

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

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

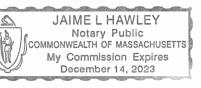
The Hanover National Insurance Company

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

Organized under the Laws of	(Current) (Prior) New Hampsh		, State of Domicile or Port of	Entry	NH
Country of Domicile		United States			
Incorporated/Organized	09/21/2007		Commenced Business _		
Statutory Home Office	4 Bedford Farms Drive, S	uite 107		Bedford, NH, US	02110 5005
Statutory Florine Office	(Street and Number				untry and Zip Code)
Main Administrative Office		440 Linco	In Street		
6		(Street and			
	ester, MA, US 01653-0002 n, State, Country and Zip Code)			508-853-7 Area Code) (Telep	
					•
Mail Address	440 Lincoln Street (Street and Number or P.O. B	ox)		Norcester, MA, US r Town State Cou	S 01653-0002 untry and Zip Code)
Drimon, Location of Doolse and Do	,	,	, ,	rown, otato, oo	and Lip obdoy
Primary Location of Books and Rec	cords	(Street and	oln Street d Number)		
	ester, MA, US 01653-0002	·		508-853-7200-	
(City or Tow	n, State, Country and Zip Code)		A)	rea Code) (Telep	hone Number)
Internet Website Address		WWW.HAN	OVER.COM		
Statutory Statement Contact	Dennis M. H	lazelwood		508-853-	7200-8557928
	(Nan	ne)	· · · · · · · · · · · · · · · · · · ·	(Area Code) (7	elephone Number)
DHAZE	LWOOD@HANOVER.COM (E-mail Address)			508-853-6 (FAX Nun	
	,			(
Description	Jaha Oassas Bar	OFFIC			
Senior Vice President &	John Conner Roo	one	Vice President & Treasurer _	N:	athaniei William Clarkin
Secretary	Charles Frederick C	Pronin	_		
		OTH	IER		
Jeffrey Mark Forbor Franchise	Der	inis Francis Kerrigan Jr.	, Executive Vice President &		
Jeffrey Mark Farber, Executive Denise Maureen Lowsley, Exe			Executive Vice President		Lunn Lee, Executive Vice President Welzenbach, Executive Vice President
		DIDECTORS	AD TRUCTEES	•	
Warren Ellison	Barnes	DIRECTORS C Jeffrey M	ark Farber	L	indsay France Greenfield
Dennis Francis Ke			illiam Lavey		Willard Ty-Lunn Lee
Denise Maureen	Lowsley	John Con	ner Roche		Bryan James Salvatore
Ctata of M	aaaaah uaatta				
	assachusetts Worcester	SS:			
all of the herein described assets statement, together with related ex condition and affairs of the said reg in accordance with the NAIC Annurules or regulations require differ respectively. Furthermore, the sco	were the absolute property of thibits, schedules and explanation to the reporting entity as of the reporting all Statement Instructions and Alences in reporting not related upe of this attestation by the design of the related upen of this attestation by the design.	he said reporting entity ins therein contained, an period stated above, an accounting Practices an to accounting practice scribed officers also inc	, free and clear from any liens nnexed or referred to, is a full a d of its income and deductions d Procedures manual except to a procedures, according sludes the related corresponding	s or claims thereo and true statement therefrom for the to the extent that: to the best of t ag electronic filing	that on the reporting period stated above n, except as herein stated, and that this of all the assets and liabilities and of the period ended, and have been completed (1) state law may differ; or, (2) that state heir information, knowledge and belief with the NAIC, when required, that is an various regulators in lieu of or in addition
John Conner Roch President	9	Charles Fred Senior Vice Presi			Nathaniel William Clarkin Vice President & Treasurer
Subscribed and sworn to before me 2nd day of Jaime L. Hawley	e this August, 20	22	a. Is this an original filing b. If no, 1. State the amendm 2. Date filed	ent number	Yes [X] No []



December 14, 2023



ASSETS

			Current Statement Date		4		
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets		
1.	Bonds		0	` '			
l	Stocks:						
	2.1 Preferred stocks	0	0	0	0		
	2.2 Common stocks	0	0	0	0		
3.	Mortgage loans on real estate:						
	3.1 First liens	0	0	0	0		
	3.2 Other than first liens		0	0	0		
4.	Real estate:						
	4.1 Properties occupied by the company (less \$	0	0	0	0		
	4.2 Properties held for the production of income (less						
	\$0 encumbrances)	0	0	0	0		
	4.3 Properties held for sale (less \$0						
	encumbrances)	0	0	0	0		
5.	Cash (\$567,398), cash equivalents						
]	(\$						
	investments (\$0)	567 308	n	567,398	405, 105		
6.	Contract loans (including \$		0		0		
	Derivatives		0		0		
	Other invested assets		0		0		
	Receivables for securities		0		0		
	Securities lending reinvested collateral assets		0		0		
	Aggregate write-ins for invested assets		0		0		
	Subtotals, cash and invested assets (Lines 1 to 11)			12,281,911			
	Title plants less \$,,		,,	. ,,-30		
	only)	0	0	0	0		
	Investment income due and accrued		0		76,438		
	Premiums and considerations:						
	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0	0		
	15.2 Deferred premiums, agents' balances and installments booked but						
	deferred and not yet due (including \$0						
	earned but unbilled premiums)	0	0	0	0		
	15.3 Accrued retrospective premiums (\$0) and						
	contracts subject to redetermination (\$0)	0	0	0	0		
16.	Reinsurance:						
	16.1 Amounts recoverable from reinsurers		0	0	0		
	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	0		
	Current federal and foreign income tax recoverable and interest thereon		0	0	1,533		
	Net deferred tax asset		0	0	0		
	Guaranty funds receivable or on deposit		0	0	0		
20.	Electronic data processing equipment and software	0	0	0	0		
21.	Furniture and equipment, including health care delivery assets						
	(\$0)			0	0		
	Net adjustment in assets and liabilities due to foreign exchange rates			0	0		
	Receivables from parent, subsidiaries and affiliates			0	0		
	Health care (\$0) and other amounts receivable				0		
	Aggregate write-ins for other than invested assets	0	0	0	0		
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	12.357 566	0	12,357,566	12,241,306		
27.	From Separate Accounts, Segregated Accounts and Protected Cell				12,241,000		
	Accounts	0	0	0	0		
28.	Total (Lines 26 and 27)	12,357,566	0	12,357,566	12,241,306		
	DETAILS OF WRITE-INS						
1101.							
1102.							
1103.							
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0		
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0		
2501.							
2502.							
2503.							
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0		
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	0		

