggregate write-ins for other than special surplus funds		0
33.	Surplus notes		
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)		3,525,391
36.	Less treasury stock, at cost:		
	36.10 shares common (value included in Line 30 \$		0
	36.20 shares preferred (value included in Line 31 \$		0
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)		54,194,167
38.	Totals (Page 2, Line 28, Col. 3)	55,492,413	54,457,807
	DETAILS OF WRITE-INS		
2501.		0	0
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0
2901.			0
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page		0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201.			0
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		.0
	Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

STATEMENT OF INCOME

		1	2	3
		Current Year to Date	Prior Year to Date	Prior Year Ended December 31
	UNDERWRITING INCOME		to Dute	December of
1. F	Premiums earned:			
	I.1 Direct (written \$			
	1.2 Assumed (written \$			
	I.3 Ceded (written \$			
	DEDUCTIONS:		0	0
2. L	Losses incurred (current accident year \$			
	2.1 Direct			
	2.2 Assumed			
	2.3 Ceded	, ,		, ,
	2.4 Net			0
3. L	Loss adjustment expenses incurred	0	0	0 .0
	Other underwriting expenses incurred			0
6.	Fotal underwriting deductions (Lines 2 through 5)	0		.0
	Net income of protected cells		0	0
8. 1	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	0	0	0
	INVESTMENT INCOME			
	Net investment income earned			
10. N	Net realized capital gains (losses) less capital gains tax of \$(1,537)	(10,377)	(13,391)	
11. 1	Net investment gain (loss) (Lines 9 + 10)	1,018,592	1, 129, 386	1,593,537
40				
12. 1	Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 0 amount charged off \$ 0)	0	0	٥
13. F	S		0	0
	Aggregate write-ins for miscellaneous income		0	0
	Fotal other income (Lines 12 through 14)		0	0
16. N	Net income before dividends to policyholders, after capital gains tax and before all other federal			
	and foreign income taxes (Lines 8 + 11 + 15)			
	Dividends to policyholders	0	0	0
18. 1	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	1 018 592	1 129 386	1,593,537
19. F	Federal and foreign income taxes incurred	211,010	221,652	223,870
	Net income (Line 18 minus Line 19)(to Line 22)	807,582	907,734	1,369,667
	CAPITAL AND SURPLUS ACCOUNT			· · ·
	Surplus as regards policyholders, December 31 prior year		55,801,534	55,801,534
	Net income (from Line 20)			1,369,667
	Net transfers (to) from Protected Cell accounts	0	0	0
	Change in net unrealized capital gains (losses) less capital gains tax of \$0	0	0	0
25. 0	Change in net unrealized foreign exchange capital gain (loss)			0
	Change in net deferred income tax Change in nonadmitted assets			
	Change in provision for reinsurance			
	Change in surplus notes		0	.0
	Surplus (contributed to) withdrawn from protected cells			0
31. (Cumulative effect of changes in accounting principles	0	0	0
	Capital changes:			
	32.1 Paid in		0	0
			0	0
	32.3 Transferred to surplus		0	0
	Surplus adjustments: 33.1 Paid in	0	0	0
	33.2 Transferred to capital (Stock Dividend)		0	0
	33.3 Transferred from capital		0	0
34. N	Net remittances from or (to) Home Office	0	0	0
	Dividends to stockholders	0	0	(2,000,000)
	Change in treasury stock		0	0
	Aggregate write-ins for gains and losses in surplus	0	0	0
	Change in surplus as regards policyholders (Lines 22 through 37)	(97,263)	(213, 171)	(1,607,367)
1	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	54,096,904	55,588,363	54,194,167
0501.	DETAILS OF WRITE-INS	0	0	٥
0503.				
	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.		0	0	0
1402				
1403				
	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
		0	0	0
3702 3703				
3703	Summary of remaining write-ins for Line 37 from overflow page		0	0

CASH FLOW

	CASITIECT			
		1 Current Year	2 Prior Year	3 Prior Year Ended
	Cash from Operations	To Date	To Date	December 31
1.	Premiums collected net of reinsurance	1 154 514	193 500	
2.	Net investment income			1,537,188
3.	Miscellaneous income		0	0
4.	Total (Lines 1 to 3)		1,333,514	1,772,788
5.	Benefit and loss related payments			, ,
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions			0
8.	Dividends paid to policyholders		.0	
9.	Federal and foreign income taxes paid (recovered) net of \$(1,537) tax on capital			
0.	gains (losses)	253,999	105,000	194,000
10.	Total (Lines 5 through 9)		(1,238,610)	(1,149,610
11.	Net cash from operations (Line 4 minus Line 10)	1,925,719	2,572,124	2,922,398
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	4,610,631	4,822,991	7,556,541
	12.2 Stocks	0	0	
	12.3 Mortgage loans		0	0
	12.4 Real estate		0	
	12.5 Other invested assets		0	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds	0	300,000	(
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	4,610,631	5, 122, 991	7,556,541
13.	Cost of investments acquired (long-term only):	,,	·····	, , , , , , , , , , , , , , , , , , ,
	13.1 Bonds	6 055 575	6 157 568	8 202 568
	13.2 Stocks			
	13.3 Mortgage loans			0
	13.4 Real estate	0	0	
	13.5 Other invested assets		0	0
	13.6 Miscellaneous applications		0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)		6,157,568	8,202,568
14.	Net increase (or decrease) in contract loans and premium notes		0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(1,444,944)	(1,034,577)	(646,027
	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	
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	
	16.5 Dividends to stockholders	0	0	
	16.6 Other cash provided (applied)		(1,418,335)	(1,135,540
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(1,135,600)	(1,418,335)	(1,403,174
		(1,100,000)	(1,10,000)	(1,100,111
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	/		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(654,825)		
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year			
	19.2 End of period (Line 18 plus Line 19.1)	743,574	644,414	1,398,399
	upplemental disclosures of cash flow information for non-cash transactions:	- '	· 1	
	01. Bonds sold in settlement of stockholder dividend 02. Accrued interest on bonds sold in settlement of stockholder dividend		0 .0	(1,716,64 (15,725
20.00			Ū	

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of AIX Specialty Insurance Company ("the Company") are presented on the basis of accounting practices prescribed or permitted by the Delaware Insurance Department.

The State of Delaware Insurance Department recognizes only statutory accounting practices prescribed or permitted by the State of Delaware for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Delaware 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 Delaware. 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 Delaware is shown below:

	SSAP #	F/S Page	F/S Line #	2022	2021
NET INCOME	00/11 #	- rugo		 LULL	
(1) State basis (Page 4, Line 20, Columns 1 & 3)	xxx	XXX	XXX	\$ 807,582	\$ 1,369,667
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:				\$ -	\$ -
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:				\$ -	\$ -
(4) NAIC SAP (1-2-3=4)	XXX	XXX	xxx	\$ 807,582	\$ 1,369,667
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	xxx	XXX	XXX	\$ 54,096,904	\$ 54,194,167
(6) State Prescribed Practices that are an increase/(decrease)	from NAIC SA	P:		\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) fi	rom NAIC SAF	D :		\$ -	\$ -
(8) NAIC SAP (5-6-7=8)	xxx	xxx	XXX	\$ 54,096,904	\$ 54,194,167

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) The Company does not own any common stocks.
- (4) The Company does not own any preferred 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

Mortgage Loans, including Mezzanine Real Estate Loans Α.

The Company does not own any mortgage loans.

В. Debt Restructuring

The Company did not have any restructured debt.

С Reverse Mortgages

The Company does not own any reverse mortgages.

- Loan-Backed Securities D.
 - (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 and economic environment.
 - (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-recongized interest related impairment remains):

a) The aggregate amount of unrealized losses:	
1. Less than 12 Months	\$ 267,121
2. 12 Months or Longer	\$ 78,743
b)The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 Months	\$ 2,507,595
2. 12 Months or Longer	\$ 323,883

(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 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

Restricted Assets 1

1. Restricted Assets (Including Pledged)

					Gros	s (Admitt	ed &	& Nonadmit	ed)	Restricted				
					Curr	ent Year						6		7
		1		2		3		4		5				
Restricted Asset Category	То	otal General Account (G/A)	P Ce	G/A upporting rotected II Account Activity (a)	Pro Cell Res	Fotal otected Account stricted ssets	Ce	Protected ell Account Assets Supporting A Activity (b)		Total (1 plus 3)	F	Total ⁻ rom Prior Year	(De	ncrease/ ecrease) (5 minus 6)
		(G/A)		(a)	A	33513		(U)		(1 plus 3)		Tear	-	ninus 0)
 a. Subject to contractual obligation for which liability is not shown b. Collateral held under security lending 	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
agreements	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
c. Subject to repurchase agreements	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
d. Subject to reverse repurchase agreements	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
e. Subject to dollar repurchase agreements f. Subject to dollar reverse repurchase	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
agreements	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
g. Placed under option contracts h. Letter stock or securities restricted as to sale	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
 excluding FHLB capital stock 	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
i. FHLB capital stock	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
j. On deposit with states	\$	3,651,456	\$	-	\$	-	\$	-	\$	3,651,456	\$	3,653,055	\$	(1,599)
k. On deposit with other regulatory bodies I. Pledged collateral to FHLB (including assets	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
backing funding agreements) m. Pledged as collateral not captured in other	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
categories	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
n. Other restricted assets	\$	4,229,141	\$	-	\$	-	\$	-	\$	4,229,141	\$	3,489,046	\$	740,095
o. Total Restricted Assets	\$	7,880,597	\$	-	\$	-	\$	-	\$	7,880,597	\$	7,142,101	\$	738,496
(a) Subset of Column 1														

