

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

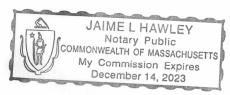
AS OF JUNE 30, 2022 OF THE CONDITION AND AFFAIRS OF THE

The Hanover American Insurance Company

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

Organized under the Laws of _		mpshire	, Sta	te of Domicile or Port of	Entry	NH
Country of Domicile		United	d States of An	nerica		-
Incorporated/Organized	06/08/1989			Commenced Business _		11/21/1989
Statutory Home Office	4 Bedford Farms Dr	ive Suite 107			Bedford, NH, US	2.03110.5005
	(Street and N					ountry and Zip Code)
Main Administrative Office			IO Linaala Ctro			,
Main Administrative Office			10 Lincoln Stre			
Worce	ester, MA, US 01653-0002	(00	,		508-853	-7200
(City or Tow	vn, State, Country and Zip	Code)		(A	rea Code) (Tele	phone Number)
Mail Address	440 Lincoln Stree	et .		V	Vorcester, MA, U	JS 01653-0002
	(Street and Number or P	.O. Box)				ountry and Zip Code)
Primary Location of Books and Re	cords	4	40 Lincoln Str	eet		
,			reet and Num			
	ester, MA, US 01653-0002				508-853-7200	
(City or Tow	vn, State, Country and Zip (Code)		(A	rea Code) (Tele	phone Number)
Internet Website Address		WW	W.HANOVER	.COM		
Statutory Statement Contact	Dennis	M. Hazelwood			E00 0E3	-7200-8557928
	Delillis	(Name)				(Telephone Number)
DHAZE	LWOOD@HANOVER.CO	M			508-853	,
	(E-mail Address)				(FAX Nu	mber)
			OFFICERS			
President	John Conne	er Roche		President & Treasurer	١	Nathaniel William Clarkin
Senior Vice President &	0			_		
Secretary	Charles Frede	rick Gronin		_		
Jeffrey Mark Farber, Executive Willard Ty-Lunn Lee, Execu Mark Joseph Welzenbach, Ex	utive Vice President		GC	utive Vice President & utive Vice President		lliam Lavey, Executive Vice President es Salvatore, Executive Vice President
		DIRECTO	ORS OR TR	HETEES		
Warren Ellison	Barnes		effrey Mark Fa		I	Lindsay France Greenfield
Dennis Francis Ke			hard William I			Willard Ty-Lunn Lee
Denise Maureen Mark Joseph We			hn Conner Ro	ocne		Bryan James Salvatore
State of M	lassachusetts					
County of	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 Annu- rules or regulations require differ respectively. Furthermore, the sor	were the absolute propert thibits, schedules and expla- porting entity as of the repc call Statement Instructions rences in reporting not re- tope of this attestation by the	y of the said reporting anations therein contain rting period stated ab and Accounting Pract lated to accounting the described officers a	g entity, free nined, annexed tove, and of its tices and Procure practices and also includes	and clear from any liens d or referred to, is a full a s income and deductions redures manual except to procedures, according the related correspondin	or claims there and true statemen therefrom for the to the extent that: to the best of g electronic filing	that on the reporting period stated above, on, except as herein stated, and that this int of all the assets and liabilities and of the eperiod ended, and have been completed (1) state law may differ; or, (2) that state their information, knowledge and belief, with the NAIC, when required, that is an avarious regulators in lieu of or in addition
John Conner Roch	e	Charle	es Frederick (Cronin		Nathaniel William Clarkin
President		Senior Vic	e President &	Secretary		Vice President & Treasurer
Subscribed and sworn to before model and day of		st, 2022		a. Is this an original filing b. If no, 1. State the amendme 2. Date filed 3. Number of pages a	ent number	