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Statement Date	December 31, Prior Year
1.	Losses (current accident year \$0)	0	0
2.	Reinsurance payable on paid losses and loss adjustment expenses		
3.	Loss adjustment expenses		
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		
7.2	Net deferred tax liability		
8.	Borrowed money \$0 and interest thereon \$0	0	0
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
	including warranty reserves of \$0 and accrued accident and health experience rating refunds		0
4.0	including \$0 for medical loss ratio rebate per the Public Health Service Act)		
10.	Advance premium	0	0
11.	Dividends declared and unpaid:	0	0
	11.1 Stockholders 11.2 Policyholders		0
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		
20.	Derivatives		
21.	Payable for securities		
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	0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	6,303	5,860
27.	Protected cell liabilities	0	0
28.	Total liabilities (Lines 26 and 27)	6,303	5,860
29.	Aggregate write-ins for special surplus funds	0	0
30.	Common capital stock	1,000,000	1,000,000
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)	2,351,263	2,235,446
36.	Less treasury stock, at cost:		
	36.1		
	36.2		0
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)		12,235,446
38.	Totals (Page 2, Line 28, Col. 3)	12,357,566	12,241,306
0504	DETAILS OF WRITE-INS		
2501.			
2502. 2503.			
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page		
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0
	Totals (Elitob 2001 Billobaghi 2000 pido 2000)(Elito 20 daovo)		
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201.			
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page	0	0
3299.	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	Tour to Date	to Bato	Becomber or
1.	Premiums earned:			
	1.1 Direct (written \$0)		0	0
		0	0	0
	1.3 Ceded (written \$0)		0	0
	1.4 Net (written \$	0	0	0
2.	Losses incurred (current accident year \$			
۷.	2.1 Direct	0	0	0
		0	0	0
	2.3 Ceded	0	0	0
	2.4 Net		0	0
3.	Loss adjustment expenses incurred		0	0
4.	Other underwriting expenses incurred		0	0
5.	Aggregate write-ins for underwriting deductions		0	0
6.	Total underwriting deductions (Lines 2 through 5)		0	0
7. 8.	Net income of protected cells	0	0	0
0.	INVESTMENT INCOME	0		
9.	Net investment income earned	149.001	165,391	338.476
10.	Net realized capital gains (losses) less capital gains tax of \$	(2,541)		
11.	Net investment gain (loss) (Lines 9 + 10)			
	OTHER INCOME	·	,	
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered			
	\$0 amount charged off \$			0
13.	Finance and service charges not included in premiums	0	0	0
14.	Aggregate write-ins for miscellaneous income	0	0	0
15.	Total other income (Lines 12 through 14)	0	0	0
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	146.460	162,391	333.759
17.	Dividends to policyholders	0	0	0
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and			
	foreign income taxes (Line 16 minus Line 17)		162,391	333,759
19.	Federal and foreign income taxes incurred	30,643	31,286	61,335
20.	Net income (Line 18 minus Line 19)(to Line 22)	115,817	131,105	272,424
04	CAPITAL AND SURPLUS ACCOUNT	10 005 446	10 164 060	10 164 060
21. 22.	Surplus as regards policyholders, December 31 prior year	12,235,446	12, 164, 962	12,164,962 272,424
23.	Net transfers (to) from Protected Cell accounts		0	0
24.		0	0	0
25.	Change in net unrealized foreign exchange capital gain (loss)		0	0
26.	Change in net deferred income tax	0	0	(1,940)
27.	Change in nonadmitted assets	0	0	0
28.	Change in provision for reinsurance	0	0	0
29.	Change in surplus notes	0	0	0
30.	Surplus (contributed to) withdrawn from protected cells		0	0
31.	3 · · · · · · · · · · · · · · · · · · ·	0	0	0
32.	Capital changes: 32.1 Paid in	0	0	0
		0	0	0
	32.3 Transferred to surplus	0	0	0
33.	Surplus adjustments:	-		-
	33.1 Paid in	0	0	0
	33.2 Transferred to capital (Stock Dividend)	0	0	0
		0	0	0
34.	Net remittances from or (to) Home Office	0	0	0
35.	Dividends to stockholders	0	0	(200,000)
36.	Change in treasury stock	0		0
37. 38.	Aggregate write-ins for gains and losses in surplus	115,817	131,105	70,484
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	12,351,263	12,296,067	12,235,446
55.	DETAILS OF WRITE-INS	12,001,200	12,200,001	12,200,440
0501.	DETAILS OF WILLIAMS			
0502.				
0503.				
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599.	Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1401.				
1402.				
1403.				•
1498.	· · · · · · · · · · · · · · · · · · ·	0		0
1499. 3701.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	U	U	U
3701. 3702.				
3702.				
3798.	Summary of remaining write-ins for Line 37 from overflow page		0	0
3799.	Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	0	0