(b) Subset of Column 3

				Currer	nt Year	
		8		9		ntage
					10	11
Restricted Asset Category		Total Non- admitted Restricted	F	Total Admitted Restricted 5 minus 8)	Gross (Admitted & Non- admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown b. Collateral held under security lending	\$	-	\$	-	0.000%	0.000%
agreements	\$	-	\$	-	0.000%	0.000%
c. Subject to repurchase agreements	\$	-	\$	-	0.000%	0.000%
d. Subject to reverse repurchase agreements	\$	-	\$	-	0.000%	0.000%
e. Subject to dollar repurchase agreements f. Subject to dollar reverse repurchase	\$	-	\$	-	0.000%	0.000%
agreements	\$ \$	-	\$ \$	-	0.000%	0.000%
g. Placed under option contracts h. Letter stock or securities restricted as to sale	Ф	-	Э	-	0.000%	0.000%
- excluding FHLB capital stock	\$	-	\$	-	0.000%	0.000%
i. FHLB capital stock	\$	-	\$	-	0.000%	0.000%
j. On deposit with states	\$	-	\$	3,651,456	6.283%	6.580%
k. On deposit with other regulatory bodies	\$	-	\$	-	0.000%	0.000%
I. Pledged collateral to FHLB (including assets backing funding agreements) m. Pledged as collateral not captured in other	\$	-	\$	-	0.000%	0.000%
categories	\$	-	\$	-	0.000%	0.000%
n. Other restricted assets	\$	1,541,151	\$	2,687,990	7.277%	4.844%
o. Total Restricted Assets	\$	1,541,151	\$	6,339,446	13.560%	11.424%

(c) Column 5 divided by Asset Page, Column 1, Line 28 (d) Column 9 divided by Asset Page, Column 3, Line 28

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not applicable

3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

		G	ross (Admitte	d & Nonadmi	itted) Restrict	ed		8	Perce	entage
			Current Year			6	7		9	10
	1 2 3		4	5						
Description of Assets	Total General Account (G/A)	Protected Cell Account Activity	Cell Account (S/A)	Protected Cell Account Assets Supporting G/A Activity (b)		Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
Held in Trust for New York Surplus Lines	\$ 2.687.990	\$ -	s -		\$ 2,687,990	\$ 2.582.142	\$ 105.848	\$ 2,687,990	4.625%	4.844%
Third Party Administrator Cash			\$-	-	\$ 1,541,151	\$ 906,904			2.652%	
Total (c)	\$ 4 229 141	s -	\$ -	\$ -	\$ 4 229 141	\$ 3 489 046	\$ 740.095	\$ 2 687 990	7 277%	4 844%

(a) Subset of column 1

(b) Subset of column 3 (c) Total Line for Columns 1 through 7 should equal 5L(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)n Columns 9 through 11 respectively.

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Not applicable

M., N., O., P.

Not applicable

Q. Prepayment Penalty and Acceleration Fees

	General Account	Protected Cell
1. Number of CUSIPs	1	0
2. Aggregate Amount of Investment Income	\$4,596	\$0

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

1.

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:

		As of	of Current	riod		1	2/31/2021			Change							
		(1)		(2)	(2) (Co		(4)		(5)		(6) (Col. 4 + 5)		(7) Col. 1 - 4)	(8) (Col. 2 - 5)		(0	(9) Col. 7 + 8)
	(Ordinary		Capital	`	Total	Ordinary		Capital	`	Total	`	Ordinary		Capital	,	Total
(a) Gross Deferred Tax Assets	\$	434,904	\$	-	\$	434,904	\$ 190,450	\$		\$	190,450	\$	244,454	\$	-	\$	244,454
(b) Statutory Valuation Allowance Adjustment	\$	-	\$	-	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$	434,904	\$	-	\$	434,904	\$ 190,450	\$	-	\$	190,450	\$	244,454	\$	-	\$	244,454
(d) Deferred Tax Assets Nonadmitted	\$	-	\$	-	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$	434,904	\$	-	\$	434,904	\$ 190,450	\$		\$	190,450	\$	244,454	\$	-	\$	244,454
(f) Deferred Tax Liabilities	\$	-	\$	38,217	\$	38,217	\$ -	\$	34,291	\$	34,291	\$	-	\$	3,926	\$	3,926
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$	434,904	\$	(38,217)	\$	396,687	\$ 190,450	\$	(34,291)	\$	156,159	\$	244,454	\$	(3,926)	\$	240,528

2.

		As of	End	of Current	Per	iod		1	2/31/2021					(Change			
		(1)		(2)	(0	(3) Col. 1 + 2)	(4)		(5)	((6) Col. 4 + 5)		(7) Col. 1 - 4)		(8) Col. 2 - 5	5)	(C	(9) ol. 7 + 8
	C	ordinary		Capital		Total	Ordinary		Capital		Total	(Ordinary		Capital			Total
Admission Calculation Components SSAP No. 101																		
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$	403,018	\$	-	\$	403,018	\$ 190,450	\$	-	\$	190,450	\$	212,568	\$		-	\$	212,56
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$	31,886	\$	-	\$	31,886	\$ -	\$	-	\$	-	\$	31,886	\$		-	\$	31,88
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$	31,886	\$	-	\$	31,886	\$ -	\$	-	\$	-	\$	31,886	\$		-	\$	31,88
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.		xxx		XXX	\$	8,055,033	XXX		XXX	\$	8,105,701		XXX		XXX		\$	(50,66
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$	-	\$	-	\$	-	\$ -	\$	-	\$	-	\$	-	\$		-	\$	
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$	434,904	\$	-	\$	434,904	\$ 190,450	\$	-	\$	190,450	\$	244,454	\$		-	\$	244,45

3.

a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.

2022	2021
11016.000%	11086.000%
\$53,700,217	\$54,038,008

4. Tax Planning Strategies

	As of End o	f Curre	nt Period		12/31	/202	21	Cha	Change		
	(1)		(2)		(3)		(4)	((5) Col. 1 - 3)	(0	(6) Col. 2 - 4)
	Ordinary		Capital		Ordinary		Capital		`Ordinary ´		Capital
Impact of Tax Planning Strategies:											
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.											
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 434,904	\$	-	\$	190,450	\$	-	\$	244,454	\$	-
 Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies 	0.000	/6	0.000%		0.000%		0.000%		0.000%		0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 434,904		-	\$	190,450	\$	-	\$	244,454	\$	-
 Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies 	0.000	%	0.000%		0.000%		0.000%		0.000%		0.000%

Yes [] No [X]

b. Do the Company's tax-planning strategies include the use of reinsurance?

B. The Company does not have any deferred tax liabilities that are not recognized for amounts described in Accounting Standards Codification 740, Income Tax.

C. Current income taxes incurred consist of the following major components:

	(1) As of End of	(2)	(3) (Col. 1 - 2)
1. Current Income Tax	Current Period	12/31/2021	Change
(a) Federal	\$ 211,010	\$ 223,870	\$ (12,860)

	(b) Foreign	\$	-	\$	-	\$	-
	(c) Subtotal	\$	211,010	\$	223,870	\$	(12,860)
	(d) Federal income tax on net capital gains	\$	(1,537)	\$	28,947	\$	(30,484)
	(e) Utilization of capital loss carry-forwards	\$	(1,001)	\$	_0,0	\$	(00,101)
	(f) Other	\$	_	\$	_	\$	_
	(g) Federal and foreign income taxes incurred	\$	209,473	\$	252,817	\$	(43,344)
	(g) rederal and loreign income taxes incurred	Ψ	209,470	Ψ	252,017	Ψ	(+0,0++)
2	Deferred Tax Assets:						
	(a) Ordinary:						
	(1) Discounting of unpaid losses	\$	-	\$	-	\$	-
	(2) Unearned premium reserve	\$	-	\$	-	\$	-
	(3) Policyholder reserves	\$	_	\$	_	\$	_
	(4) Investments	\$	_	\$	-	\$	_
	(5) Deferred acquisition costs	\$	_	\$	_	\$	_
	(6) Policyholder dividends accrual	φ \$	-	\$	_	\$	-
	(7) Fixed Assets	φ \$	-	ф \$	-	φ \$	-
		φ \$	-	φ \$	-	φ \$	-
	 (8) Compensation and benefits accrual (0) Density accrual 	э \$	-		-	э \$	-
	(9) Pension accrual		-	\$	-		-
	(10) Receivables - nonadmitted	\$	-	\$	-	\$	-
	(11) Net operating loss carry-forward	\$	-	\$	-	\$	-
	(12) Tax credit carry-forward	\$	-	\$	-	\$	-
	(13) Other (including items <5% of total ordinary tax assets)	\$	434,904	\$	190,450	\$	244,454
	(99) Subtotal	\$	434,904	\$	190,450	\$	244,454
	(b) Statutory valuation allowance adjustment	\$	-	\$	-	\$	-
	(c) Nonadmitted	\$	-	\$	-	\$	-
	(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$	434,904	\$	190,450	\$	244,454
	(e) Capital:						
	(1) Investments	\$	-	\$	-	\$	-
	(2) Net capital loss carry-forward	\$	-	\$	-	\$	-
	(3) Real estate	\$	-	\$	-	\$	-
	(4) Other (including items <5% of total ordinary tax assets)	\$	-	\$	-	\$	-
	(99) Subtotal	\$	-	\$	-	\$	-
	(f) Statutory valuation allowance adjustment	\$	-	\$	-	\$	-
	(g) Nonadmitted	\$	-	\$	-	\$	-
	(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$	-	\$	-	\$	-
	(i) Admitted deferred tax assets (2d + 2h)	\$	434,904	\$	190,450	\$	244,454
3.	Deferred Tax Liabilities:						
5.	(a) Ordinary:						
		\$		\$		\$	
	(1) Investments(2) Fixed Assets	φ \$	-	э \$	-	φ \$	-
		φ \$	-	φ \$	-	φ \$	-
	 (3) Deferred and uncollected premium (4) Definite later recentles 	φ \$	-	φ \$	-	φ \$	-
	 (4) Policyholder reserves (5) Other (including items <5%) of total and incruised toy lipbilities) 	ф \$	-	э \$	-	э \$	-
	(5) Other (including items <5% of total ordinary tax liabilities)	ծ Տ	-	Դ Տ	-	Դ Տ	-
	(99) Subtotal (b) Capital:	φ	-	φ	-	φ	-
	(1) Investments	\$	38,217	\$	34,291	\$	3,926
		э \$	30,217	э \$	54,291	э \$	3,920
	 (2) Real estate (3) Other (including items <5% of total capital tax liabilities) 	ъ \$	-	э \$	-	э \$	-
	(3) Other (including items <5% of total capital tax liabilities)	ծ \$	-	э \$	-	ծ Տ	-
	(99) Subtotal	\$ \$	38,217 38,217	Դ Տ	34,291 34,291	ֆ Տ	3,926 3,926
	(c) Deferred tax liabilities (3a99 + 3b99)	ֆ Տ	38,217	Դ Տ	156,159	ֆ Տ	3,926
4. ľ	let deferred tax assets/liabilities (2i - 3c)	Ψ	000,007	Ψ	150,158	Ψ	270,020

