

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# **QUARTERLY STATEMENT**

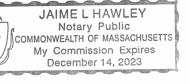
AS OF MARCH 31, 2022 OF THE CONDITION AND AFFAIRS OF THE

The Hanover American Insurance Company

NAIC Group Code 0088 0088 (Current) NAIC Company Code 36064 Employer's ID Number 04-3063898

Organized under the Laws of	New Ha	mpshire	,	State of Domicile or Port of E	Entry	NH
Country of Domicile		l	United States of	America		
Incorporated/Organized	06/08/1989			Commenced Business		11/21/1989
Statutory Home Office	4 Bedford Farms Dr	ive Suite 107			Bedford, NH, US (	22110 5005
	(Street and N		· -			ntry and Zip Code)
Main Administrative Office			440 Lincoln	Street		
			(Street and N			
	ster, MA, US 01653-0002 , State, Country and Zip (				508-853-7	
(City of Town	i, State, Country and Zip (	Jode)		(Al	rea Code) (Teleph	one Number)
Mail Address	440 Lincoln Street (Street and Number or P				Vorcester, MA, US	01653-0002 ntry and Zip Code)
		.О. ВОХ)		(City of	Town, State, Cou	mily and Zip Code)
Primary Location of Books and Reco	ords		440 Lincoln (Street and N			
Worces	ster, MA, US 01653-0002		(Street and N	umber)	508-853-7200-8	3557928
(City or Town	, State, Country and Zip	Code)		(Aı	rea Code) (Teleph	one Number)
Internet Website Address			WWW.HANOV	ER.COM		
Statutory Statement Contact	Dennis	M. Hazelwood			500 052 7	200-8557928
otationy otatement domact	Delillis	(Name)				elephone Number)
(City or Town, State, Country and 2 sernet Website Address  attutory Statement Contact  Den  DHAZELWOOD@HANOVER.  (E-mail Address)  President  Senior Vice President &		M			508-853-6	
	(E-mail Address)				(FAX Num	ber)
			OFFICE	RS		
	John Conne	er Roche	Vie	ce President & Treasurer	Na	thaniel William Clarkin
	Charles Frede	rick Cronin				
Willard Ty-Lunn Lee, Execut	ive Vice President	Denise Maur	GC een Lowsley, E	xecutive Vice President		am Lavey, Executive Vice President Salvatore, Executive Vice President
		DIRE	ECTORS OR	TRUSTEES		
Warren Ellison B Dennis Francis Ker			Jeffrey Mark Richard Willia		Liı	ndsay France Greenfield Willard Ty-Lunn Lee
Denise Maureen L	.owsley		John Conner		E	Bryan James Salvatore
Mark Joseph Welz	enbach					
	ssachusetts Norcester	SS:				
all of the herein described assets v statement, together with related exh condition and affairs of the said report in accordance with the NAIC Annual rules or regulations require differences respectively. Furthermore, the scope	vere the absolute propertibits, schedules and explicits, schedules and explicit priting entity as of the report Statement Instructions noes in reporting not report of this attestation by the ferences due to electronical schedules.	y of the said reparations therein uring period state and Accounting elated to accounte described offic ciling) of the en	corting entity, frocontained, annead above, and contained above, and contactions and Futing practices cers also include	ee and clear from any liens exed or referred to, is a full ar of its income and deductions. Procedures manual except to and procedures, according les the related corresponding int. The electronic filing may ck Cronin to & Secretary  a. Is this an original filing b. If no,	or claims thereor of true statement therefrom for the purple the extent that: (to the best of the pelectronic filing to be requested by the control of the pelectronic filing to be requested by the requested by the pelectronic filing to be requested by the pelectronic filing to be requested by the requested by the pelectronic filing to be requested by the pelectronic filing to the	nat on the reporting period stated above, a, 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 leir information, knowledge and belief, with the NAIC, when required, that is an arrious regulators in lieu of or in addition.  Nathaniel William Clarkin Vice President & Treasurer  Yes [ X ] No [ ]
Jaime L. Hawley Notary December 14, 2023	ull	, 2022		State the amendme     Date filed      Number of pages at		





# **ASSETS**

	7.0	<u> </u>	Current Statement Date	<u> </u>	1
		1	2	3 Net Admitted Assets	December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	34,483,677	0	34,483,677	34,001,503
2.	Stocks:				
	2.1 Preferred stocks				0
		0	0	0	0
3.	Mortgage loans on real estate:	0			
	3.1 First liens				0
4.	3.2 Other than first liens.	0	0	0	0
4.	Real estate: 4.1 Properties occupied by the company (less \$0				
		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 (\$				
	(\$0 ) and short-term				
	investments (\$0 )	794.875	0	794,875	131.991
6.	Contract loans (including \$0 premium notes)		0	0	0
7.	Derivatives		0	0	0
8.	Other invested assets		0	0	0
9.	Receivables for securities	0	0	0	300,000
10.	Securities lending reinvested collateral assets	0	0	0	0
11.	Aggregate write-ins for invested assets				0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	35,278,552	0	35,278,552	34,433,494
13.	Title plants less \$				
	only)				
	Investment income due and accrued	196, 125	0	196 , 125	217,956
15.	Premiums and considerations:	0	0	0	0
	<ul><li>15.1 Uncollected premiums and agents' balances in the course of collection</li><li>15.2 Deferred premiums, agents' balances and installments booked but</li></ul>	0	0		0
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$0 ) and				
	contracts subject to redetermination (\$0 )	0	0	0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0	0
	16.3 Other amounts receivable under reinsurance contracts				0
	Amounts receivable relating to uninsured plans				0
	Current federal and foreign income tax recoverable and interest thereon				6,125
18.2	Net deferred tax asset				0
19.	Guaranty funds receivable or on deposit				0
20.	Electronic data processing equipment and software	0	0	0	0
21.	Furniture and equipment, including health care delivery assets	0	0		0
22	(\$				0
22.	Receivables from parent, subsidiaries and affiliates				76,455
23. 24.	Health care (\$				0
25.	Aggregate write-ins for other than invested assets				0
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	35,590,780	0	35,590,780	34,734,030
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	35,590,780	0		34,734,030
	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.					
	Summary of remaining write-ins for Line 25 from overflow page			0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	0