1	CASH FLOW			
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	0	0	0
2.	Net investment income	148,845	165,951	343,965
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	148,845	165,951	343,965
5.	Benefit and loss related payments	0	0	0
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	0	0	0
8.	Dividends paid to policyholders	0	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$	28,000	41,001	75,000
10.	Total (Lines 5 through 9)	28,000	41,001	75,000
11.	Net cash from operations (Line 4 minus Line 10)	120,845	124,950	268,965
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	, , ,
l	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	ŕ	972,727	2,103,634
	12.2 Stocks		0	0
		0		0
	12.4 Real estate		0	0
	12.5 Other invested assets		0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	794,335	972,727	2,103,634
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	752,829	1,503,702	2,548,196
	13.2 Stocks	0	0	0
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	752,829	1,503,702	2,548,196
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	41,507	(530,976)	(444,563)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes		0	0
	16.2 Capital and paid in surplus, less treasury stock		0	0
	16.3 Borrowed funds		0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
	16.5 Dividends to stockholders		0	145,303
	16.6 Other cash provided (applied)	(58)	146	75
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(58)	146	(145,228)
	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)	162,293	(405,880)	(320,825)
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	405, 105	725,931	725,931
	19.2 End of period (Line 18 plus Line 19.1)	567,398	320,051	405,105

Note: Supplemental disclosures of cash flow information for non-cash transactions:			
20.0001. Bonds sold in settlement of intercompany dividend	0	0	(54,254)
20.0002. Accrued interest on bonds sold in settlement of intercompany dividend	0	0	(443)
·			

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of The Hanover National Insurance Company ("the Company") are presented on the basis of accounting practices prescribed or permitted by the State of New Hampshire Insurance Department.

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

	SSAP#	F/S Page	F/S Line #	2022	2021
NET INCOME	<u> </u>	1 ugo	Line n	 LULL	2021
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 115,817	\$ 272,424
(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	\$ 115.817	\$ 272.424
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	xxx	XXX	XXX	\$ 12,351,263	\$ 12,235,446
(6) State Prescribed Practices that are an increase/(decrease)	from NAIC SA	AP:		\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) f	rom NAIC SAF	D :		\$ -	\$ -
(8) NAIC SAP (5-6-7=8)	xxx	XXX	XXX	\$ 12.351.263	\$ 12.235.446

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 preferred 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

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company does not own any mortgage loans.

B. Debt Restructuring

The Company did not have any restructured debt.

C. Reverse Mortgages

The Company does not own any reverse mortgages.

- D. Loan-Backed Securities
 - (1) Prepayment assumptions for loan-backed and structured securities were obtained from prepayment models that are sensitive to refinancing, turnover, equity take-out and other relevant factors. These assumptions are consistent with the current interest rate 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-recognized interest related impairment remains):

a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ 39,018
2. 12 Months or Longer	\$ 12,031

b)The aggregate related fair value of securities with unrealized losses:

1.	. Less than 12 Months	\$ 528,138
2.	. 12 Months or Longer	\$ 71,297

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

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

Not applicable

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

No Change

2-4.

Not applicable

M., N., O., P.

Not applicable

Q. Prepayment Penalty and Acceleration Fees

	Genera	al Account	Prot	ected Cell
1. Number of CUSIPs		1		0
Aggregate Amount of Investment Income	\$	248	\$	_

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

The Company did not have any due and accrued amounts over 90 days past due to exclude from surplus.

NOTE 8 Derivative Instruments

Not applicable

NOTE 9 Income Taxes

No Change

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

A. Nature of Relationships

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

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

Not Applicable

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

Not Applicable

D. Amounts due to or from related parties

At the end of the current reporting period, the Company reported \$828 as amounts due to an affiliated company. These arrangements require that the intercompany balances settled within 30 days

E. Management, Service Contracts, Cost Sharing Arrangements

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

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

Guarantees or Contingencies for Related Parties

Not Applicable

G. Nature of Relationships that Could Affect Operations

Not applicable

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 2,000 shares of \$500 par value common stock authorized and 2,000 shares issued and outstanding.

B. Dividend Rate of Preferred Stock

Not applicable

C.-F. Dividend Restrictions

Pursuant to New Hampshire's statute, the maximum dividend and other distributions that an insurer may pay in any twelve-month period, without prior approval of the New Hampshire Insurance Commissioner, is limited to the lesser of 10% of statutory policyholder surplus as of the preceding December 31, or net income. The Company declared an ordinary dividend of \$200,000 to Hanover on November 2, 2021. Accordingly, the maximum dividend that may be paid at January 1, 2022 without prior approval is \$192,379 and the Company can not declare a further dividend to it's parent without further approval until November 2, 2022, at which time the maximum dividend payable is \$392,379.

G., H., I., J., K., L., 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 R

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. The Company does not have any liabilities measured at fair value at the end of the current reporting period.
- (2) The Company does not have any Level 3 assets or liabilities measured at fair value at the end of the reporting period.
- (3) The reporting entity's policy is to recognize transfers in and transfers out as of the actual date of the event or change in circumstances that caused the transfer.
- (4) For fair value measurements categorized within Level 2 of the fair value hierarchy, fair values of bonds are obtained by a quoted market price if available, otherwise, fair values are estimated using independent pricing sources or internally developed pricing models using discounted cash flow analyses.

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

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

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

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

(5) Not applicable

- B. Not applicable
- C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument		Aggregate Fair Value	Ac	Imitted Assets		(Level 1)		(Level 2)		(Level 3)	Net /	Asset Value (NAV)	Not Practic	
Bonds	\$	10,934,456	\$	11,714,513	\$	2,139,285	\$	8,795,181	\$	1	\$	-	\$	-
Cash and Short Term Investments	œ.	567.398	œ.	567,398	œ.	567.398	e e		æ	_	¢		¢	

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.