The change in net deferred income taxes is comprised of the following, exclusive of non-admitted assets:

			(1)		(2)		(3)
		As of End of					(Col. 1 - 2)
		Current Period			12/31/2021		Change
Adjusted gross deferred tax assets	5	\$	434,904	\$	190,450	\$	244,454
Total deferred tax liabilities	5	\$	38,217	\$	34,291	\$	3,926
Net deferred tax assets (liabilities)		\$	396,687	\$	156,159	\$	240,528
Change in net deferred income tax						\$	240,528

D. Reconciliation of Federal Income Tax Rate to Actual Effective Tax Rate

The significant items causing a difference between the statutory federal income tax rate and the Company's effective income tax rate are as follows:

	As of End of Cur	rent Period
	Tax	Rate
Tax provision at statutory rate	\$ 213,582	21.0%
Non-admitted assets	\$ (240,528)	-23.6%
Return to provision & other	\$ (4,109)	-0.4%
Total	\$ (31,055)	-3.0%
	As of End of Cur	rent Period
	 Tax	Rate
Federal income taxes incurred	\$ 211,010	20.8%
Realized capital gains tax	\$ (1,537)	-0.2%
Change in net deferred income taxes	\$ (240,528)	-23.6%
Total statutory income taxes	\$ (31,055)	-3.0%

E. Operating Loss and Tax Credit Carryforwards

1. At the end of the current reporting period, the Company has no net operating loss carryforwards, and no capital loss carryforwards.

2. The Company has the following federal income taxes which are available for recoupment in the event of future losses:

For the tax year 2021:	\$ 214,699
For the tax year 2022:	\$ 188,319

3. At the end of the current reporting period, the Company has no deposits under section 6603 of the Internal Revenue Service Code.

F. Consolidated Federal Income Tax Return

1. The Company's Federal Income Tax Return is consolidated with the following affiliated companies:

440 Lincoln Street Holding Company LLC	Massachusetts Bay Insurance Company
AIX, Inc.	NOVA Casualty Company
AIX Insurance Services of California, Inc.	OPUS Investment Management Inc
Allmerica Financial Alliance Insurance Company	Professionals Direct Inc
Allmerica Financial Benefit Insurance Company	The Hanover American Insurance Company
Allmerica Plus Insurance Agency, Inc.	The Hanover Atlantic Insurance Company Ltd.
Campania Holding Company, Inc.	The Hanover Casualty Company
Campmed Casualty & Indemnity Company, Inc.	The Hanover Insurance Company
Citizens Insurance Company of America	The Hanover Insurance Group, Inc.
Citizens Insurance Company of Illinois	The Hanover National Insurance Company
Citizens Insurance Company of Ohio	The Hanover New Jersey Insurance Company
Citizens Insurance Company of the Midwest	Veravest Investment Inc
Educators Insurance Agency, Inc.	Verlan Fire Insurance Company
Hanover Specialty Insurance Brokers, Inc.	Verlan Holdings Inc

- 2. The Board of Directors has delegated to Company Management, the development and maintenance of appropriate Federal Income Tax allocation policies and procedures, which are subject to written agreement between the companies. The Federal Income tax for all subsidiaries in the consolidated return of The Hanover Insurance Group, Inc. ("THG") is calculated on a separate return basis. Any current tax liability is paid to THG. Tax benefits resulting from taxable operating losses or credits of THG's subsidiaries are reimbursed to the subsidiary when such losses or credits can be utilized on a consolidated return basis.
- G. The Company has no federal or foreign income tax loss contingencies, for which it is reasonably possible that the total liability will significantly increase within 12 months of the reporting date.
- H. Repatriation Transition Tax (RTT)

Not applicable

I. Alternative Minimum Tax (AMT) Credit

Not applicable

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

A. Nature of Relationships

The Company is a wholly-owned subsidiary of NOVA Casualty Company ("NCC"), which, in turn, is a wholly-owned subsidiary of The Hanover Insurance Company ("Hanover"). Hanover, in turn, is a wholly-owned subsidiary of Opus Investment Management, Inc. ("OPUS"), which, in turn, is a wholly-owned non-insurance subsidiary of 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. Amouts due to or from Related Parties

At the end of the current reporting period, the Company reported \$5,395 as amounts due to an affiliated company. These arrangements require that intercompany balances be settled within 30 days.

E. Guarantees or Contingencies for Related Parties

Not applicable

F. 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.

G. Nature of Relationships that Could Affect Operations

All outstanding shares of the Company are owned by NCC.

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 5,000,000 shares of \$1 par value common stock authorized, issued and outstanding.

B. Dividend Rate of Preferred Stock

Not applicable

C-F Dividend Restrictions

Dividends on common stock are paid as declared by the Board of Directors of the Company. Under the insurance regulations of Delaware, the maximum amount of dividends which the Company may pay to shareholders is limited to its earned surplus at the end of the prior year. At December 31, 2021, the Company had earned surplus of \$3,525,391. Furthermore, the maximum amount of dividends which the Company may pay without prior approval of the Department is limited to the greater of 10% of the most recent year-end policyholders' surplus or net income, excluding realized capital gains. The Company declared an ordinary dividend of \$2,000,000 to NCC on November 2, 2021. Accordingly, the maximum dividend that may be paid at January 1, 2022 without prior approval is \$1,525,391. Subsequent to November 2, 2022, the maximum dividend payable without prior approval is \$3,525,391.

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 securities 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 bonds 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	Ad	Imitted Assets	(Level 1)	(Level 2)	(Level 3)	Net	Asset Value (NAV)	 acticable ng Value)
Bonds	\$ 47,999,445	\$	53,967,941	\$ 4,647,916	\$ 43,351,529	\$ -	\$	-	\$ -
Cash and Short Term									
Investments	\$ 743,574	\$	743,574	\$ 743,574	\$ -	\$ -	\$	-	\$ -

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

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

The Company reported \$0 for premiums receivable due from policyholders, agents and ceding insurers on Page 2 line 15. The Company has no accounts receivable for uninsured plans and amounts due from agents, controlled or controlling persons.

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

No change

B. Reinsurance Recoverable in Dispute

Not applicable

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	C	9/30/2022
3. Was anticipated investment income utilized in the calculation?	Ye	s [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 filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?	Yes [] No [X]		
1.2	If yes, has the report been filed with the domiciliary state?	Yes [] No []		
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes [] No [X]		
2.2	If yes, date of change:			
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? 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 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 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 domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.			
	1 2 3 Name of Entity NAIC Company Code State of Domicile			
5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney- in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?] No [] N/A [X]		
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	12/31/2019		
6.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.	12/31/2019		
6.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).	02/22/2021		
6.4	By what department or departments?			
6.5	Delaware Insurance Department Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?] No [] N/A [X]		
6.6	Have all of the recommendations within the latest financial examination report been complied with?] No [] N/A [X]		
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?	Yes [] No [X]		
7.2	If yes, give full information:			
8.1	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?	Yes [] No [X]		
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.			
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?	Yes [X] No []		

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

1	2	3	4	5	6	İ.
Affiliate Name	Location (City, State)	FRB	000	FDIC	SEC	
Opus Investment Management, Inc	Worcester, MA				YES	ĺ
	,					ĺ

GENERAL INTERROGATORIES

9.1 9.11	 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity; (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code. If the response to 9.1 is No, please explain: 	Yes [X]	No []
9.2 9.21	Has the code of ethics for senior managers been amended? If the response to 9.2 is Yes, provide information related to amendment(s).	Yes []	No [X]
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers? If the response to 9.3 is Yes, provide the nature of any waiver(s).	Yes []	No [X]
	FINANCIAL				
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	Yes []	No [X] 0

INVESTMENT

11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or oth use by another person? (Exclude securities under securities lending agreements.)	nerwise made availabl	e for	Yes [] No [X	(]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		\$		0
13.	Amount of real estate and mortgages held in short-term investments:		\$		0
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			Yes [] No [X	(]
14.2	If yes, please complete the following:				
		1		2	
		Prior Year-End		Current Quar	
		Book/Adjusted		Book/Adjuste	
14.01	Bonds	Carrying Value	0	Carrying Valu	
	Preferred Stock		0	\$	
	Common Stock		0	\$	0
	Short-Term Investments		0	ዋ ድ	0
			0	\$	
	Mortgage Loans on Real Estate			\$	
	All Other			\$	
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) Total Investment in Parent included in Lines 14.21 to 14.26 above			\$	
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?				v 1
15.1	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?		Voc [() ()
10.2	If no, attach a description with this statement.		163 [1 1
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement dat	e:			
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2		\$		0
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, F				
	16.3 Total payable for securities lending reported on the liability page.				
	10.0 Total payable for securities renaining reported on the nability page.		φ		