# **LIABILITIES, SURPLUS AND OTHER FUNDS**

		Current Statement Date	2 December 31, Prior Year
	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
5.	Other expenses (excluding taxes, licenses and fees)		0
	Taxes, licenses and fees (excluding federal and foreign income taxes)		0
	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		0
	Net deferred tax liability		3,487
	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	0
11.	Dividends declared and unpaid:		
	11.1 Stockholders	0	0
	11.2 Policyholders		0
12.	Ceded reinsurance premiums payable (net of ceding commissions)	0	0
13.	Funds held by company under reinsurance treaties	0	0
14.	Amounts withheld or retained by company for account of others	0	0
	Remittances and items not allocated		0
16.	Provision for reinsurance (including \$0 certified)	0	0
	Net adjustments in assets and liabilities due to foreign exchange rates		0
	Drafts outstanding		0
	Payable to parent, subsidiaries and affiliates		0
20.	Derivatives		0
	Payable for securities		0
	Payable for securities lending		0
	Liability for amounts held under uninsured plans		0
	Capital notes \$0 and interest thereon \$		0
2 <del>4</del> . 25.			0
	Aggregate write-ins for liabilities		
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		3,487
27.	Protected cell liabilities		0
	Total liabilities (Lines 26 and 27)		_
	Aggregate write-ins for special surplus funds		0
	Common capital stock		5,000,000
	Preferred capital stock		0
32.	Aggregate write-ins for other than special surplus funds		0
	Surplus notes		0
	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)	13,352,666	13, 130, 543
36.	Less treasury stock, at cost:		
	36.10 shares common (value included in Line 30 \$	0	0
	36.20 shares preferred (value included in Line 31 \$	0	0
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	34,952,666	34,730,543
38.	Totals (Page 2, Line 28, Col. 3)	35,590,780	34,734,030
	DETAILS OF WRITE-INS		
2501.			
2502.			
2503.			
	Summary of remaining write-ins for Line 25 from overflow page	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0
	- out (		-
2902			
			_
2903.		ا ۱	n
2903. 2998.	Summary of remaining write-ins for Line 29 from overflow page		0
2903. 2998. 2999.	Summary of remaining write-ins for Line 29 from overflow page  Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
2903. 2998. <u>2999.</u> 3201.	Summary of remaining write-ins for Line 29 from overflow page  Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	
2903. 2998. 2999. 3201. 3202.	Summary of remaining write-ins for Line 29 from overflow page  Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	
2903. 2998. 2999. 3201. 3202. 3203.	Summary of remaining write-ins for Line 29 from overflow page  Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	

# **STATEMENT OF INCOME**

	01711211111111111	<u> </u>		
		1 Current	2 Prior Year	3 Prior Year Ended
		Year to Date	to Date	December 31
	UNDERWRITING INCOME	Tour to Date	to Buto	December of
1	Premiums earned:			
1.	1.1 Direct (written \$	7/ 06/ 752	70 426 303	280 300 307
	1.2 Assumed (written \$		70,420,393	
	1.3 Ceded (written \$78,729,806 )			
	1.4 Net (written \$0 )	0	0	0
	DEDUCTIONS:			
2.	Losses incurred (current accident year \$			
	2.1 Direct	37,996,231	36,385,607	160,448,285
	2.2 Assumed			
		37,994,249	36,385,639	
	2.4 Net		0	
2	Loss adjustment expenses incurred		0	0
3.	Loss adjustment expenses incurred	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	0
7.	Net income of protected cells	0	0	0
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	0	0	0
	INVESTMENT INCOME			
9.	Net investment income earned	270 754	231 604	924 272
		219,734	231,004	
10.	Net realized capital gains (losses) less capital gains tax of \$0	•	•	(41,027)
11.	Net investment gain (loss) (Lines 9 + 10)	279,754	231,604	883,245
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered			
	\$0 amount charged off \$	0	0	0
13.	Finance and service charges not included in premiums		0	0
14.	Aggregate write-ins for miscellaneous income	n	n	0
	55 5	0	0	0
15.	Total other income (Lines 12 through 14)	U	0	U
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal	070 754	204 204	200 045
	and foreign income taxes (Lines 8 + 11 + 15)		231,604	
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)		231,604	883,245
19.	Federal and foreign income taxes incurred	57,631	47,716	190,450
20.	Net income (Line 18 minus Line 19)(to Line 22)	222,123	183,888	692,795
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year	34,730,543	34,032,381	34,032,380
	Net income (from Line 20)		183,888	692.795
22.	Net income (from Line 20)	222, 123		,
23.	Net transfers (to) from Protected Cell accounts	0	0	0
24.		0		0
25.	Change in net unrealized foreign exchange capital gain (loss)	0	0	0
26.	Change in net deferred income tax	0	0	5,368
27.	Change in nonadmitted assets		0	0
28.	Change in provision for reinsurance	0	0	0
29.	Change in surplus notes	0	0	0
	Surplus (contributed to) withdrawn from protected cells			Λ
30.				
31.	3r - F	0	0	0
32.	Capital changes:			
	32.1 Paid in	0	0	0
	32.2 Transferred from surplus (Stock Dividend)	0	0	0
	32.3 Transferred to surplus	0	0	0
33.	Surplus adjustments:			
33.	33.1 Paid in	n	n	n
			۰	
	33.2 Transferred to capital (Stock Dividend)			U
		0	0	0
34.	Net remittances from or (to) Home Office	0	0	<u> </u> 0
35.	Dividends to stockholders	0	0	0
36.	Change in treasury stock	0	0	0
37.	Aggregate write-ins for gains and losses in surplus	0	0	0
38.	Change in surplus as regards policyholders (Lines 22 through 37)	222,123	183,888	698, 163
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	34,952,666	34,216,269	34,730,543
J9.	· · · · · · · · · · · · · · · · · · ·	UT, UUZ, UUU	JT, 210, 203	UT, 1 UU, UHU
050:	DETAILS OF WRITE-INS			
0501.				<b>.</b>
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.	, A	0	n	n
1402.				0
1403.		_	-	-
1498.	- · · · · · · · · · · · · · · · · · · ·	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
3701.				
3702.				
3703.				
		n	n	<u> </u>
3798. 3799.	Summary of remaining write-ins for Line 37 from overflow page	0	0 0	0