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

Not applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not Applicable

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Not applicable

NOTE 26 Intercompany Pooling Arrangements

Not applicable

NOTE 27 Structured Settlements

Not applicable

NOTE 28 Health Care Receivables

Not applicable

NOTE 29 Participating Policies

Not applicable

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves

•

2. Date of the most recent evaluation of this liability

06/30/2022

3. Was anticipated investment income utilized in the calculation?

Yes [X] No []

NOTE 31 High Deductibles

Not applicable

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

Not applicable

NOTE 33 Asbestos/Environmental Reserves

Not applicable

NOTE 34 Subscriber Savings Accounts

Not applicable

NOTE 35 Multiple Peril Crop Insurance

Not applicable

NOTE 36 Financial Guaranty Insurance

Not applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	th the State of	Yes [] No [X]								
1.2	.2 If yes, has the report been filed with the domiciliary state?									
2.1	Has any change been made during the year of this statement in the charter, by reporting entity?	y-laws, articles of incorporation, or deed of	settlement of the	Yes [] No [X]						
2.2	If yes, date of change:		<u> </u>							
3.1	1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? If yes, complete Schedule Y, Parts 1 and 1A.									
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 per	eriod covered by this statement?		Yes [] No [X]						
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of domi ceased to exist as a result of the merger or consolidation.	icile (use two letter state abbreviation) for a	ny entity that has							
	1 Name of Entity	2 NAIC Company Code State of	3 Domicile							
5.	If the reporting entity is subject to a management agreement, including third-prin-fact, or similar agreement, have there been any significant changes regarding tyes, attach an explanation.	arty administrator(s), managing general ag ng the terms of the agreement or principals	ent(s), attorney- s involved? Yes [] No [] N/A [X						
6.1	6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.									
6.2	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.									
6.3	State as of what date the latest financial examination report became available the reporting entity. This is the release date or completion date of the examina date).	ation report and not the date of the examina	ation (balance sheet	04/01/2021						
6.4	By what department or departments?									
6.5	New Hampshire Department of Insurance Have all financial statement adjustments within the latest financial examination statement filed with Departments?] No [] N/A [X						
6.6	Have all of the recommendations within the latest financial examination report	been complied with?	Yes [] 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?										
7.2	If yes, give full information:									
8.1	3.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?									
8.2	8.2 If response to 8.1 is yes, please identify the name of the bank holding company.									
8.3	8.3 Is the company affiliated with one or more banks, thrifts or securities firms?									
8.4	If response to 8.3 is yes, please provide below the names and location (city an regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC	of the Comptroller of the Currency (OCC), t	he Federal Deposit							
	1	2	3 4 5	6						
	Affiliate Name Opus Investment Management, Inc	Location (City, State) er, MA	FRB OCC FDIC	SEC YES						

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

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;		Yes [X] No []
	(c) Compliance with applicable governmental laws, rules and regulations;		
	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and(e) Accountability for adherence to the code.		
9.11	If the response to 9.1 is No, please explain:		
9.2	Has the code of ethics for senior managers been amended?		Yes [] No [X]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).		
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [] No [X]
	FINANCIAL		
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?		
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	\$	0
	INVESTMENT		
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available		
11.2	use by another person? (Exclude securities under securities lending agreements.) If yes, give full and complete information relating thereto:		Yes [] No [X]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		
13.	Amount of real estate and mortgages held in short-term investments:		
14.1 14.2	If yes, please complete the following:		
	1 Prior Year-End		2 Current Quarter
	Book/Adjusted		Book/Adjusted
1101	Carrying Value	_	Carrying Value
	Bonds \$ Preferred Stock \$		\$0 \$0
	Common Stock \$		\$0
	Short-Term Investments \$		\$0
	Mortgage Loans on Real Estate \$		\$0
	All Other \$		\$0
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	0	\$0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above\$	0	\$0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		Yes [] No [X]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?		
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date:		
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	q	
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2		
	16.3 Total payable for securities lending reported on the liability page.		

GENERAL INTERROGATORIES

	custodial agreement with a qualified ba Outsourcing of Critical Functions, Cust For all agreements that comply with the	odial or Safekeeping Agreemen	ts of the NAIC	Financial Co	ondition Examiners F Handbook, complet	landbook?	Yes	[X]	No [
	1 Name of Cus	todian(s)			2 Custodian Addı	ress			
	Bank of New York Mellon		225 Liber	ty Street, N	New York, NY 10286 .				
7.2	For all agreements that do not comply location and a complete explanation:	with the requirements of the NA	IC Financial C	Condition Exa	ıminers Handbook, p	rovide the name,			
	1 Name(s)	2 Location(s)			3 Complete Expla	nation(s)			
	Have there been any changes, including If yes, give full information relating them.		an(s) identifie	d in 17.1 duri	ing the current quarte	er?	Yes	[]	No [X
	1 Old Custodian	2 New Custodian		3 ate of Chang		4 Reason			
7.5	Investment management – Identify all i make investment decisions on behalf c such. ["that have access to the investment of the investme	f the reporting entity. For assets	s that are man						
	Name of Fire	1 n or Individual	A	2 ffiliation					
	Opus Investment Management, Inc								
	17.5097 For those firms/individuals list		o, do any firms	/individuals u	unaffiliated with the r	eporting entity (i.e.	Yes	:[]	No [
	17.5098 For firms/individuals unaffiliate total assets under manageme	d with the reporting entity (i.e. on aggregate to more than 50%					Yes	[]	No [
7.6	For those firms or individuals listed in table below.	ne table for 17.5 with an affiliation	on code of "A"	(affiliated) or	r "U" (unaffiliated), pı	rovide the information for the	he		
	1	2			3	4		Inves	5 stment gement
	Central Registration Depository Number	Name of Firm or Individual		Legal E	Entity Identifier (LEI)				ement) Filed
		Management, Inc				SEC		DS	
	Have all the filing requirements of the F If no, list exceptions:	urposes and Procedures Manu	al of the NAIC	Investment	Analysis Office been	followed?	Yes	[X]	No [
19.	By self-designating 5GI securities, the random a. Documentation necessary to persecurity is not available. b. Issuer or obligor is current on all c. The insurer has an actual expect that the reporting entity self-designated.	mit a full credit analysis of the s contracted interest and princip tation of ultimate payment of all	security does all payments.	not exist or ai terest and pri	n NAIC CRP credit ra	ating for an FE or PL	Yes	[]	No [X
20.	By self-designating PLGI securities, the a. The security was purchased prio b. The reporting entity is holding ca c. The NAIC Designation was deriv on a current private letter rating i d. The reporting entity is not permit	to January 1, 2018. bital commensurate with the NA ed from the credit rating assignical by the insurer and available ed to share this credit rating of	AIC Designation of the security of the security of the security of the security of the PL security of the PL security of the PL security of the security of th	on reported for CRP in its let ion by state in y with the SV	or the security. egal capacity as a Ninsurance regulators. O.	RSRO which is shown	Voc	rı	No f V
	Has the reporting entity self-designated						ies	ı J	No [X
9 1	By assigning FF to a Schedule BA non	-registered private fund, the rer		certifying the	e following elements	of each self-designated			
1.	By assigning FE to a Schedule BA non FE fund: a. The shares were purchased prior b. The reporting entity is holding card. The security had a public credit ruganuary 1, 2019. d. The fund only or predominantly he. The current reported NAIC Design in its legal capacity as an NRSR	to January 1, 2019. bital commensurate with the NA ating(s) with annual surveillance olds bonds in its portfolio. nation was derived from the pu	AIC Designation	on reported fo an NAIC CRI	or the security. P in its legal capacity	as an NRSRO prior to			