GENERAL INTERROGATORIES

17. 17.1	offices, vaults or safety custodial agreement w Outsourcing of Critical	deposit boxes, we ith a qualified bank Functions, Custodi	Special Deposits, real estate, more all stocks, bonds and other s or trust company in accordance al or Safekeeping Agreements equirements of the NAIC Finance	securities, owner ce with Section of the NAIC Fin	d throughout t I, III - General ancial Conditio	he current year Examination Co on Examiners H	held pursuant to a onsiderations, F. andbook?	Yes	[X]	No [[]
		1				2					
	Bank of New York Mel	Name of Custo	dian(s)	. 225 Liberty S	treet, New Yo	<u>Custodian Addre</u> ork, NY 10286	ess				
17.2	For all agreements tha location and a comple		h the requirements of the NAIC	Financial Cond	ition Examine	rs Handbook, pr	ovide the name,				
	1		2			3					
	Name(·	Location(s)			Complete Explar	nation(s)				
17.3 17.4	Have there been any c If yes, give full informa		name changes, in the custodian :	n(s) identified in	17.1 during the	e current quarte	r?	Yes	[]	No [X]
	1 Old Custo	dian	2 New Custodian	Date	3 of Change		4 Reason				
17.5	make investment deci	sions on behalf of t	estment advisors, investment m he reporting entity. For assets th nent accounts"; "handle secu	hat are manage irities"]	r/dealers, includ internally by	uding individuals employees of th	that have the authority to e reporting entity, note as				
		•	or Individual								
	17.5097 For those firm	s/individuals listed	in the table for Question 17.5, on the table for Question 17.5, on the reporting the reporting the reporting the reporting the tables of the tables of the tables of tables	do any firms/ind	viduals unaffil			Yes	[] No	[]
			with the reporting entity (i.e. des aggregate to more than 50% of					Yes	[] No	[]
17.6	For those firms or inditional table below.	viduals listed in the	table for 17.5 with an affiliation	code of "A" (aff	liated) or "U"	(unaffiliated), pro	ovide the information for th	ne			
	1		2			3	4			5 stment	
	Central Registration Depository Number		Name of Firm or Individual		Logal Entity	Identifier (LEI)	Registered With		Agre	ement) Filed	t
		Opus Investment M	Name of Firm or Individual anagement, Inc		549300UFGZJWL	.1LM0S85	SEC				
18.1 18.2	Have all the filing requ If no, list exceptions:	irements of the Pur	poses and Procedures Manual	of the NAIC Inv	estment Analy	sis Office been	followed?	Yes	[X]	No [[]
19.	a. Documentation security is not a b. Issuer or obligo c. The insurer has	necessary to perm available. r is current on all co an actual expectat	porting entity is certifying the foll it a full credit analysis of the sec pontracted interest and principal ion of ultimate payment of all co GI securities?	curity does not e payments. ontracted interes	xist or an NAI at and principa	IC CRP credit ra al.	ting for an FE or PL	Yes	[No [[X]
20.	a. The security was b. The reporting er c. The NAIC Desig on a current priv d. The reporting er	s purchased prior to tity is holding capit nation was derived ate letter rating hel tity is not permitted	eporting entity is certifying the for b January 1, 2018. al commensurate with the NAIC from the credit rating assigned d by the insurer and available for to share this credit rating of the LGI securities?	C Designation re by an NAIC CR or examination b e PL security wit	ported for the P in its legal c y state insura h the SVO.	security. capacity as a NR nce regulators.	SRO which is shown	Yes	[No [[X]
21.	FÉ fund: a. The shares were b. The reporting er c. The security hac January 1, 2019 d. The fund only or e. The current repo in its legal capad	e purchased prior to titity is holding capit I a public credit ratiu predominantly hold rited NAIC Designa city as an NRSRO.	gistered private fund, the report o January 1, 2019. al commensurate with the NAIC ng(s) with annual surveillance a ds bonds in its portfolio. titon was derived from the publi- al surveillance assigned by an I	C Designation re assigned by an N ic credit rating(s)	ported for the IAIC CRP in it with annual s	security. ts legal capacity	as an NRSRO prior to				
		- · ·	chedule BA non-registered priva		-	he above criteria	ı?	Yes	[No [[X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?	Yes []	No []	N/A	[X]
2.	Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?		Yes	[]]	No	0[X]	
3.1	Have any of the reporting entity's primary reinsurance contracts been canceled?		Yes	i 1	No	o [X]	
3.2	If yes, give full and complete information thereto.							
4.1	Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of " tabular reserves") discounted at a rate of interest greater than zero?		Yes	[]	No	0 [X]	

4.2 If yes, complete the following schedule:

				TOTAL D	ISCOUNT		DISCOUNT TAKEN DURING PERIOD					
1	2	3	4	5	6	7	8	9	10	11		
	Maximum	Discount	Unpaid	Unpaid			Unpaid	Unpaid				
Line of Business	Interest	Rate	Losses	LĂE	IBNR	TOTAL	Losses	LÁE	IBNR	TOTAL		
		0.000	0	0	0	0	0	0	0	0		
		TOTAL	0	0	0	0	0	0	0	0		

5. Operating Percentages:

	5.1 A&H loss percent	
	5.2 A&H cost containment percent	
	5.3 A&H expense percent excluding cost containment expenses	
6.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]
6.2	If yes, please provide the amount of custodial funds held as of the reporting date	0
6.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]
6.4	If yes, please provide the balance of the funds administered as of the reporting date	0
7.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X] No []
7.1	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

Showing All New Reinsurers - Current Year to Date

1	2	Showing All New Reinsurer	4	5	6	7
	ID				Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer
NAIC Company Code	Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	(1 through 6)	Rating
company couc			balloalottoll		(Tanodgiro)	. tating
		NO				
			·····			
						•••••
			[[
	+					
					[[
	L		1	l	1	L

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN Current Year to Date - Allocated by States and Territories

2. 3. 4. 5.	States, etc. Alabama		Active Status	2 Current Year	3 Prior Year	4 Current Year	5 Prior Year	6 Current Year	7 Prior Year
2. 3. 4. 5.	Alabama		Status	Current Veer	Drier Veer	Current Veer	Prior Voar	Current Voor	Drior Voor
2. 3. 4. 5.	Alabama								
2. 3. 4. 5.			(a)	To Date	To Date	To Date	To Date	To Date	To Date
3. 4. 5.			E						1,557,23
4. 5.	Alaska		Е						
5.	Arizona	AZ				2,486,830	(1,081,935)		1,884,04
	Arkansas	AR	E						
	California	CA	E			10,602,435			
6.	Colorado	со	Е	2,436,085	2,393,428				
7.	Connecticut								
8.	Delaware								
							,	· · ·	
	District of Columbia								,
	Florida					9,907,455			
11.	Georgia								4,381,7
	Hawaii								
13.	Idaho	ID	E						
14.	Illinois	IL	E	4,657,616	3,686,097				
15.	Indiana								1,441,0
16.	lowa				, ,	3,405,713	,		431.4
	Kansas							, , ,	
	Kentucky		E -						
	Louisiana				, ,		, ,		4,554,2
	Maine							,	
21.	Maryland	MD	E	1,313,182	1,596,219				
	Massachusetts					2,779,160			
	Michigan							, ,	
	Minnesota							, ,	
	Mississippi								
	Missouri								1,413,4
	Montana								
28.	Nebraska	NE	E						
29.	Nevada	NV	E	1,565,406	1,333,202				
	New Hampshire								
	New Jersey					248,764			
	New Mexico								
	New York					2,763,075 .	, ,	, ,	
	North Carolina								1,638,7
	North Dakota								
36.	Ohio	ОН	E					2,507,817	2,362,5
37.	Oklahoma	OK	E						
	Oregon								
	Pennsylvania					1,176,435	,	, ,	
	Rhode Island							,,	
			F						
	South Carolina		E				1,256,141	2,324,416	4,241,9
	South Dakota		E			4,775 .			
43.	Tennessee	TN .	E	1,430,465		1,230,358			4,455,5
44.	Texas	ТХ	E			5, 187, 960			
45.	Utah	UT	E	1,679,370					
	Vermont		E			122,706	198,278	1,113,647	
	Virginia		E	4,745,024					
			E		o 440 044	1,266,079			, ,
	Washington					, ,			
	West Virginia		<u>E</u>						
	Wisconsin				1,455,434	1,070,999 .			3,048,5
51.	Wyoming	WY	E	,					
	American Samoa		N	0	0	0	0	0	
	Guam		N		.0	.0	.0	0	
	Puerto Rico		N			0	0	0	
			N 1	_	0	0	0	0	
	U.S. Virgin Islands	VI	N	0	U				
56.	Northern Mariana Islands		N.	0	0	0	0	0	
							0 .	0	
	Canada		N	0	0	0	0	0	
58.	Aggregate Other Alie	en OT	XXX	0	0	0	0	0	
59.	Totals		XXX	138, 188, 879	125,849,246	53,800,302	34,523,667	209,385,256	170,080,6
	DETAILS OF WRITE	-INS							· · · · · · · · ·
8004	DETAILS OF WRITE		XXX						
			XXX						
8003.			XXX						
8998.	Summary of remainin								
	write-ins for Line 58	from							
	overflow page		XXX	0	0	0	0	0	
8999.	Totals (Lines 58001 t								
	58003 plus 58998)(L above)	ine 58	XXX	0	0	0	0	0	

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG.....

E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other

than their state of domicile - see DSLI).
 D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile.

R - Registered - Non-domiciled RRGs......0

..6

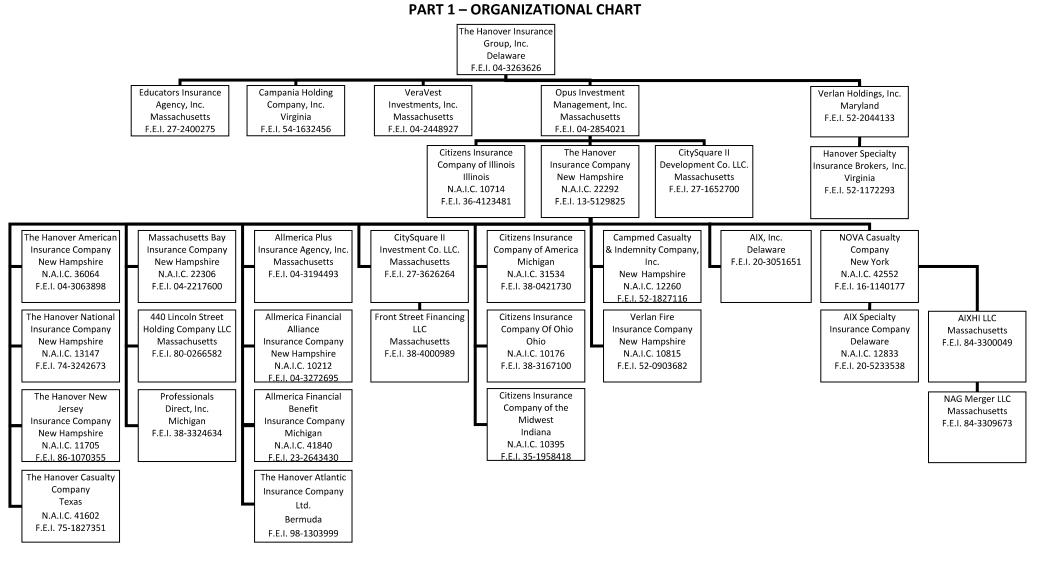
Q - Qualified - Qualified or accredited reinsurer.0

N - None of the above - Not allowed to write business in the state

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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

Allmerica Securities Trust Massachusetts

Note: All Companies are wholly-owned.