	CASH FLOW	4		
		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	325,272	293,225	1,051,712
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	325,272	293,225	1,051,712
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
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital			
	gains (losses)	0	0	184,001
10.	Total (Lines 5 through 9)	0	0	184,001
11.	Net cash from operations (Line 4 minus Line 10)	325,272	293,225	867,711
	,	,	,	•
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	793,478	1,525,281	7,085,377
	12.2 Stocks	0	0	0
	12.3 Mortgage loans		0	0
	12.4 Real estate		0	0
	12.5 Other invested assets			0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			0
	12.7 Miscellaneous proceeds	883, 121	251,938	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	1.676.599	1,777,219	7,085,377
13.	Cost of investments acquired (long-term only):	, , , , , ,	, , .	, ,,
	13.1 Bonds	1 299 340	2 424 091	8 289 294
	13.2 Stocks			0
	13.3 Mortgage loans			0
	13.4 Real estate	0	0	0
		0	0	0
	13.6 Miscellaneous applications	0	0	48,412
	13.7 Total investments acquired (Lines 13.1 to 13.6)	1,299,340	2,424,091	8,337,706
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)	377,260	(646,872)	(1,252,329
10.	That cash non mocamona (Emo 12.0 minuto Emo 16.1 and Emo 17)	077,200	(010,012)	(1,202,020
	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
	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)	(39,648)	(81,230)	(41,473
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5		, , ,	
	plus Line 16.6)	(39,648)	(81,230)	(41,473)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.		662,884	(434,876)	(426,091
19.	Cash, cash equivalents and short-term investments:			
•	•	131,991	558,082	558,082
		, i		131,991
	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) Cash, cash equivalents and short-term investments:	·		558,0

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

#### NOTE 1 Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

The financial statements of The Hanover American 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	00/11 //			-		2021
(1) State basis (Page 4, Line 20, Columns 1 & 3)	xxx	XXX	XXX	\$	222,123	\$ 692,795
(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	\$	222.123	\$ 692.795
SURPLUS						
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$	34,952,666	\$ 34,730,543
(6) State Prescribed Practices that are an increase/(decrease)	from NAIC S	AP:		\$	-	\$ -
(7) State Permitted Practices that are an increase/(decrease) for	rom NAIC SA	P:		\$	-	\$ -
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$	34,952,666	\$ 34,730,543

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

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

#### C. Accounting Policy

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

Not applicable

## NOTE 2 Accounting Changes and Corrections of Errors

Not applicable

#### NOTE 3 Business Combinations and Goodwill

#### 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
 \$ 40,902

 2. 12 Months or Longer
 \$ 14,766

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

 1. Less than 12 Months
 \$ 732,428

 2. 12 Months or Longer
 \$ 159,895

(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)

		Gross (Admitted & Nonadmitted) Restricted									
			Current Year			6	7				
	1	2	3	4	5						
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)				
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	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -				
<ul><li>g. Placed under option contracts</li><li>h. Letter stock or securities restricted as to sale</li></ul>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -				
- excluding FHLB capital stock	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -				
i. FHLB capital stock	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -				
j. On deposit with states	\$ 5,688,839	\$ -	\$ -	\$ -	\$ 5,688,839	\$ 5,993,911	\$ (305,072)				
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	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -				
o. Total Restricted Assets	\$ 5,688,839	\$ -	\$ -	\$ -	\$ 5,688,839	\$ 5,993,911	\$ (305,072)				

- (a) Subset of Column 1
- (b) Subset of Column 3

	Current Year								
		8		9	Perce	entage			
					10	11			
Restricted Asset Category		Total Non- admitted destricted		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	\$	-	\$	-	0.000%	0.000%			
b. Collateral held under security lending			_		0.0000/	0.0000/			
agreements	\$	-	\$	-	0.000%	0.000%			
c. Subject to repurchase agreements	\$	-	\$	-	0.000%				
d. Subject to reverse repurchase agreements e. Subject to dollar repurchase agreements	\$	-	\$	-	0.000% 0.000%				
f. Subject to dollar reverse repurchase	Ъ	-	Þ	-	0.000%	0.000%			
agreements	\$	_	\$	_	0.000%	0.000%			
g. Placed under option contracts	\$	_	\$	_	0.000%	0.000%			
h. Letter stock or securities restricted as to sale			·						
- excluding FHLB capital stock	\$	-	\$	-	0.000%	0.000%			
i. FHLB capital stock	\$	-	\$	-	0.000%	0.000%			
j. On deposit with states	\$	-	\$	5,688,839	15.984%	15.984%			
k. On deposit with other regulatory bodies	\$	-	\$	-	0.000%	0.000%			
Pledged collateral to FHLB (including assets backing funding agreements)     Pledged as collateral not captured in other	\$	-	\$	-	0.000%	0.000%			
categories	\$	_	\$	-	0.000%	0.000%			
n. Other restricted assets	\$	-	\$	-	0.000%	0.000%			
o. Total Restricted Assets	\$		\$	5,688,839	15.984%	15.984%			

- (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)

Not applicable

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

Not applicable

M., N., O., P., Q., R.

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 Greather than 1/2% of Admitted Assets

Not Applicable

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

#### D. Amounts Due to or From Related Parties

At the end of the current reporting period, the Company reported \$116,103 as amounts receivable from an affiliated company. These arrangements require that intercompany balances be settled within 30 days.

#### E. Management, Service Contracts, Cost Sharing Arrangements

Companies affiliated with Hanover have entered into an intercompany Consolidated Service Agreement, under the agreement, legal entities wll 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 the THG legal entities. Investment related services are provided by Opus pursuant to an intercompany Advisory Agreement.

#### F. Guarantees or Contingencies for Related Parties

Not Applicable

#### G. Management, Service Contracts, Cost Sharing Arrangements

Not Applicable

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

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 10,000 shares of \$500 par value common stock authorized and 10,000 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. Accordingly, the maximum dividend that may by paid at January 1, 2022 without prior approval is \$2,278,659. Dividends or distributions made within the preceding twelve months were considered in the above computation.

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

Not applicable

#### NOTE 14 Liabilities, Contingencies and Assessments

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

Not applicable

#### 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

#### 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	Ad	Imitted Assets		(Level 1)		(Level 2)		(Level 3)	Net A	Asset Value (NAV)	Not Prac	
Bonds	\$	33,444,519	\$	34,483,677	\$	5,245,823	\$	23,455,172	\$	4,743,524	\$	-	\$	-
Cash and Short- Term	¢	704 975	æ	704 975	œ	704 975	œ		¢		e		¢	

D., E.