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

4.2	If yes, complete the following schedule:				
4.1	(see Annual Statement Instructions pertaining	oss adjustment expenses other than certain workers' compens to disclosure of discounting for definition of "tabular reserves"	") discounted at a rate of	Yes [] No [[X]
3.2	If yes, give full and complete information theret	0.			
3.1	Have any of the reporting entity's primary reins	urance contracts been canceled?		Yes [] No [[X]
2.		any other reporting entity and agreed to release such entity from portion thereof, reinsured?		Yes [] No [[X]
1.	If the reporting entity is a member of a pooling If yes, attach an explanation.	arrangement, did the agreement or the reporting entity's partic	cipation change? Ye	es [] No []	N/A [X]

				TOTAL DI	SCOUNT		DISCOUNT TAKEN DURING PERIOD						
1	2	3	4	5	6	7	8	8 9		11			
	Maximum	Discount	Unpaid	Unpaid Unpaid			Unpaid	Unpaid					
Line of Business	Interest	Rate	Losses	LAE	IBNR	TOTAL	Losses	LAE	IBNR	TOTAL			
	0.0	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	 				0.000	%
	5.2 A&H cost containment percent	 				0.000	%
	5.3 A&H expense percent excluding cost containment expenses	 			0	0.000	%
6.1	Do you act as a custodian for health savings accounts?	 Yes []	No [[X]	ĺ	
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]	İ	
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 []	No [[X]	l	
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 [[X]	J	

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers	Current Veer to Date

1	2	Showing All New Reinsurer	1	_		
NAIC Company Code	ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
p. /				75		
·····						
			ļ			
·····						
	••••••					
·····						· · · · · · · · · · · · · · · · · · ·
						•••••••••••
					······	
			······			
·····						
			ļ			-
			ļ			
			<u> </u>			<u> </u>

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

		1	Direct Premi	Date - Allocated I ums Written		(Deducting Salvage)	Direct Losses Unpaid		
		Active Status	2 Current Year	3 Prior Year	4 Current Year	5 Prior Year	6 Current Year	7 Prior Year	
	States, etc.	(a)	To Date	To Date	To Date	To Date	To Date	To Date	
1.	AlabamaAL	N	0	0	0	0	0	0	
2.	AlaskaAK	N	0	0	0	0	0	0	
3.	ArizonaAZ	N	0	0	0	0	0	0	
4.	ArkansasAR	N	0	0	0	0	0	0	
5.	CaliforniaCA	N	0	0	0	0	0	0	
6.	ColoradoCO	N	0	0	0	0	0	0	
7.	ConnecticutCT	N	0	0	0	0	0	0	
8.	DelawareDE	N	0	0	0	0	0	0	
9.	District of ColumbiaDC	N	0	0	0	0	0	0	
10.	FloridaFL	N	0	0	0	0	0	0	
11.	GeorgiaGA	N	0	0	0	0	0	0	
12.	HawaiiHI	N	0	0	0	0	0	0	
13.	IdahoID	N	0	0	0	0	0	0	
14.	IllinoisIL	N	0	0	0	0	0	0	
15.	IndianaIN	N	0	0	0	0	0	0	
16.	lowaIA	N	0	0	0	0	0	0	
17.	KansasKS	N	0	0	0	0	0	0	
18.	KentuckyKY	N	0	0	0	0	0	0	
19.	LouisianaLA	N	0	0	0	0	0	0	
20.	MaineME	N	0	0	0	0	0	0	
21.	MarylandMD	N	0	0	0	0	0	0	
22.	MassachusettsMA	N	0	0	0	0	0	0	
23.	MichiganMI	N	0	0	0	0	0	0	
24.	MinnesotaMN	N	0	0	0	0	0	0	
25.	MississippiMS	N	0	0	0	0	0	0	
26.	MissouriMO	N	0	0	0	0	0	0	
27.	MontanaMT	N	0	0	0	0	0	0	
28.	NebraskaNE	N	0	0	0	0	0	0	
29.	NevadaNV	N	0	0	0	0	0	0	
30.	New HampshireNH	L	0	0	0	0	0	0	
31.	New JerseyNJ	N	0	0	0	0	0	0	
32.	New MexicoNM	N	0	0	0	0	0	0	
33.	New YorkNY	N	0	0	0	0	0	0	
34.	North CarolinaNC	N	0	0	0	0	0	0	
35.	North DakotaND	N	0	0	0	0	0	0	
36.	OhioOH	N	0	0	0	0	0	0	
37.	OklahomaOK	N	0	0	0	0	0	0	
38.	OregonOR	N	0	0	0	0	0	0	
39.	PennsylvaniaPA	N	0	0	0	0	0	0	
40.	Rhode IslandRI	N	0	0	0	0	0	0	
41.	South CarolinaSC	N	0	0	0	0	0	0	
42.	South DakotaSD	N	0	0	0	0	0	0	
43.	TennesseeTN	N	0	0	0	0	0	0	
44.	TexasTX	N	0	0	0	0	0	0	
45.	UtahUT	N	0	0	0	0	0	0	
46.	VermontVT	N	0	0	0	0	0	0	
47.	VirginiaVA	N	0	0	0	0	0	0	
48.	WashingtonWA	N	0	0	0	0	0	0	
49.	West VirginiaWV	N	0	0	0	0	0	0	
50.	WisconsinWI	N	0	0	0	0	0	0	
51.	WyomingWY	N	0	0	0	0	0	0	
52.	American SamoaAS	N	0	0	0	0	0	0	
53.	GuamGU	N	0	0	0	0	0	0	
54.	Puerto RicoPR	N	0	0	0	0	0	0	
55.	U.S. Virgin IslandsVI	N	0	0	0	0	0	0	
56.	Northern Mariana					.			
	IslandsMP	N	0	0	0	0	0	0	
57.	CanadaCAN		0	0	0	0	0	0	
	Aggregate Other Alien OT	XXX	0	0	0	0	0	0	
59.	Totals	XXX	0	0	0	0	0	0	
	DETAILS OF WRITE-INS								
58001.		XXX							
58002.		XXX							
58003.		XXX							
	Summary of remaining								
	write-ins for Line 58 from								
	overflow page	XXX	0	0	0	0	0	0	
58999.	Totals (Lines 58001 through								
	58003 plus 58998)(Line 58		0	0	0	0	0	0	
	above)	XXX	U	U	ı U	U	U	0	