Affiliated Investment Management Company

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
	2	5	4	5	0	/	8	9	10	11		IJ	14	15	10
											Туре				
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
			15	F						Bin the Annual I				-	
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)	*
	The Hanover Insurance Group		. 80-0266582				440 Lincoln Street Holding Company LLC	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		. 84-3300049				AIXHI LLC	MA	NIA	Nova Casualty Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		20-5233538				AIX Specialty Insurance Company	DE	RE	Nova Casualty Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	NO	
	The Hanover Insurance Group		20-3051651				AIX. Inc.	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	NO	
0088	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	
0088	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.	NO	
	The Hanover Insurance Group		04-3194493				Allmerica Plus Insurance Agency, Inc.	MA	NIA	The Hanover Insurance Company	Ownership, 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.	100.000	The Hanover Insurance Group, Inc.	NO	
	The Hanover Insurance Group		54-1632456				Campania Holding Company, Inc.	VA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
. 0088	The Hanover Insurance Group	12260	52-1827116				Campmed Casualty & Indemnity Co. Inc.	VA	IA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	31534	38-0421730				Citizens Insurance Company of America	Nrt	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N0	
				•••••					IA					NO	
	The Hanover Insurance Group						Citizens Insurance Company of Illinois	IL		Opus Investment Management, Inc.	Ownership, Board, Management		The Hanover Insurance Group, Inc		
	The Hanover Insurance Group	10176	. 38-3167100				Citizens Insurance Company of Ohio	0H	IA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group	10395	35-1958418				Citizens Insurance Company of the Midwest	IN	IA	The Hanover Insurance Company	Ownership, Board, Management		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		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		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		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		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		The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		04-2217600				Massachusetts Bay Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		. 84-3309673				NAG Merger LLC	MA	NIA	AIXHI LLC	Ownership, Board, Management		The Hanover Insurance Group, Inc	NO	
0088	The Hanover Insurance Group	42552	16-1140177				NOVA Casualty Company	NY	UDP	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	NO	
	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.	NO.	
	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.	NO.	
0088	The Hanover Insurance Group		04-3063898				The Hanover American Insurance Company		IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
	The Hanover Insurance Group		98-1303999				The Hanover Atlantic Insurance Company Ltd.	NH BMU	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	YES	
	The Hanover Insurance Group	41602	75-1827351				The Hanover Casualty Company	TX	IA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	NO	
0088	The Hanover Insurance Group	22292	13-5129825				The Hanover Insurance Company	NH	UIP	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
	The Hanover Insurance Group		. 04-3263626			New York Stock Exchange	The Hanover Insurance Group. Inc.	DE	UIP	opus most mont management, mo.	owner enrip, boar a, management		nie nanover mourance droup, me	NO	
	The Hanover Insurance Group	13147	. 04-3263626 74-3242673			New TOTK SLOCK EXCHANGE	The Hanover National Insurance Company		UIP	The Hanover Insurance Company	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc.	NO	
									IA						
	The Hanover Insurance Group	11705					The Hanover New Jersey Insurance Company	NH	IA NIA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		. 04-2448927				VeraVest Investments, Inc.	MA		The Hanover Insurance Group, Inc.	Ownership, Board, Management		The Hanover Insurance Group, Inc.	N0	
8800	The Hanover Insurance Group	10815					Verlan Fire Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management		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		The Hanover Insurance Group, Inc	N0	
Aster	isk			I		1	NO		ą <u>n</u>		1		1		
														_	

STATEMENT AS OF SEPTEMBER 30, 2022 OF THE AIX SPECIALTY INSURANCE COMPANY 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				1.3
2.1	Allied Lines				
2.1	Multiple peril crop				0.0
2.2	Federal flood				0.0
2.4	Private crop			.0.0	0.0
2.5	Private flood				0.0
3.	Farmowners multiple peril				0.0
4.	Homeowners multiple peril			0.0	0.0
5.	Commercial multiple peril		10,864,083		
6.	Mortgage guaranty				0.0
8.	Ocean marine				0.0
9.	Inland marine				
10.	Financial guaranty			0.0	0.0
11.1	Medical professional liability - occurrence				24.2
11.2	Medical professional liability - claims-made				17.8
12.	Earthquake		0		0.0
13.1	Comprehensive (hospital and medical) individual				0.0
13.2	Comprehensive (hospital and medical) group				0.0
14.	Credit accident and health			0.0	0.0
15.1	Vision only				0.0
15.2	Dental only				0.0
15.3	Disablity income		0	0.0	0.0
15.4	Medicare supplement		0	0.0	
15.5	Medicaid Title XIX				0.0
15.6	Medicare Title XVIII		0	0.0	0.0
15.7	Long-term care				0.0
15.8	Federal employees health benefits plan				.0.0
15.9	Other health				0.0
16.	Workers' compensation				0.0
17.1	Other liability - occurrence			61.3	
17.2	Other liability - occurrence			26.8	31.6
17.2	Excess workers' compensation	, , , ,	, ,	45.3	46.6
18.1	Products liability - occurrence	, .			
18.2	Products liability - claims-made				0.0
19.1	Private passenger auto no-fault (personal injury protection)				0.0
19.2	Other private passenger auto liability			.0.0	0.0
19.2	Commercial auto no-fault (personal injury protection)				60.3
19.4	Other commercial auto liability				41.8
21.1	Private passenger auto physical damage		,	.0.0	
21.1	Commercial auto physical damage				61.2
21.2	Aircraft (all perils)				
23.	Fidelity			.0.0	0.0
23. 24.	Surety				0.0
24. 26.	Burglary and theft				0.0
20. 27.	Boiler and machinery				
27. 28.	Credit				
20. 29.	International			0.0	
29. 30.	Warranty			0.0	
	Reinsurance - Nonproportional Assumed Property				
31. 22	Reinsurance - Nonproportional Assumed Property				
32. 33.	Reinsurance - Nonproportional Assumed Liability Reinsurance - Nonproportional Assumed Financial Lines				
33. 34.	Aggregate write-ins for other lines of business		0	0.0	0.0
			64 996 012	47.2	
35.	Totals	137,495,320	64,886,012	41.2	42.0
2404	DETAILS OF WRITE-INS				
3401.					
3402.					
3403.	Cummon of compining write ing for Line 24 from supeflow page			~ ^ ^	~ ^
3498.	Summary of remaining write-ins for Line 34 from overflow page Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)		0 	0.0 0.0	0.0 0.0

STATEMENT AS OF SEPTEMBER 30, 2022 OF THE AIX SPECIALTY INSURANCE COMPANY PART 2 - DIRECT PREMIUMS WRITTEN

	Line of Business	Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire			
2.1	Allied Lines			6,786,542
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	0
3.	Farmowners multiple peril	0	0	0
4.	Homeowners multiple peril	0	0	0
5.	Commercial multiple peril	6,046,513		
6.	Mortgage guaranty	0	0	0
8.	Ocean marine	0	0	0
9.	Inland marine	1,412,994		4,061,814
0.	Financial guaranty	0		0
1.1	Medical professional liability - occurrence		1,428,163	1,831,993
1.2	Medical professional liability - claims-made			10,310,505
2.	Earthquake	0	0	0
3.1	Comprehensive (hospital and medical) individual	0	0	0
3.2	Comprehensive (hospital and medical) group	0	0	0
4.	Credit accident and health		0	0
5.1	Vision only	0	0	0
5.2	Dental only		0	0
5.3	Disablity income		0	0
5.4	Medicare supplement		0	0
5.5	Medicaid Title XIX			0
5.6	Medicare Title XVIII			0
5.7	Long-term care		0	0
5.8	Federal employees health benefits plan		0	0
5.9	Other health			0
6.	Workers' compensation		0	0
7.1	Other liability - occurrence			43,064,339
7.2	Other liability - claims-made			
7.3	Excess workers' compensation		0	
8.1	Products liability - occurrence		.6,452,798	4.772.007
8.2	Products liability - claims-made			0
19.1	Private passenger auto no-fault (personal injury protection)			
19.2	Other private passenger auto liability			0
19.3	Commercial auto no-fault (personal injury protection)			
19.4	Other commercial auto liability			
21.1	Private passenger auto physical damage			0
21.2	Commercial auto physical damage			
22.	Aircraft (all perils)			
23.	Fidelity		_	0
24.	Surety		-	0
26.	Burglary and theft			
27.	Boiler and machinery			
28.	Credit		, , , , , , , , , , , , , , , , , , , ,	0
29.	International			
.o. 80.	Warranty		.0	
80. 81.	Reinsurance - Nonproportional Assumed Property			
32.	Reinsurance - Nonproportional Assumed Froperty			
92. 33.	Reinsurance - Nonproportional Assumed Financial Lines			
53. 84.	Aggregate write-ins for other lines of business		0	
94. 85.	Totals	48,192,209	138,188,879	125,849,245
JJ.		40, 192, 209	100,000,079	123,049,243
401.	DETAILS OF WRITE-INS			
402. 403.				
498.	Summary of remaining write-ins for Line 34 from overflow page			

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

	T		-	2000/1112	20033 ADJ031		THEOEINTEO OO		-				
	1	2	3	4	5	6	7	8	9	10	11	12	13
											Prior Year-End	Prior Year-End	
								Q.S. Date Known			Known Case Loss	IBNR Loss and	Prior Year-End
			Tatal Drian	0000	2022 Loss and		Q.S. Date Known	Case Loss and			and LAE Reserves	LAE Reserves	Total Loss and
		Drive Veen	Total Prior	2022 Loss and	LAE Payments on	Tatal 0000 Lasa	Case Loss and	LAE Reserves on			Developed	Developed	LAE Reserve
Years in Which	Prior Year-End	Prior Year- End IBNR	Year-End Loss and LAE	LAE Payments on Claims Reported	Claims Unreported	Total 2022 Loss and LAE	LAE Reserves on Claims Reported	Claims Reported or Reopened	Q.S. Date IBNR	Total Q.S. Loss and LAE	(Savings)/ Deficiency	(Savings)/ Deficiency	Developed (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			((0000000)				(00000 0 0)			(***********************
2. 2020													
8. Subtotals 2020 + Prior													
. 2021					N								
5. Subtotals 2021 + Prior													
6. 2022	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											As % of Col. 1	As % of Col. 2	As % of Col. 3
Policyholders											Line 7	Line 7	Line 7
											1.	2.	3.
													Col. 13, Line 7
													As a % of Col. 1
													Line 8

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.