#### NOTE 21 Other Items

A. Unusual or Infrequent Items

Not Applicable

B. Troubled Debt Restructuring: Debtors

Not applicable

C. Other Disclosures

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

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

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

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

C. Reinsurance Assumed and Ceded

No Change

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

Not applicable

#### NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not applicable

# NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Not applicable

#### NOTE 26 Intercompany Pooling Arrangements

Not applicable

#### NOTE 27 Structured Settlements

Not applicable

#### NOTE 28 Health Care Receivables

Not applicable

#### NOTE 29 Participating Policies

#### NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves

\$ -

2. Date of the most recent evaluation of this liability

03/31/2022

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

# **GENERAL INTERROGATORIES**

# PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

1.1	Did the reporting entity experience any material transactions requiring the filing 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 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	Is the reporting entity a member of an Insurance Holding Company System co is an insurer?			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 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	nny 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	State as of what date the latest financial examination of the reporting entity wa	as made or is being made.		12/31/2019
6.2	State the as of date that the latest financial examination report became availal date should be the date of the examined balance sheet and not the date the re			12/31/2019
6.3	State as of what date the latest financial examination report became available the reporting entity. This is the release date or completion date of the 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 registration 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 Fede	eral Reserve Board?		Yes [ ] No [ X ]
8.2	If response to 8.1 is yes, please identify the name of the bank holding compan	ny.		
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 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	similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?			Yes [ X	] No [	]
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reportin	g 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					
0 11	(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	Have any provisions of the code of ethics been waived for any of the specified officers?			Yes [	1 No [ X	( )
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).			-		
	FINANCIAL					
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?.			V 1 2ΔV	1 No [	1
	If yes, indicate any amounts receivable from parent included in the Page 2 amount:					
	INVESTMENT					
	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or other use by another person? (Exclude securities under securities lending agreements.)			Yes [	] No [ X	( ]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		æ			0
13.	Amount of real estate and mortgages held in short-term investments:					
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?					
14.2	If yes, please complete the following:			100 [		٠, ١
		1 Prior Year-End		Cur	2 rrent Quart	ter
		Book/Adjusted		Во	ok/Adjuste	ed
14 04	Bonds	Carrying Value	_		rrying Valu	
	Preferred Stock \$					
	Common Stock \$					
	Short-Term Investments \$					
	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\$					
15.1	, , , , , , , , , , , , , , , , , , , ,					
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?	\	es [	] No [	] N/A	[ ]
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					
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Pa	rts 1 and 2	\$			0 n
	16.3 Total payable for securities lending reported on the liability page					U

# **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 control of th	on reported for CRP in its let ion by state ir 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
<b>9</b> 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**

1.	If the reporting If yes, attach a	entity is a member in explanation.	per of a pooling	arrangement, d	id the agreemer	nt or the reporting	ng entity's partic	ipation change?	Ye:	s [ ] No [	] N/A [	Х ]
2.		ing entity reinsur loss that may oc in explanation.								Yes [ ]	No [ X ]	
3.1	Have any of th	e reporting entity	's primary reins	urance contrac	ts been canceled	d?				Yes [ ]	No [ X ]	
3.2	If yes, give full	and complete in	formation theret	0.								
4.1 4.2	(see Annual Sinterest greate	liabilities for unp tatement Instruct r than zero?	ions pertaining t	to disclosure of	discounting for	definition of " ta	bular reserves"	) discounted at	a rate of	Yes [ ]	No [ X ]	
			1		TOTAL DIS	SCOUNT	I	DISC	OUNT TAKEN	N DI IRING PE	RIOD	
	1	2	3	4	5	6	7	8	9	10	11	
Line	e of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTA	L
		0.0	0.000	0	0	0	0	0	0	0		0
			TOTAL	0	0	0	0	0	0	(	)	0
5.	Operating Pero	centages:									0.0	000 9
	5.2 A&H cost of	containment perc	ent								0.0	000 9

5.3 A&H expense percent excluding cost containment expenses ......

6.3 Do you act as an administrator for health savings accounts?

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

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

6.1 Do you act as a custodian for health savings accounts? .....

domicile of the reporting entity? ...

.....0.000 %

Yes [ ] No [ X ]

Yes [ ] No [ X ]

Yes [ X ] No [ ]

Yes [ ] No [ ]

# SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year t	o Data	

4	0	Showing All New Reinsurer 3	Julion Tear to De	л. С		7
1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
				, , , , , , , , , , , , , , , , , , , ,	( · · · · · · · · · · · · · · · · · · ·	
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	•••••		• • • • • • • • • • • • • • • • • • • •		•••••	• · · · · · · · · · · · · · · · · · · ·

# **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

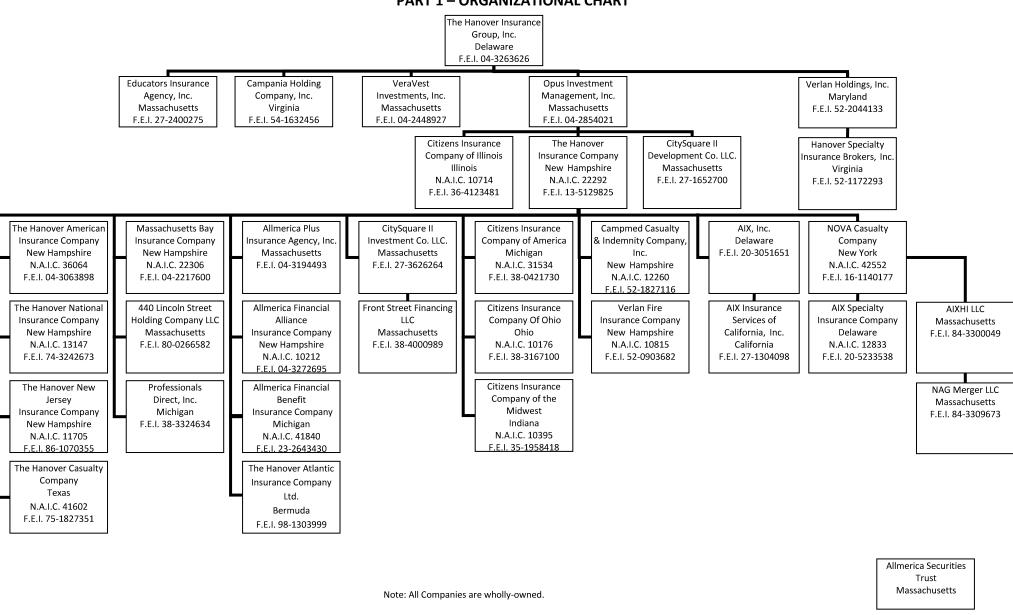
Current Year to Date - Allocated by States and Territories