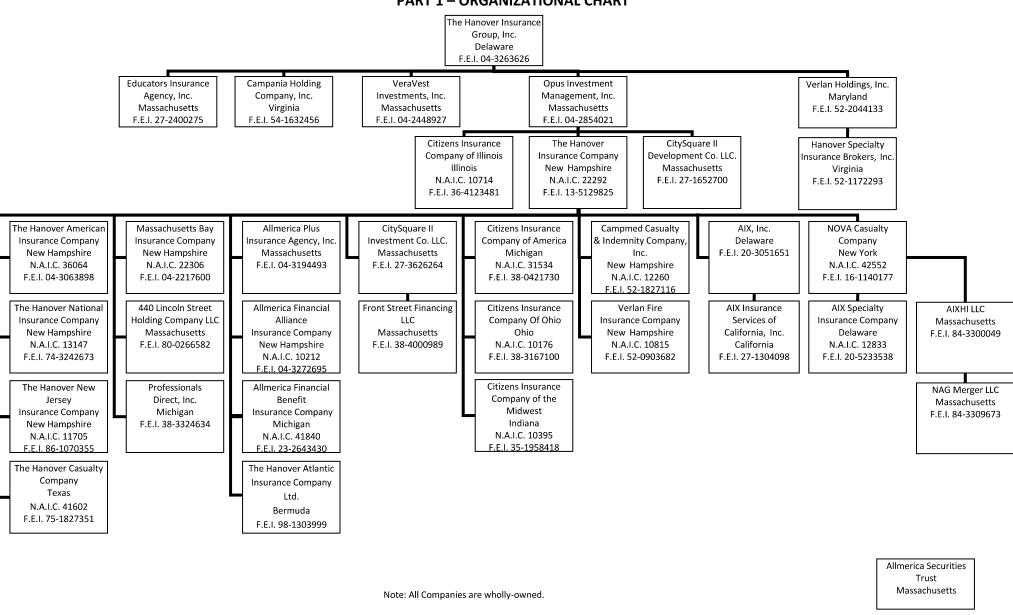
(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG	1
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other	
than their state of domicile - see DSLI)	0
B. Branche C. and a Physical and A POLIC Branches and Review and Advantage and Annual an	

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

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

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



Affiliated Investment Management Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

2	3	4	5	6	7	8	9	10	11	_12	13	14	15	16
										Туре	lt .			
										of Control	Control			
										(Ownership,	is		Is 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-	
	Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
e Hanover Insurance Group	0000	80-0266582	ROOD	Oiix	internationary	440 Lincoln Street Holding Company LLC	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NONO	
e Hanover Insurance Group		84-3300049				AIXHI LLC	MA	NIA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group		27-1304098				AIX Insurance Services of California, Inc.	CA	NIA	AIX. Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group	12833	20-5233538				AIX Specialty Insurance Company	DE	IA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group	12000	20-3051651				AIX. Inc.	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e 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	1
e 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	
e 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	1
e Hanover Insurance Group						Allmerica Securities Trust	MA	NIA	The Hanover Insurance Group, Inc.	Management	100.000	The Hanover Insurance Group, Inc.	NO	
e 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	1
e Hanover Insurance Group	12260	52-1827116				Campmed Casualty & Indemnity Co. Inc.	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group	31534	38-0421730				Citizens Insurance Company of America	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group	10714	36-4123481				Citizens Insurance Company of Illinois	IL	IA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group	10176	38-3167100				Citizens Insurance Company of Ohio	0H	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group	10395	35-1958418				Citizens Insurance Company of the Midwest	IN	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group		27-1652700				CitySquare II Development Co. L.L.C	MA	NIA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group		27-3626264				CitySquare II Investment Co., L.L.C	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group		27-2400275				Educators Insurance Agency, Inc.	MA	NIA	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group		38-4000989				Front Street Financing LLC	MA	NIA	CitySquare II Investment Co. LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N0	
e Hanover Insurance Group		52-1172293				Hanover Specialty Insurance Brokers, Inc	VA	NIA	Verlan Holdings. Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO]
e Hanover Insurance Group	22306	04-2217600				Massachusetts Bay Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO]
e Hanover Insurance Group		84-3309673				NAG Merger LLC	MA	NIA	AIXHI LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
e Hanover Insurance Group	42552	16-1140177				NOVA Casualty Company	NY	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO]
e 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]
e 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	
e Hanover Insurance Group	36064	04-3063898				The Hanover American Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO]
e Hanover Insurance Group		. 98-1303999				The Hanover Atlantic Insurance Company Ltd	BMU	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	YES	
e Hanover Insurance Group	41602	75-1827351				The Hanover Casualty Company	TX	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	J
e Hanover Insurance Group	22292	13-5129825				The Hanover Insurance Company	NH	UDP	Opus Investment Management, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
e Hanover Insurance Group		04-3263626			New York Stock Exchange	The Hanover Insurance Group, Inc.	DE	UIP			0.000		N0	
e Hanover Insurance Group	13147	74-3242673				The Hanover National Insurance Company	NH	RE	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
e Hanover Insurance Group	11705	86-1070355				The Hanover New Jersey Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
e Hanover Insurance Group		. 04-2448927				VeraVest Investments, Inc.	MA	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
e Hanover Insurance Group	10815	52-0903682				Verlan Fire Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
e Hanover Insurance Group		. 52-2044133				Verlan Holdings, Inc.	MD	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
•							_		•			· ·		
		.,	up	up	up	up	up	up	up	up	up	up	up	up