		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?	YES
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
5.	AUGUST FILING 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.	N/A

Explanations:

- 1.
- 3.
- 5.
- 4.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]

- 3. Medicare Part D Coverage Supplement [Document Identifier 365]
- 4. Director and Officer Supplement [Document Identifier 505]





SCHEDULE A - VERIFICATION Real Estate

		1	2
		I	Prior Year Ended
		Versite Data	
		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 impainment 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

	<u> </u>	1	2
		Verste Dete	Prior Year Ended
		Year to Date	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 test prime and the miting meets and the miting		
9.	Total foreign exchange change in book value/recurred investment excession of a structure destruction of the structure destruction of the structure destructure des		
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	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		
2.	Cost of bonds and stocks acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	(11,914)	
6.	Deduct consideration for bonds and stocks disposed of	4,615,227	9,344,095
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
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	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	53,967,941	52,533,413

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

Dun	ng the Current Quarter for 1	2	3	4	5	6	7	8
	Book/Adjusted	A	Diseasitieses	New Tradius Astivity	Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value Beginning	Acquisitions During	Dispositions During	Non-Trading Activity During	Carrying Value End of	Carrying Value End of	Carrying Value End of	Carrying Value 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)		1,973,555	1,478,410					
2. NAIC 2 (a)		0	0		6,059,131			6,358,627
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	53,472,305	1,973,555	1,478,410	492	53,257,453	53,472,305	53,967,941	52,533,413
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
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	53,472,305	1,973,555	1,478,410	492	53,257,453	53,472,305	53,967,941	52,533,413

(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 **NONE**

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

ΝΟΝΕ

Schedule A - Part 2 - Real Estate Acquired and Additions Made

NONE

Schedule A - Part 3 - Real Estate Disposed **NONE**

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

ΝΟΝΕ

SCHEDULE D - PART 3

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

				ong-Term Bonds and Stock Acquired During the Current Quarter					
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
	UNITED STATES TREASURY			BARCLAYS CAPITAL INC					
•	UNITED STATES TREASURY			BARCLAYS CAPITAL INC					1.A
	ubtotal - Bonds - U.S. Governments					973,555	1,000,000	3, 196	
	MASSACHUSETTS (COMMONWEALTH OF)		08/17/2022	Jefferies				0	1.B FE
	ubtotal - Bonds - U.S. Special Revenues					500,000	500,000	0	XXX
	BANK OF NEW YORK MELLON CORP		07/19/2022	NORGAN STANLEY CO				0	1.E FE
	ubtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					500,000	500,000	0	XXX
	otal - Bonds - Part 3					1,973,555	2,000,000	3, 196	
	otal - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. T						1,973,555	2,000,000	3, 196	
	otal - Preferred Stocks - Part 3					0	XXX	0	XXX
4509999998. T	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
4509999999. T	otal - Preferred Stocks					0	XXX	0	XXX
5989999997. T	otal - Common Stocks - Part 3					0	XXX	0	XXX
5989999998. T	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
5989999999. T	otal - Common Stocks					0	XXX	0	XXX
5999999999. T	otal - Preferred and Common Stocks					0	XXX	0	XXX
600000000						4 070 555	vvv		· · · · · · · · · · · · · · · · · · ·
6009999999 -	IOIAIS					1,973,555	XXX	3, 196	XXX

SCHEDULE D - PART 4

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

4	0	•		-		- v						Ŭ			10	4-7	10	40	00	04	00
1	2	3	4	5	6	7	8	9	10		hange In Boo		1 0		16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current	Change in	Foreign					Bond		nation
												Year's	Book/	Exchange	Book/				Interest/		Modifier
									Prior Year		Our					Foreign			Stock	Stated	
												Other Than		Change in	Adjusted	Foreign	D. I. I.				and
011015									Book/	Unrealized		Temporary		Book	Carrying	Exchange		T () O (Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-			Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on		(Loss) on	During	Maturity	
ification	1	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
	G2 MA6409 - RMBS			Paydown		6,852	6,852	7,035	7 , 139	0	(287)	0	(287)	0	6,852	0	0	0		01/20/2050 .	1.A
	G2 MA6530 - RMBS			Paydown		2,661	2,661		2,673	0	(12)		(12)	0	2,661	0	0	0	43	03/20/2050 .	. 1.A
	G2 MA7051 - RMBS			Paydown						0	(576)		(576)	0		0	0	0		12/20/2050 .	. 1.A
	GNR 2016-173 CT - CMO/RMBS GNR 2020-013 HB - CMO/RMBS			Paydown Pavdown		62,325 				0	(252)	0	(252) 	0		0	0	0	1,261 	10/20/2045 .	1.A
	9. Subtotal - Bonds - U.S. Governmer		J9/01/2022	Paydown				,		0	,	0	, , , , , , , , , , , , , , , , , , , ,	0		0	0	0		12/20/2048 . XXX	XXX
68608K-NE-4			00 /01 /0000	0-11 @ 100.00		100,937	100,937	102,853	102,371	0	(1,435)	-	(1,435)	0	100,937	0	0	v	1,941		
				Call @ 100.00 Maturity @ 100.00		60,000	60,000 			0	(616)	0		0		0	(2,219)	(2,219)	3,445 7,320	08/01/2024 . 07/01/2022 .	1.B FE 1.B FE
										0		0		0		0		(0.010)	-	XXX	XXX
	9. Subtotal - Bonds - U.S. States, Ter				-	300,000	300,000	309,906	302,835	0	(616)	0	(616)	•	302,219	0	(2,219)	(2,219)	10,765		
	CALIFORNIA HSG FIN AGY REV FH G08727 - RMBS			Call @ 100.00 Pavdown						0		0		0		0			6,813 202	02/01/2024 . 10/01/2046 .	1.D FE
	FH G08727 - RMBS		09/01/2022			4,215				0	(212)		(212)	0		0	0	0		. 10/01/2046 .	
	FH Q47592 - RMBS			Paydown						0				0		0	0	0	213	04/01/2040	1 4
	FH G60453 - RMBS			Paydown						0	(127)	0		0		0	0	0		01/01/2046 .	1 A
	FH G60661 - RMBS		09/01/2022							0	(302)	0		0	5.047					07/01/2046 .	1.A
3136AA-EK-7	FNR 2012-129 TD - CMO/RMBS		09/01/2022	Paydown						0	(7)	0	(7)	0		0	0	0		05/25/2040 .	1.A
3136AH-H9-4	FNR 2013-130 A - CMO/RMBS			Paydown					3,751	0		0		0		0	0	0	76	01/25/2044 .	1.A
	FHR 4099 VB - CMO/RMBS			Paydown						0	(54)	0	(54)	0		0	0	0	759	09/15/2033 .	. 1.A
	FN MA2771 - RMBS			Paydown		9,624	9,624		9,941	0	(318)	0	(318)	0	9,624	0	0	0		10/01/2046 .	. 1.A
	NEW HAMPSHIRE ST FED HWY			Maturity @ 100.00						0	0	0	0	0		0	0	0		09/01/2022 .	
	OKLAHOMA ST CAP IMPT AUTH ST HWY CAP IMP			Maturity @ 100.00						0	0	·····.0	0	0		0	0	0		07/01/2022 .	
	VIRGINIA ST HSG DEV AUTH HOMEOWNERSHIP M			Paydown	·					0		0		0		0	0	0		08/25/2042 .	1.B FE
	9. Subtotal - Bonds - U.S. Special Re	venues				1,075,313	1,075,313	1,077,731	1,076,299	0	(1,044)		(1,044)	0	1,075,254	0		58	45,954	XXX	XXX
	7. Total - Bonds - Part 4					1,476,249	1,476,249	1,490,490	1,481,505	0	(3,095)		(3,095)	0	1,478,410	0	(2,160)	(2,160)	58,660	XXX	XXX
	8. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	9. Total - Bonds					1,476,249	1,476,249	1,490,490	1,481,505	0	(3,095)	0	(3,095)	0	1,478,410	0	(2,160)	(2, 160)	58,660	XXX	XXX
	7. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998	8. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	9. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	7. Total - Common Stocks - Part 4					0	XXX	0	0	0	-	0	0	0	0		-	0	0	XXX	XXX
	B. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	9. Total - Common Stocks - Part 5						XXX			0	0		~~~ 0					0		XXX	XXX
	9. Total - Preferred and Common Sto	oko				0	XXX	°	ů	v	•	0	ů	,	•	, , , , , , , , , , , , , , , , , , ,	ů	, v	Ű	XXX	XXX
		UKS				0		0	0	0	0	0	0	0	0	0	•	0	0		
6009999999	9 - I Otais					1,476,249	XXX	1,490,490	1,481,505	0	(3,095)	0	(3,095)	0	1,478,410	0	(2,160)	(2,160)	58,660	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 **NONE**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned **NONE**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned **NONE**