					y States and Terri		B1	a Hans Cit
		1 Active	Direct Premiu 2	ms Written 3	Direct Losses Paid (I	Deducting Salvage)	Direct Losse	es Unpaid 7
		Status	Current Year	o Prior Year	Current Year	5 Prior Year	Current Year	/ Prior Year
	States, etc.	(a)	To Date	To Date	To Date	To Date	To Date	To Date
1.	AlabamaAL	L	238,311	126 , 159	0	166,746	373 , 125	263,262
2.	AlaskaAK	L	,	1,959	0	0	7,649	7, 121
3.	ArizonaAZ	L		1,229,991	472,053	495,076	5,209,812	3,620,503
4.	ArkansasAR	L		393,389	71,594	,	1,060,410	2, 196, 472
5.	CaliforniaCA	L		7,666,516	3, 127, 558	3,604,146	40,381,749	44,527,059
6.	ColoradoCO	L		1,605,201	1,607,899	4 , 158 , 445	4,171,482	7,482,756
7.	ConnecticutCT	L		15,106,645	12,939,417	6,970,874	52,349,103	45,057,710
8.	DelawareDE	L		82,056	78,243	3,895	652,927	1, 188, 271
9.	District of ColumbiaDC	L		1,336,586	153,864	151,203	2,977,510	1,983,722
10.	FloridaFL	L		2,402,883	1,324,390		17,160,666	20,535,703
11.	GeorgiaGA	L		2,137,396	202,208	165,706	4,740,329	3,684,444
12.	HawaiiHI	L		34,861	2,771	0	24,321	13,845
13.	IdahoID	L		77,771	9,620	26,254	,	173,755
14.	IllinoisIL	L		1,839,689	405,891	475,016	6,738,435	6,851,580
15.	IndianaIN	L		485,619	173,280	193,653	1,974,394	2,045,520
16.	lowaIA	L		58,111	50,376		358,422	457,047
17.	KansasKS	L		121,467	129,291	37,240	744,495	253,967
18.	KentuckyKY	L		627,624	400,062	1,117,376	3,681,329	6, 186, 744
19.	LouisianaLA	L		5,396,396	3,879,024	3,653,794	21,901,373	25,441,145
20.	MaineME	L	,	174,074	23,303			386, 139
21.	MarylandMD	L	3,272,238	2,897,285	1,489,861	504,554	16,827,168	8,638,265
22.	MassachusettsMA	L		1 , 129 , 168	337,608	215,474	4,090,867	3,503,298
23.	MichiganMI	L		1,675,910	1,577,360	386,562	11,674,045	3,461,688
24.	MinnesotaMN	L		1,863,812	313,788	409,904	5,033,996	4,201,413
25.	MississippiMS	L	, , ,	251,526	197,739	101,412	773,414	779,041
26.	MissouriMO	L	,	400,119	414,837	53,405	2,862,508	1,775,317
27.	MontanaMT	L		16,930	0	0	39,767	30,891
28.	NebraskaNE	L	64,381	16,913	1,008		262,608	279,689
29.	NevadaNV	L		709,787	61,669	91,486	966,384	898,430
30.	New HampshireNH	L	249,568	279,494	46,711	7,328	1,489,061	1,396,803
31.	New JerseyNJ	L		570,420	118,275	16,711	1,348,179	784,300
32.	New MexicoNM	L	156,794	153,543	7,462		111,269	130,329
33.	New YorkNY	L	1,465,372	1, 183, 329	156,215	54,104	2,861,891	2,287,147
34.	North CarolinaNC	L	4,577,429	4,377,587	1,857,143	1,587,548	16,885,585	14,585,922
35.	North DakotaND	N	0	0	0	0	0	0
36.	OhioOH	L	214,802	95,565	5,864	1,090,095	153,586	695,015
37.	OklahomaOK	L	269,920	426,791	62,521	61,095	1,565,365	1,712,726
38.	OregonOR	L	1,747,647	1,649,300	1,545,218	2,402,565	6,662,822	11,557,737
39.	PennsylvaniaPA	L	435,736	542,022	29,295	41,450	1,460,356	1,771,712
40.	Rhode IslandRI	L	95,862	241,008	13,260	94,255	1,255,939	308,190
41.	South CarolinaSC	L	1,614,274	1,482,751	467,668	109,430	3,931,489	4,442,729
42.	South DakotaSD	L	73,668	21,263	5,134	1,419	147, 184	47,709
43.	TennesseeTN	L	3, 157, 917	3,351,582	1,817,949	2,032,270	18,605,474	19,583,906
44.	TexasTX	L	4,584,453	3,652,814	638,968	1,053,985	15,821,738	12,783,636
45.	UtahUT	L	1,039,334	802,541	430 , 173	186,653	3,023,173	2,605,936
46.	VermontVT	L	156,413	67, 138	2,206	6,737	145,034	127,205
47.	VirginiaVA	L	3,063,422	3,241,804	549,777	1,004,896	9,362,935	9,306,962
48.	WashingtonWA	LL	1,797,842	1,795,163	1,408,727	393, 166	7,117,062	6,436,979
	West VirginiaWV			249,282	46,221	2,664	478,975	189,043
	WisconsinWI	L	717,692	666,977	229,813	79,308	1,082,589	1,311,018
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
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
57.	CanadaCAN		467	506	0	0	(2)	10
58.	Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59.	Totals	XXX	78,729,743	74,716,723	38,883,314	34,279,675	301,432,081	287,989,811
	DETAILS OF WRITE-INS							
58001.		XXX						
58002.		XXX						
58003.		XXX						
	Summary of remaining	5 (						
	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	1001		^	_			^
	above) e Status Counts:	XXX	0	0	0	0	0	0

lines in the state of domicile...

a) Active Status Counts.	
L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG	49
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other	
than their state of domicile - see DSLI).	0
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus	