		'			
Asterisk			EX	a n	
		 	 	<u> </u>	
	1				

Part 1 - Loss Experience

NONE

Part 2 - Direct Premiums Written

NONE

Part 3 (000 omitted) - Loss and Loss Adjustment Expense Reserves Schedule $\bf N$ $\bf O$ $\bf N$ $\bf E$

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.

	_	rteaponae
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
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.	YES
	Explanations:	
1.		
2.		
3.		
4.		
1.	Bar Codes: Trusteed Surplus Statement [Document Identifier 490]	
2.	Supplement A to Schedule T [Document Identifier 455]	
3.	Medicare Part D Coverage Supplement [Document Identifier 365]	
4.	Director and Officer Supplement [Document Identifier 505]	

STATEMENT AS OF JUNE 30, 2022 OF THE HANOVER NATIONAL INSURANCE COMPANY **OVERFLOW PAGE FOR WRITE-INS**

NONE

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long-Term invested Assets		
	-	1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	11,758,230	11,369,699
2.	Cost of bonds and stocks acquired		2,548,196
3.	Accrual of discount	3, 185	6,433
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals		
6.	Deduct consideration for bonds and stocks disposed of	794,584	2, 195, 056
7.	Deduct amortization of premium	2,245	12,119
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	248	37, 169
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	11,714,513	11,758,230
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	11,714,513	11,758,230

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.

During	the Current Quarter fo							
	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
	Beginning	During	Dispositions During	During	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	9,923,487	506,866	590,363	49,570	9,923,487	9,889,560	0	9,883,597
2. NAIC 2 (a)	1,874,745	0	0	(49,792)	1,874,745	1,824,953	0	1,874,633
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
7. Total Bonds	11,798,232	506,866	590,363	(222)	11,798,232	11,714,513	0	11,758,230
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
11. NAIC 4		0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	11,798,232	506.866	590.363	-	11,798,232	11,714,513	0	11,758,230
10. Total Bottos and 1 Teletted Stock	11,750,202	300,000	550,500	(222)	11,750,202	11,717,010	0	11,730,230

a	Book/Ad	usted	Carrying	Value	e column	for the	end of	f the c	urrent	reporting	neri	nd inc	dudes	the t	following	amoun	t of sh	ort-tern	n and	cash 6	equivale	ent bon	ds by	/ NAI	C desi	ignatic	'n

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

NONE

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

NONE

ΕQ

STATEMENT AS OF JUNE 30, 2022 OF THE HANOVER NATIONAL INSURANCE COMPANY

SCHEDULE D - PART 3

and Stock Acquired During the Current Quar	rtor

			OHOW AH L	Long-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
912828-V9-8	UNITED STATES TREASURY		06/08/2022	MORGAN STANLEY CO		144,662	150,000	1,072	
91282C-ET-4	UNITED STATES TREASURY		05/26/2022	JP Morgan Securities LLC		248,799	250,000	0	1.A
	Subtotal - Bonds - U.S. Governments					393,461	400,000	1,072	XXX
	NEW YORK STATE DORMITORY AUTHORITY		05/19/2022	PIPER JAFFRAY		113,405	120,000	868	1.B FE
0909999999999999	Subtotal - Bonds - U.S. Special Revenues					113,405	120,000	868	XXX
2509999997. 7	otal - Bonds - Part 3					506,866	520,000	1,940	XXX
2509999998.7	otal - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. 7	otal - Bonds					506,866	520,000	1,940	XXX
4509999997. 7	otal - Preferred Stocks - Part 3					0	XXX	0	XXX
4509999998. 7	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
4509999999. 7	otal - Preferred Stocks					0	XXX	0	XXX
5989999997. T	otal - Common Stocks - Part 3					0	XXX	0	XXX
	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
	Total - Common Stocks					0	XXX	0	XXX
5999999999. 7	otal - Preferred and Common Stocks					0	XXX	0	XXX
6009999999 -	Totals				r	506.866	XXX	1.940	XXX