IED	ULE	ΞΕ-ΡΑ	RT 1 - C	ASH			
	Month	End Depository	Balances				
2	3	4	5				9
	Rate of	During Current	at Current	6	7	8	
		Quarter	Statement Date				*
	0.000	0 0	0 0				XXX XXX
	0.000	0	0				XXX.
	xxx	0	0	500	500	500	xxx
XXX	XXX	0	0	1,310,865	835,365	743,574	XXX
	xxx	0	0	0	0	0	xxx
XXX	XXX	0	0	0	0	0	XXX
XXX	XXX	0	0	1,310,865	835,365	743,574	XXX
XXX	XXX	XXX	XXX	0	0	0	XXX
				1 010 005	005.005	740 574	xxx
t	2 Code xxx xxx xxx xxx xxx xxx	Month 2 3 Rate of Code Interest 	Month End Depository 2 3 4 Amount of Interest Received During Current Quarter Amount of Interest Received During Current Quarter	Month End Depository Balances 2 3 4 5 Amount of Interest Received During Current Quarter Amount of Interest Accrued at Current Statement Date	2 3 4 5 Book Ba Amount of Interest Received During Current Code Amount of Interest Accrued at Current Quarter Amount of Interest Accrued at Current Statement Date First Month	Month End Depository Balances 2 3 4 5 Book Balance at End of Eac During Current Quart Amount of Interest Received During Current Quarter Amount of Interest Accrued at Current Statement Date 6 7 Code Interest Quarter Statement Date First Month Second Month 0.000	Month End Depository Balances 2 3 4 5 Book Balance at End of Each Month During Current Quarter Rate of Interest Received During Current Quarter Amount of Interest Accrued at Current Statement Date First Month Second Month Third Month .0.000 .

Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter

ΝΟΝΕ



Designate the type of health care providers reported on this page: Physicians, including surgeons and osteopaths

<u> </u>		ALLO		BY 51 2	Direct Los		5	Direct Loss	es Unnaid	8
			I	2	3	4	5	6	7	Direct
			Direct	Discat			Discret			Losses
			Direct Premiums	Direct Premiums		No. of	Direct Losses	Amount	No. of	Incurred But Not
	States, etc.		Written	Earned	Amount	Claims	Incurred	Reported	Claims	Reported
1.	Alabama	AL	0	0	0	0	0	0	0	0
2.	Alaska	AK	0	0	0	0	0	0	0	0
3.	Arizona	AZ	0	62	0	0	(3,482)	0	0	3,486
4.	Arkansas	AR	0	0	0	0	0	0	0	0
5.	California				0	0	(22,946)	0	0	(9,357)
6.	Colorado	CO	0	0	0	0	(5,975)	0	0	(827)
7.	Connecticut		0		0	0	(15,050)	0	0	(5,525)
8.	Delaware	DE	0	0	0	0	0	0	0	0
9.	District of Columbia	DC	0	0	0	0	(824)	0	0	(310)
10.	Florida		0	0 0	0 0	0	(576) (5.282)	0 0	0	(150)
11.	Georgia		0	0 0	0	0	(5,282) 0	0	0	(1,820) 0
12.	Hawaii		0		0	0		0	0	
13.	Idaho	U II	0		0	0	(1,920) 0	0	0	
14.	Illinois		0	8.018	0	0		0	0	
15. 16.	Indiana Iowa	IN IA	0		0 0	0	(16,493) 0	0	0	(0,039) 0
16.	Kansas	IA KS	0	0	0	0	0	0	0	U
	Kentucky				0	0		0	U	
10. 19.	Louisiana		0 0	1.336	0	0	(2,412)	13.000		
20.	Maine		0	1,330	0	0	(1,517)		0	(5,001)
20.	Maryland	MD	0	0	0	0	(1,408)	0	0	(506)
22.	Massachusetts	MA	0	0	0	0	(10,882)	0	0	(3,791)
23.	Michigan	MI	961	.23,859	0	0	(50,923)	0	0	(8,994)
24.	Minnesota	MN	0	0	0	0	(3,828)	0	0	(1,361)
25.	Mississippi		0	0	0	0	0	0	0	0
26.		MO	.0	.486	.0			.0	.0	
27.	Montana	MT	0	0	0	0	0	0	0	0
28.	Nebraska	NE	0	0	0	0	0	0	0	0
29.	Nevada	NV	0	0	0	0	0	0	0	0
30.	New Hampshire	NH	0	0	0	0	(15,564)	0	0	(5,098)
31.	New Jersey	NJ	0	0	0	0	0	0	0	0
32.	New Mexico	NM	0		0	0	(3,658)	0	0	(1,672)
33.	New York	NY	0	0	0	0	(8,608)	0	0	(3,247)
34.	North Carolina	NC	0		0	0	(15,132)	0	0	(5,458)
35.	North Dakota	ND	0	0	0	0	0	0	0	0
36.	Ohio	OH	13, 158		0	0	(15,951)	0	0	(6,206)
37.	Oklahoma		0	0	0	0	0	0	0	0
	Oregon		0	0	0	0	(1,890)	0	0	(674)
	Pennsylvania		(1,439)	(1,439)	0	0	(1,415)	0	0	(335)
	Rhode Island		0	0	0	0	(1,110)		0	(386)
41.	South Carolina		0		0	0	(10,651)	0	0	(3,872)
42.	South Dakota		0	0	0	0	0	0	0	0
	Tennessee		0		0	0	716	0	0	
	Texas				0	0	(36,627)	0	0	
45.	Utah		0		0	0	(2,041)	0	0	(755)
	Vermont		0	0	0	0	0	0	0	0
	Virginia		6,864 .5,171		0 0	0 0	(7,440) (14,225)	0 0	0 0	(3, 195)
	Washington West Virginia		, 	, 	0 0	0	(14,225) 0	0 0	0 0	(6,243)
	West Virginia Wisconsin		•	0	0	0		0	0 0	0 (650)
	Wyoming		0 0	0 0	0	0	(1,991) 0	0	0	(000) 0
	American Samoa		0	0	0	0	0	0	0	0
52. 53.	Guam		0	0	0	0	0	0	0	0
	Puerto Rico		0	0	0	0	0	0	0	0 0
	U.S. Virgin Islands		0	0	0		0	0	0	0
	Nothern Mariana Islands				.0	0	0			0
	Canada		0	0	0	0	0	0	0	0
-	Aggregate Other Aliens		0	0	0	0	0	0	0	0
	Totals		50,924	122,429	0	0	(319,400)	13,000	1	(12,750)
	DETAILS OF WRITE-INS		, -			-	. , -,	,		. , /
58001.										
58002.										
58003.										
	Summary of remaining writ	e-ins for Line								
	58 from overflow page		0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 throug	h 58003 plus	~	<u>_</u>	0	<u>^</u>		~	<u>_</u>	•
	58998)(Line 58 above)		0	0	0	0	0	0	0	0



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

		ALLOU		2	AIES A				a a l la mai al	0
			1	2	Direct Los 3	sses Paid 4	5	Direct Loss 6	es Unpaid 7	8 Direct
					Ũ	·		0		Losses
			Direct	Direct		Nia af	Direct	A	No. of	Incurred
	States, etc.		Premiums Written	Premiums Earned	Amount	No. of Claims	Losses Incurred	Amount Reported	No. of Claims	But Not Reported
1.	Alabama	AL	.0	.0				.0	.0	
2.	Alaska	AK	0	0	0	0	0	0	0	0
3.	Arizona	AZ	0	0	0	0	0	0	0	0
4.	Arkansas	AR	0	0	0	0	0	0	0	0
5.	California	CA .	0	0	0	0		0	0	0
6.	Colorado	CO .	0	0	0	0	0	0	0	0
7.	Connecticut	СТ	0	0	0	0	0	0	0	0
8.	Delaware	DE .	0	0	0	0	0	0	0	0
9.	District of Columbia	DC .	0	0	0	0	0	0	0	0
10.	Florida	FL .	0	0	0	0	0	0	0	0
11.	Georgia	GA .	0	0	0	0	0	0	0	0
	Hawaii	HI .	0	0	0	0	0	0	0	0
	Idaho	ID .	0	0	0	0	0	0	0	0
	Illinois	IL -	0	0	0	0	0	0	0	0
	Indiana	IN .	0	0	0	0	0	0	0	0
	lowa	IA .	0	0	0	0	0	0	0	0
	Kansas	KS .	0	0	0	0	0	0	0	0
	Kentucky	KY .	0	0	0	0	0	0	0	0
	Louisiana	LA .	0	0	0	0	0	0	0	0
	Maine	ME .	0	0	0 0	0 0	0	0 0	0	0
	Maryland	MD .	0				0		0	0
	Massachusetts	MA .	0	0	0	0	0	0	0	0
	Michigan	MI .	0	0 0	0 0	0	(4,891)	0 0	0	0
	Minnesota	MN .	0	0		0 0	0		0	0
	Mississippi	MS .	0	0 0	0 0	0 0	0 0	0 0	0	0
	Missouri	MO .	0	0	0	0	0	0 0	0	0
	Montana	MT .	0 0	0	0	0	0	0 0	0	0
	Nebraska	NE . NV	0	0	0	0	0	0	0	0
	Nevada New Hampshire		0	0	0	0	0	0	0	0
			0 0	0	0	0	0	0	0	0
	New Jersey New Mexico	NJ NM	0	0	0	0	0	0	0	0
	New York		0	0	0	0	0	0	0	0
	North Carolina	NC	0	0	0	0	0	0	0	0
	North Dakota	ND	0	0	0	0	0	0	0	0
	Ohio		0	0	0	0	0	0	0	0
	Oklahoma	ON .	0	0	0	0	0	0	0	0
	Oregon			0	0	0	0	0	0	0
	Pennsylvania	PA	0	0	0	0	0	0	0	0
	Rhode Island			0		0		0	0	0
	South Carolina		0	0	0	0	0	0	0	0
	South Dakota		0	0	0	0	0		0	0
	Tennessee		0		0	0	0	.0	.0	0
	Texas		0	0	0	0	(5,325)	0	0	
	Utah		0	0	0	0	0	0	0	0
	Vermont		0	0	0	0	0	0	0	0
	Virginia		0	0	0	0	0	0	0	0
	Washington		0	0	0	0	0	0	0	0
	West Virginia		0	0	0	0	0	0	0	0
	Wisconsin		0	0	0	0	0	0	0	0
	Wyoming		0	0	0	0	0	0	0	0
52.	American Samoa	AS .	0	0	0	0	0	0	0	0
	Guam		0	0	0	0	0	0	0	0
	Puerto Rico		0	0	0	0	0	0	0	0
	U.S. Virgin Islands		0	0	0	0	0	0	0	0
	Nothern Mariana Islands		0	0	0	0	0	0	0	0
	Canada		0	0	0	0	0	0	0	0
	Aggregate Other Aliens	OT .	0	0	0	0	0	0	0	0
59.	Totals		0	0	0	0	35,642	0	0	14,675
	DETAILS OF WRITE-INS									
58001.										
58002.										
58003.										
	Summary of remaining write- 58 from overflow page		0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58998)(Line 58 above)	58003 plus	0	0	0	0	0	0	0	0