# 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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
								1			Type	lf			
											of Control	Control			
											(Ownership.	is		Is an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filina	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	,
Code	O No	. ,		RSSD	CIK		Or Affiliates				Other)				
Code	Group Name	Code	Number	KSSD	CIK	International)		tion	Entity	(Name of Entity/Person)	- · · · · · · · · · · · · · · · · · · ·	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	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		84-3300049				AIXHI LLC	MA	NIA	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-1304098				AIX Insurance Services of California, Inc	CA	NIA	AIX, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
8800	The 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	
	The Hanover Insurance Group	40040	20-3051651				AIX, Inc.	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	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	
088	The 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	N0	
088	The 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	
088	The 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	
088	The Hanover Insurance Group	10176	38-3167100				Citizens Insurance Company of Ohio	OH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
088	The Hanover Insurance Group	10395	35-1958418				Citizens Insurance Company of the Midwest	IN	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-1652700				CitySquare II Development Co., L.L.C	MA	NIA	Opus Investment Management, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-3626264				CitySquare II Investment Co., L.L.C	MA		The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		27-2400275				Educators Insurance Agency, Inc.	MA	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		38-4000989				Front Street Financing LLC	MA	NIA	CitySquare II Investment Co. LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		52-1172293				Hanover Specialty Insurance Brokers, Inc	VA	NIA	Verlan Holdings, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
8800	The Hanover Insurance Group	22306	04-2217600				Massachusetts Bay Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		84-3309673				NAG Merger LLC	MA	NIA	AIXHI LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
8800	The Hanover Insurance Group	42552	16-1140177				NOVA Casualty Company	NY	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		04-2854021				Opus Investment Management, Inc.	MA	UIP	The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		38-3324634				Professionals Direct, Inc.	MI	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
088	The Hanover Insurance Group	36064	04-3063898				The Hanover American Insurance Company	NH	RE	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		98-1303999				The Hanover Atlantic Insurance Company Ltd	BMU	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	YES	
088	The Hanover Insurance Group	41602	75-1827351				The Hanover Casualty Company	TX	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
088	The Hanover Insurance Group	22292	13-5129825				The Hanover Insurance Company	NH		Opus Investment Management, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
088	The Hanover Insurance Group		04-3263626			New York Stock Exchange	The Hanover Insurance Group, Inc.	DE	UIP			0.000		N0	
088	The Hanover Insurance Group	13147	74-3242673				The Hanover National Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
088	The Hanover Insurance Group	11705	86-1070355				The Hanover New Jersey Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		04-2448927				VeraVest Investments, Inc.	MA	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
0088	The Hanover Insurance Group	10815	52-0903682				Verlan Fire Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		52-2044133				Verlan Holdings, Inc.	MD	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
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# **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		(41,887)	•	_
2.1	Allied Lines		, , ,	38.5	
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		(10,193)		(2.
3.	Farmowners multiple peril			0.0	0.
4.	Homeowners multiple peril			18.7	69.
5.	Commercial multiple peril			42.3	67.
6.	Mortgage guaranty			0.0	0.
8.	Ocean marine			0.0	0.
9.	Inland marine			7.3	37.
10.	Financial guaranty			0.0	0.
11.1	Medical professional liability - occurrence			0.0	0.
11.2	Medical professional liability - claims-made			0.0	0.
12.	Earthquake			(7.0)	10.
13.1	Comprehensive (hospital and medical) individual			0.0	0.
13.1	Comprehensive (hospital and medical) individual			0.0	0.
14.	Credit accident and health			0.0	0.
15.1	Vision only			0.0	0.
15.1	Dental only			0.0	0.
15.2	Disablity income			0.0	0.
15.4	Medicare supplement			0.0	0.
15.4	Medicaid Title XIX			0.0	0.
15.6	Medicare Title XVIII			0.0	0.
15.7	Long-term care			0.0	0.
	Federal employees health benefits plan			0.0	0.
15.8 15.9	Other health			0.0	0.
16.	Workers' compensation		11.049.051		23.
	Other liability - occurrence	, , ,	(569,230)		
17.1			(22,325)		30.
17.2	Other liability - claims-made	·		(29.3)	0.
17.3	Products liability - occurrence		0		57.
18.1				(21.8)	
18.2	Products liability - claims-made		(107,429)		
19.1	Private passenger auto no-fault (personal injury protection)		7,142,725		0.
19.2	Other private passenger auto liability			(48.7)	55.
19.3	Commercial auto no-fault (personal injury protection)		(3,827)	, ,	
19.4	Other commercial auto liability		` ' '	(8.7)	91.
21.1	Private passenger auto physical damage		5,825,949	85.2	37.
21.2	Commercial auto physical damage		211,195	88.0	28.
22.	Aircraft (all perils)		0	0.0	0.
23.	Fidelity		603	177.4	14.
24.	Surety		0	0.0	0.
26.	Burglary and theft			(42.0)	114.
27.	Boiler and machinery		,	21.6	0.
28.	Credit		0	0.0	0.
29.	International			0.0	0.
30.	Warranty			0.0	0.
31.	Reinsurance - Nonproportional Assumed Property		XXX		XXX
32.	Reinsurance - Nonproportional Assumed Liability				XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines		XXX		XXX
34.	Aggregate write-ins for other lines of business		0	0.0	0.
35.	Totals	74,964,752	37,996,231	50.7	51.
3401.	DETAILS OF WRITE-INS				
3402.					
3403.					
3498.	Summary of remaining write-ins for Line 34 from overflow page	0 1	0	0.0	0.