SCHEDULE D - PART 4

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

				Snow All Lo	ng-Term Bo	nds and Sto	ck Sola, Red	deemed or C												
1 2 3 4 5 6						8	9	10	Ch	ange In Boo	ok/Adjusted	Carrying Val	ue	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		Current	Other Than		Change in	Adjusted	Foreign			Stock	Stated	and
								Book/	Linragiand			,		Carrying	Exchange	Realized		Dividends	Con-	SVO
CLICID				Number of					Unrealized	Year's	Temporary		Book		Gain	Gain	Total Cain			Admini-
CUSIP		D:	Nama		0:-		A =4=1	Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at			Total Gain	Received	tractual	
Ident-	D	For- Disposal	Name	Shares of	Consid-	D. W.L.	Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on		(Loss) on	During	Maturity	strative
ification	Description	eign Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)		nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
	G2 MA7051 - RMBS				3,880	3,880	4,047	4,046	0	(166)	0	(166)	0	3,880	0	0	0	32	12/20/2050 .	. 1.A
	GNR 2020-013 HB - CMO/RMBS 9. Subtotal - Bonds - U.S. Governmei		Paydown		48,984	48,984	50,331	49,945	0	(961)	0	(961)	0	48,984	0	0	0	585	12/20/2048 . XXX	XXX
	9. Subtotal - Bonds - U.S. Governmei FH 047592 - RMBS		Dd		52,864 3,511	52,864 3,511	54,378 3,599	53,991 3.604	0	(1,127)		(1, 127)	0	52,864 3,511	0	0	0	617 50	04/01/2047 .	***
	FEDERAL FARM CREDIT BANKS FUNDING CORP		Maturity @ 100.00		100,000	100,000		100, 192		(93)		(192)		100,000				2.625	04/01/204/ .	1 A
	FH G61281 - RMBS		Paydown		2.883	2.883	2,874	2,874		10	0	10		2,883	0			40	01/01/2048 .	1 4
	FN AS1380 - RMBS	06/01/2022			1,919	1,919	2,073	2,156	0	(237)	0	(237)	0	1,919	0	0	0	33	12/01/2043	1.A
31418D-Z8-8	FN MA4366 - RMBS	06/01/2022	Paydown		5,467	5,467	5,681	5,664	0	(197)	0	(197)	0	5,467	0	0	0	56	.06/01/2041	1.A
	KENTUCKY HSG CORP HSG REV		Call @ 100.00		50,000	50,000	50,000	50,000	0	0	0	0	0	50,000	0	0	0	1,404	07/01/2022 .	. 1.A FE
63968A-L8-6	NEBRASKA PUB PWR DIST REV		PIPER JAFFRAY		96,568	100,000	100,000	100,000	0	0	0	0	0	100,000	0	(3,432)	(3,432)	2,614	01/01/2026 .	. 1.E FE
	SANTA CLARA VY CALIF WTR DIST CTFS PARTN		Maturity @ 100.00		100,000	100,000	100,000	100,000	0	0	0	0	0	100,000	0	0	0	1,302	06/01/2022 .	. 1.B FE
	9. Subtotal - Bonds - U.S. Special Re				360,348	363,780	371,317	364,489	0	(709)		(709)	0	363,780	0	(3,432)	(3,432)	8,126	XXX	XXX
	DIAGEO INVESTMENT CORP		Maturity @ 100.00		50,000	50,000	50,665	50,030	0	(30)	0	(30)	0	50,000	0	0	0	719		1.G FE
	HOME DEPOT INC		Call @ 100.00 Call @ 100.00		100,000	100,000	98,506		0	80	0	80	0	99,980	0	20	20	1,094	06/01/2022 . 01/15/2026 .	1.F FE
	LOCKHEED MARTIN CORP					,	23,493		0	24	0	24	0		u	262	262		XXX XXX	XXX
	9. Sublotal - Borids - Industrial and Ivi 7. Total - Bonds - Part 4	ilscellaneous (On	annialeu)		174,248 587.460	174,000 590.644	172,663 598.359	173,645 592.125	0	74 (1,762)	_	74 (1,762)	0	173,719 590,363	0	281 (3,151)	281 (3, 151)	2,489	XXX	XXX
	8. Total - Bonds - Part 5				XXX	XXX XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,232 XXX	XXX	XXX
	o. Total - Bonds - Part 5 9. Total - Bonds				587.460	590.644	598.359	592,125	^^^				^^^	590.363	^^^			11.232	XXX	XXX
	7. Total - Preferred Stocks - Part 4				387,460	XXX	398,339	392, 123	0	(1,762)	0	(1,762)	0	390,363	0	(3, 151)	(3, 151)	11,232	XXX	XXX
	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 - Part 5				^^^	XXX	^^^	^^^	^^^		^^^	^^^	^^^	^^^	^^^	^^^	^^^	^^^	XXX	XXX
	7. Total - Common Stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	5989999998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	5989999999. Total - Common Stocks						7000	7000	7000	7000	7000	7000	7000	7000	7000	7000	7000	7000	XXX	XXX
	9. Total - Preferred and Common Sto		0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX		
600999999		-00			587.460	XXX	598.359	592.125	0	(1.762)		(1.762)	0	590.363	0	(3, 151)	(3, 151)	11.232	XXX	XXX
					35.,.00		555,500	55E, 1E0	Ü	(.,.02)		(.,. OL)	0	555,000		(0, .01)	(0, .01)	, 202		

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

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

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

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

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

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

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

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5		lance at End of Ead uring Current Quart		9
			Amount of Interest Received	Amount of Interest Accrued	6	7	8	
		Rate of	During Current	at Current				
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
Bank of New York Mellon New York, NY		0.000	0	0	565,425	438,989	567,398	XXX
0199998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See		2001	0			0	0	2004
instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	565,425	438,989	567,398	XXX
0299998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	xxx
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	565,425	438,989	567,398	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
	· · · · · · · · · · · · · · · · · · ·				• • • • • • • • • • • • • • • • • • • •			
	······							
	······							
	· · · · · · · · · · · · · · · · · · ·							
			L	l	l			
	· · · · · · · · · · · · · · · · · · ·				•			
0599999. Total - Cash	XXX	XXX	0	0	565,425	438,989	567,398	XXX

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