Designate the type of health care providers reported on this page: Other health care professionals, including dentists, chiropractors, and podiatrists

			SAIED		AIEJA		KKIIU			
			1	2	Direct Lo		5	Direct Loss	ses Unpaid	8 Dire at
					3	4		6	/	Direct Losses
			Direct	Direct			Direct			Incurred
			Premiums	Premiums		No. of	Losses	Amount	No. of	But Not
	States, etc.		Written	Earned	Amount	Claims	Incurred	Reported	Claims	Reported
1.	Alabama	AL	0	0	0	0	0	0	0	0
	Alaska		0	0	0	0	0	0	0	0
		Ar. A7	0	358	0	0	(1.722)	0	0	1 054
-	Arizona		0		0	0			0	1,204
4.	Arkansas	AR	0	0	0	0	0	0	0	0
5.	California	CA	0		0	0	(4,880)	60,000	1	5 , 150
6.	Colorado	CO	0		0	0	(2,728)	0	0	1,586
7.	Connecticut	СТ	0	1.398	0	0	(4.543)	0	0	2.515
	Delaware	DE	0	0	0	0	(867)	0	0	543
-		DC	0	0	0	0	(1,370)	0	0	
	District of Columbia		0	••••••		•		•		
10.	Florida	FL	0		0	0	(1,337)	0	0	1,358
11.	Georgia	GA	0	0	0	0	(5,823)	0	0	
12.	Hawaii	HI	0	0	0	0	0	0	0	0
13.	ldaho	ID	0	508	0	0	(776)	0	0	
14.	Illinois		0	0	0	0	2.304	0	0	4.165
		IN	0	2.183	0	0	(2,140)	0	0	1.397
15.	Indiana		0	, ,		•			•	
16.	lowa	IA	0	0	0	0	0	0	0	0
17.	Kansas	KS	0	0	0	0	(34)	0	0	
18.	Kentucky	КҮ	0		0	0	(3,415)	0	0	
	Louisiana	LA	0		0	0	(19,734)	0	0	
	Maine	ME	0	0	0	0	(4,525)	0	0	
			0	0	0	0	. , ,	0	0	
	Maryland	MD	•	•			(1,337)			
22.	Massachusetts	MA	0	(3)	0	0	(8,091)	0	0	
23.	Michigan	MI	612		0	0	(10,347)	0	0	
24.	Minnesota	MN	0	0	0	0	(1,010)	0	0	
25.	Mississippi	MS	0	.0	0	0	0	0	0	0
	Missouri	MO	0	642	0	0	965	0	0	1.602
			0	2+0 0	0	0	0	0	0	1,002
	Montana	MT	0	••••••		•			•	0
28.	Nebraska	NE	0	0	0	0	0	0	0	0
29.	Nevada	NV	0	0	0	0	0	0	0	0
30.	New Hampshire	NH	0	0	0	0	(13,064)	0	0	
31.	New Jersey	NJ	0	0	0	0	(5)	0	0	2
	New Mexico	NM	0	2.569	0	0	(1,414)	0	0	1,488
		NY	0	20	0	0	(7,337)	0	0	4.585
	New York		0			•	. , ,			
-	North Carolina	NC	0		0	0	(8,774)	0	0	
35.	North Dakota	ND	0	0	0	0	0	0	0	0
36.	Ohio	OH	1,897	1,433	0	0	(1,948)	0	0	
37.	Oklahoma	OK			0	0	0	0		0
	Oregon		.0	8	0	0	(922)	0	0	
		PA	23		0	0	(2,364)		0	1.085
	Pennsylvania									, .
	Rhode Island		0	0	0	0	(3,159)		0	1,518
	South Carolina		0		0	0	(3,872)	0	0	1,941
42.	South Dakota	SD	0	0	0	0	0	0	0	0
	Tennessee		0		0	0	(6,171)	0	0	
	Texas		0		0	0	(7,839)	0	0	
	Utah		0		0	0	(1,917)	0	0	
				, ,						
	Vermont		0	0	0	0	0	0	0	0
	Virginia		0	0	0	0	(1,309)	0	0	
48.	Washington	WA	0	0	0	0	(637)	0	0	
	West Virginia		0	0	0	0	0	0	0	0
	Wisconsin		0	0	0	0	0	0	0	0
	Wyoming		0	0		0	0	0	0	0 ^
					0					0
	American Samoa		0	0	0	0	0	0	0	0
	Guam		0	0	0	0	0	0	0	0
	Puerto Rico		0	0	0	0	0	0	0	0
	U.S. Virgin Islands		0	0	0	0	0	0	0	0
56.	Nothern Mariana Islands	MP	0	0	0	0	0	0	0	0
	Canada			00	0	0	0	0	0	0 ^
										0
	Aggregate Other Aliens	01	0	0	0	0	0	0	0	0
	Totals		2,532	50,609	0	0	(132,142)	60,000	1	106,573
	DETAILS OF WRITE-INS									
58001.										
58002.										
58003.										
58998.	Summary of remaining writ	te-ins for Line	0	^	^	_	0	~	_	^
	58 from overflow page		U	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 throug	gh 58003 plus		-	-	-	-	-		-
	58998)(Line 58 above)		0	0	0	0	0	0	0	0



Designate the type of health care providers reported on this page: Other health care facilities

		ALLO	CATED	BIZI			RRITO				
			1	2	Direct Los 3	ses Paid	5	Direct Loss 6	ses Unpaid 7	8 Direct	
					0	-		0	,	Losses	
			Direct	Direct		NL of	Direct	A		Incurred	
	States, etc.		Premiums Written	Premiums Earned	Amount	No. of Claims	Losses Incurred	Amount Reported	No. of Claims	But Not Reported	
1.	Alabama	AL .			0	0	(1)	0	0		
2.	Alaska	AK	0	0	0	0	0	0	0	0	
	Arizona		6,338			1	(130,720)	0	0		
	Arkansas		0	0	0	0	(633)	0	0		
5.	California				0	0	(41,984)		3		
6.	Colorado				0	0	237,084		6		
	Connecticut				0	0		630,000	1		
	Delaware				0 0	0		44	1		
	District of Columbia Florida		0 		0	•	(7,634) 3,103	0	0		
	Georgia			000 107	0	0 0		0 44	0		
	Hawaii		0		0	0		0	0		
	Idaho		.0		0	0		0	0		
	Illinois				0	0		0	0		
	Indiana			123,468	0	0	(32,844)	0	0		
	lowa		1,500		0	0	(5,871)	0	0		
17.	Kansas	KS .	0	0	0	0	(124)	0	0	75	
18.	Kentucky	КҮ	0		0	0	(4,319)	0	0	4,041	
	Louisiana				0	0	(163,951)		5		
	Maine				0	0		0	0		
	Maryland				0	0	(22,894)	70,066	3		
	Massachusetts				0	0		0	0		
	Michigan		214,551 291,564		0	0	(50,557) 76,741	0	0		
	Minnesota Mississippi		291,364		0	0 0		296,000	3 0		
	Missouri		0	1.777	0 0	0		0	0		
	Montana				0	0		0	0	4.998	
	Nebraska	NF	0,700	0	0	0		0	0	0	
	Nevada	NV	0	.0	0	0	0	0		.0	
	New Hampshire					1			9		
	New Jersey				(25,000)	1	103,092	639,000	6		
	New Mexico		0		0	0	(591)		0		
	New York				0	0	55,917		6		
	North Carolina				0	0		1,095,068	7		
	North Dakota				0	0	(3,113)	0	0		
	Ohio		1,053,346			1	(180,455)		4		
	Oklahoma		0 	0 	0 0	0	0 	0	0 0	0	
	Oregon Pennsylvania	OR . PA		1,110,872	٥	0 0		0 425,374	14		
	Rhode Island				0	0		1,681,081			
	South Carolina				0	0	(13,282)				
	South Dakota		.67,279		0			44			
	Tennessee		0		0	0	(79,438)		1		
	Texas		1,723,845	1,619,737		1		1,200,110			
45.	Utah	UT .			0	0			1		
	Vermont				0	0	8,907	0	0		
	Virginia		1,247,415		0	0	233,439	690,330	11		
	Washington		647,609			1	15,940		2		
	West Virginia		0	0	0	0	0	0	0	0	
	Wisconsin		0	0	0	0	(5,929)	0	0	5,895	
	Wyoming		0	0	0	0	0 0	0	0	0	
	American Samoa Guam		0 .0	0 0	0	0 0	0	0 0	0 0	0	
	Puerto Rico		0	0	0	0	0	0	0	U	
	U.S. Virgin Islands		0	0	0	0	0	0	0	0 0	
	Nothern Mariana Islands		0	0	0	0	0	0	0	0	
	Canada		0	0	0	0	0	0	0	0	
	Aggregate Other Aliens		0	0	0	0	0	0	0	0	
	Totals		11,643,691	11,236,825	390,000	6	2,224,701	8,082,739	114	7,247,915	
	DETAILS OF WRITE-INS										
58001.											
58002.											
58003.											
	Summary of remaining write 58 from overflow page		0	0	0	0	0	0	0	0	
58999.	Totals (Lines 58001 through 58998)(Line 58 above)	h 58003 plus	0	0	0	0	0	0	0	0	