# **PART 2 - DIRECT PREMIUMS WRITTEN**

	Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire		445,425	
2.1	Allied Lines	965,887	965,887	1,060,565
2.2	Multiple peril crop	0	0	
2.3	Federal flood	0	0	(
2.4	Private crop	0	0	(
2.5	Private flood			26,213
3.	Farmowners multiple peril		0	(
4.	Homeowners multiple peril	2,024,353	2,024,353	2,340,213
5.	Commercial multiple peril	35,424,882	35,424,882	33,710,159
6.	Mortgage guaranty	0	0	(
8.	Ocean marine			(
9.	Inland marine		56,870	70,59
10.	Financial guaranty	0	0	(
11.1	Medical professional liability - occurrence			
11.2	Medical professional liability - claims-made			
12.	Earthquake			374,759
13.1	Comprehensive (hospital and medical) individual			(
13.2	Comprehensive (hospital and medical) group			(
14.	Credit accident and health			(
15.1	Vision only			(
15.1	Dental only			(
	Disablity income			(
15.3				
15.4	Medicare supplement			
15.5	Medicaid Title XIX		0	
15.6	Medicare Title XVIII			
15.7	Long-term care			
15.8	Federal employees health benefits plan			(
15.9	Other health			
16.	Workers' compensation			17,796,646
17.1	Other liability - occurrence			1,477,947
17.2	Other liability - claims-made	·	,	52,848
17.3	Excess workers' compensation			(
18.1	Products liability - occurrence			371,022
18.2	Products liability - claims-made			(
19.1	Private passenger auto no-fault (personal injury protection)			(
19.2	Other private passenger auto liability	9,775,532	9,775,532	9,353,80
19.3	Commercial auto no-fault (personal injury protection)	7,866	7,866	8,079
19.4	Other commercial auto liability	1,365,683	1,365,683	1,453,069
21.1	Private passenger auto physical damage	6, 196, 106	6, 196, 106	5,616,86
21.2	Commercial auto physical damage	222,863	222,863	251,582
22.	Aircraft (all perils)	0	0	(
23.	Fidelity	0	0	(
24.	Surety	0	0	(
26.	Burglary and theft	2,126	2,126	4,037
27.	Boiler and machinery	141,022	141,022	142,830
28.	Credit	0	0	(
29.	International			(
30.	Warranty			(
31.	Reinsurance - Nonproportional Assumed Property			xxx
32.	Reinsurance - Nonproportional Assumed Liability			XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines		1001	XXX
34.	Aggregate write-ins for other lines of business		0	(
35.	Totals	78,729,743	78,729,743	74,716,72
JJ.	DETAILS OF WRITE-INS	10,120,170	10,120,170	17,110,12
3401.	DETAILS OF WRITE-INS			
3401.				
3403.	Cummon of completing with ine feet ine 24 from quaffer and			
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	U	

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

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

# 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?	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?	YES
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.		
2.		
3.		
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]	

# STATEMENT AS OF MARCH 31, 2022 OF THE HANOVER AMERICAN INSURANCE COMPANY **OVERFLOW PAGE FOR WRITE-INS**

# NONE

# **SCHEDULE A - VERIFICATION**

Real Estate

			1
		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 parallel amitme less less less less less less less le		
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	34,001,503	32,949,689
2.	Cost of bonds and stocks acquired		8,289,294
3.	Accrual of discount	2,940	15,658
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	(48,088)
6.	Deduct consideration for bonds and stocks disposed of	793,478	7,099,852
7.	Deduct amortization of premium	26,628	119,673
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)	34,483,677	34,001,503
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	34,483,677	34,001,503

# **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

Duit	ng the Current Quarter to	2	3	4	5	6	7	8
NAIC Designation	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
19/10 Designation	or current Quarter	Current Quarter	Current Quarter	Current Quarter	i iist Quartei	Second Quarter	Tillia Quarter	Thorreal
BONDS								
1. NAIC 1 (a)	31,262,448	1,299,340	793,478	(22,687)	31,745,623	0	0	31,262,448
2. NAIC 2 (a)		0	0	(1,001)	2,738,054	0	0	2,739,055
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	34,001,503	1,299,340	793,478	(23,687)	34,483,677	0	0	34,001,503
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	34,001,503	1,299,340	793,478	(23,687)	34,483,677	0	0	34,001,503

(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)

	(Odon Equivalento)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	202,375
2.	Cost of cash equivalents acquired	3,891	9,532
3.	Accrual of discount	0	0
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	0
6.	Deduct consideration received on disposals	3,891	211,907
7.	Deduct amortization of premium	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	0	0

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

Schedule A - Part 3 - Real Estate Disposed **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** 

# ΕÓ

#### STATEMENT AS OF MARCH 31, 2022 OF THE HANOVER AMERICAN INSURANCE COMPANY

# **SCHEDULE D - PART 3**

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

			Show All L	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 UNITED STATES TREASURY		03/10/2022 03/30/2022	JP Morgan Securities LLC MORGAN STANLEY CO			200,000	249	1.A
91282C-EF-4	Subtotal - Bonds - U.S. Governments		03/30/2022	MUHGAN STANLEY CU		699.340	500,000 700,000	283	XXX
	MICHIGAN ST STRATEGIC FD LTD OBLIG REV	1	03/03/2022	SIEBERT BRANDFORD SHANK		699,340 300,000	700,000 300.000		1.D FE
	UNIVERSITY MASS BLDG AUTH PROJ REV			SALOMON BROTHERS INC		300,000	300,000		1.D FE
	Subtotal - Bonds - U.S. Special Revenues			UNEXHIDI SID III		600,000	600,000	0	XXX
	Total - Bonds - Part 3					1,299,340	1,300,000	283	XXX
	Total - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. 7	Total - Bonds					1,299,340	1,300,000	283	XXX
4509999997. T	Total - Preferred Stocks - Part 3					0	XXX	0	XXX
4509999998. 7	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
4509999999. 7	Total - Preferred Stocks					0	XXX	0	XXX
5989999997. 7	otal - Common Stocks - Part 3					0	XXX	0	XXX
5989999998. 7	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
5989999999. 7	Total - Common Stocks					0	XXX	0	XXX
5999999999. 7	otal - Preferred and Common Stocks					0	XXX	0	XXX
6009999999 -	Totals					1,299,340	XXX	283	XXX

# **SCHEDULE D - PART 4**

					Show All Lo	ng-Term Bo	onds and Sto	ck Sold, Red	deemed or (	Otherwise I	Disposed o	of During th	ne Current	Quarter							
1	2	3	4	5	6	7	8	9	10	Ch	ange In Boo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation.
																					NAIC
													Total	Total							Desig-
												Current							Bond		nation
													Change in	Foreign	Book/				Interest/		Modifier
									Prior Year		0	Year's	Book/	Exchange		Foreign			Stock	Ctatad	
												Other Than	Adjusted	Change in	Adjusted	Foreign	Daaliaad			Stated	and
OLIOID					N				Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized	T. ( . ) O	Dividends	Con-	SVO
CUSIP			D:	N1	Number of	0		A . 1 1	Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-	B d . ft	For-		Name	Shares of	Consid-	D. William	Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign		of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)		nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
	2 MA6409 - RMBS		03/01/2022	Paydown		7,921 8,908	7,921 8,908		8,253 9,289	0	(332)	0	(332)	0	7,921	0	0		37	01/20/2050 12/20/2050	. 1.A
	2 MA7589 - RMBS			Paydown		4,904			5,069	0	(382)	0	(382)		4.904	0	0		29	12/20/2050	1.4
	NR 2016-173 CT - CMO/RMBS			Paydown		66,595				0	(270)	0	(270)	0		0	0		327	10/20/2045	1.A
	NR 2021-117 PC - CMO/RMBS			Paydown		5, 174	5, 174	5,268	5,264	0	(90)	0	(90)	0	5, 174	0	0	0	18	07/20/2051	1.A
0109999999	. Subtotal - Bonds - U.S. Governme	ents	•			93,502	93,502	95,130	94,740	0	(1,238)	0	(1,238)	0	93,502	0	0	0	431	XXX	XXX
649791-CM-0 N	EW YORK ST		03/01/2022	Maturity @ 100.00		35,000	35,000	39,292	35,081	0	(81)	0	(81)	0	35,000	0	0	0	795	03/01/2022	1.B FE
0509999999	. Subtotal - Bonds - U.S. States, Tel	rritorie	es and Poss	essions		35,000	35,000	39,292	35,081	0	(81)	0	(81)	0	35,000	0	0	0	795	XXX	XXX
64966H-YE-4 N				Maturity @ 100.00		250,000	250,000	277, 143	250,621	0	(621)	0	(621)	0	250,000	0	0	0	6,280	03/01/2022	1.0 FE
0709999999	. Subtotal - Bonds - U.S. Political Su	ubdivi		tes, Territories and P	Possessions	250,000	250,000	277, 143	250,621	0	(621)	0	(621)	0	250,000	0	0	0	6,280	XXX	XXX
	H G60037 - RMBS			Paydown		6,640	6,640	6,456	6,452	0	188	0	188	0	6,640	0	0	0	31	10/01/2043	. 1.A
	HR 2113 QG - CMO/RMBS			Paydown		2,234	2,234	2,401	2,362	0	(128)	0	( 128)	0	2,234	0	0	0	24	01/15/2029	. 1.A
	N AS1380 - RMBS			Paydown		525	525	567	590	0	(65)	0	(65)	0	525	0	0	0	6	12/01/2043	1.A
	OUISIANA HSG CORP SINGLE FAMILY MTG REV			Call @ 100.00		6,903 7,536	6,903 7,536	6,903 7,536	6,903 7,536		0				6,903	0			27	12/01/2038	1.A FE
	EW ORLEANS NAVY HOUSING LLC			Call @ 100.00			100,000	100,000			0	٠٥			100,000				1.079	12/15/2029	1.E FE
	IRGINIA ST HSG DEV AUTH HOMEOWNERSHIP M		03/01/2022		*	9.948	9.948	9,600	9,619	0	329	0	329	0	9.948	0	0	0	55	08/25/2042	1.B FE
	. Subtotal - Bonds - U.S. Special Re	evenu				133.786	133.786	133.463	133,461	0	325	0	325	0	133.786	0	0	0	1.254	XXX	XXX
	TONEHENGE CAPITAL FUND CONNECTICUT IV L		03/15/2022	Paydown	I	95,618	95,618	95,618	95,618	0	0	0	0	0	95,618	0	0	0	1,912	12/15/2025	1.G
86208#-AC-9	TONEHENGE CAPITAL FUND CONNECTICUT VI,		03/15/2022	Paydown		174,899	174,899	174,899	174,899	0	0	0	0	0	174,899	0	0	0	3, 187	12/15/2031	1.0 FE
	FRBS 2012-C9 A3 - CMBS			Paydown		10,674	10,674	10,833	10,684	0	(10)	0	(10)	0	10,674	0	0	0	60	11/17/2045	. 1.A FM
	. Subtotal - Bonds - Industrial and M	/liscell	aneous (Una	affiliated)		281, 190	281,190	281,349	281,201	0	(10)	0	(10)	0	281,190	0	0	0	5, 159	XXX	XXX
	'. Total - Bonds - Part 4					793,478	793,479	826,377	795, 104	0	(1,625)		(1,625)	0	793,478	0	0	0	13,919	XXX	XXX
	. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	. Total - Bonds					793,478	793,479	826,377	795, 104	0	(1,625)	0	(1,625)	0	793,478	0	0	0	13,919	XXX	XXX
	. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0		0	0	XXX	XXX
	. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	'. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0		0	0	0	0	0	XXX	XXX
	. Total - Common Stocks - Part 5			·		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	. Total - Preferred and Common Sto	ocks				0	XXX	0	0	0	0		0		0	0		0	0	XXX	XXX
6009999999	- Totals					793,478	XXX	826,377	795, 104	0	(1,625)	0	(1,625)	0	793,478	0	0	0	13,919	XXX	XXX

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

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

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

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

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

NONE

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

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

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

# **SCHEDULE E - PART 1 - CASH**

Month End Depository Balances

1	2	3	4	5		lance at End of Eac 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	270 , 124	389,315	794,875	XXX
0199998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See								
instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	270, 124	389,315	794,875	XXX
0299998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See	<b>XXX</b>	VVV	0	0	0	0	0	VVV
instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories			0	0	270,124	389,315	794,875	_
0399999. Total Cash on Deposit	XXX	XXX		·	270, 124	369,313	794,875	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	U	U	U	XXX
	······							
	· · · · · · · · · · · · · · · · · · ·							
	· · · · · · · · · · · · · · · · · · ·							
	· · · · · · · · · · · · · · · · · · ·							
	· · · · · · · · · · · · · · · · · · ·							
	· · · · · · · · · · · · · · · · · · ·							
0599999. Total - Cash	XXX	XXX	0	0	270,124	389,315	794,875	XXX

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



# **DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT**

Year To Date For The Period Ended MARCH 31, 2022

NAIC Group Code	0088	_		NAIC Company Code	3606	34	
Company Name HAN	OVER AMERICAN INSU	RANCE COMPANY					
If the reporting entity write	es any director and officer (Da	&O) business, please provi	de the following:				
Monoline Policie	es						
	Direct Written Premium \$0	2 Direct Earned Premium \$0	3 Direct Losses Incurred \$0				
2. Commercial Mu	ıltiple Peril (CMP) Packaged l	Policies					
2.2 Can the direction 2.3 If the answer	ect premium earned for D&O	liability coverage provided	as part of a CMP packaged	policy be quantified or estimated?amount for D&O liability coverage			
•		2.31	Amount quantified:		\$	8,573	
		2.32 ide direct losses incurred (	Amount estimated using reas losses paid plus change in ca	sonable assumptions:ase reserves) for the D&O liability coverage	\$	0	