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	34.025.121	0		34,001,503	
		04,023,121			94,001,303	
2.	Stocks:				•	
	2.1 Preferred stocks			0	0	
	2.2 Common stocks	0	0	0	0	
3.	Mortgage loans on real estate:					
	3.1 First liens			0	0	
	3.2 Other than first liens.	0	0	0	0	
4.	Real estate:					
	4.1 Properties occupied by the company (less \$					
	encumbrances)	0	0	0	0	
	4.2 Properties held for the production of income (less					
	\$0 encumbrances)	0	0	0	0	
	4.3 Properties held for sale (less \$0	•			•••••••••••••••••••••••••••••••••••••••	
	, ,	0	0	0	0	
	encumbrances)	0	0	0	0	
5.	Cash (\$634,805), cash equivalents					
	(\$0) and short-term					
	investments (\$250,577)	885,382	0		131,991	
6.	Contract loans (including \$0 premium notes)	0	0	0	0	
7.	Derivatives			0	0	
8.	Other invested assets				0	
9.	Receivables for securities					
-	Securities lending reinvested collateral assets				0	
10.					_	
11.	Aggregate write-ins for invested assets				0	
12.	Subtotals, cash and invested assets (Lines 1 to 11)	34,992,281	0	34,992,281	34,433,494	
13.	Title plants less \$					
	only)				0	
14.	Investment income due and accrued	231,544	0	231,544	217,956	
15.	Premiums and considerations:					
	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0	0	
	15.2 Deferred premiums, agents' balances and installments booked but					
	deferred and not yet due (including \$0					
	earned but unbilled premiums)	0	0	0	0	
	15.3 Accrued retrospective premiums (\$0) and			-		
	contracts subject to redetermination (\$	0	0	0	0	
16		0	0		0	
16.	Reinsurance:	0		0	0	
	16.1 Amounts recoverable from reinsurers		0	0	0	
	16.2 Funds held by or deposited with reinsured companies		0	0	0	
	16.3 Other amounts receivable under reinsurance contracts			0	0	
17.	Amounts receivable relating to uninsured plans			0	0	
18.1	Current federal and foreign income tax recoverable and interest thereon	0	0	0	6,125	
18.2	Net deferred tax asset	0	0	0	0	
19.	Guaranty funds receivable or on deposit		0	0	0	
20.	Electronic data processing equipment and software		0	0	0	
21.	Furniture and equipment, including health care delivery assets					
	(\$	0	0	0	0	
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0	
23.	Receivables from parent, subsidiaries and affiliates			116,687	76,455	
24.	Health care (\$0) and other amounts receivable			0	0	
25.	Aggregate write-ins for other than invested assets	0	0	0	0	
26.	Total assets excluding Separate Accounts, Segregated Accounts and	0F 040 F10	0	0E 040 E40	24 724 020	
	Protected Cell Accounts (Lines 12 to 25)	35,340,512	0	35,340,512	34,734,030	
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0	
28.	Total (Lines 26 and 27)	35,340,512	0	35,340,512	34,734,030	
20.		03,040,312	0	33,040,312	34,734,000	
	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.	0				•	
2598.	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

		1 Current Statement Date	2 December 31, Prior Year
1.	Losses (current accident year \$0)	0	0
2.	Reinsurance payable on paid losses and loss adjustment expenses		0
3.	Loss adjustment expenses	0	0
4.	Commissions payable, contingent commissions and other similar charges	0	0
5.	Other expenses (excluding taxes, licenses and fees)	0	0
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	0	0
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		0
7.2	Net deferred tax liability	3,487	3,487
8.	Borrowed money \$0 and interest thereon \$	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		i
	including \$	0	0
10.	Advance premium	0	0
11.	Dividends declared and unpaid:		
	11.1 Stockholders	0	0
	11.2 Policyholders	0	0
12.	Ceded reinsurance premiums payable (net of ceding commissions)	0	0
13.	Funds held by company under reinsurance treaties	0	0
14.	Amounts withheld or retained by company for account of others	0	0
15.	Remittances and items not allocated	0	0
16.	Provision for reinsurance (including \$0 certified)	0	0
17.	Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18.	Drafts outstanding	0	0
19.	Payable to parent, subsidiaries and affiliates	0	0
20.	Derivatives	0	0
21.	Payable for securities		0
22.	Payable for securities lending	0	0
23.	Liability for amounts held under uninsured plans	0	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)	101,958	3,487
27.	Protected cell liabilities	0	0
28.	Total liabilities (Lines 26 and 27)	101,958	3,487
29.	Aggregate write-ins for special surplus funds	0	0
30.	Common capital stock	5,000,000	5,000,000
31.	Preferred capital stock	0	0
32.	Aggregate write-ins for other than special surplus funds	0	0
33.	Surplus notes	0	0
34.	Gross paid in and contributed surplus	16,600,000	16,600,000
35.	Unassigned funds (surplus)	13,638,554	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)	. 35,238,554	34,730,543
38.	Totals (Page 2, Line 28, Col. 3)	35,340,512	34,734,030
	DETAILS OF WRITE-INS		
2501.			
2502.			
2503.			
2598.	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
2901.			
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page		0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201.			
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		0
	- , 5	1	

STATEMENT OF INCOME

		<u> </u>	<u> </u>		
1. Premiums earmed		UNDERWRITING INCOME			
1.1 Direct (writers \$ 150 446,754 191 191 192 289,390,755 281 12 289,390,755 281 12 289,390,755 281 12 289,390,755 281 12 289,390,755 281 12 289,390,755 281 12 289,390,755 281 12 289,390,755 281 12 289,390,755 281 12 289,390,755 281	1				
1.2 Assumed (vertice) \$ 1.3 (44.66) 10.5 (45.66) 11.15 (57.67) 29.36,068 11.15 (57.67) 29.36,068 11.15 (57.67) 29.36,068 11.15 (57.67) 29.36,068 11.15 (57.67) 29.36,068 11.15 (57.67) 29.36,068	1.		150 616 490	141 161 719	289 390 397
1 150 Control partners \$150 CH6 (1997) \$150					
Leading Lead					
2 Linears incurred scarled years \$ 0 77, 747,756 77, 92, 265 196, 449, 459 22 Austración 11,5277 73, 525 555 196, 446, 440 22 24 24 24 24 24 24					
2. I brown in common co					
2 1 Direct	2				
2.2 Assumed		,	77 347 759	79 592 830	160 448 285
2.2 Sceled					
2. A Net					
3. Loss adjustment experimens incurred					_
4. Other underwriting operate in currend 5. Aggregate where her for underwriting deductions 0	3				_
5 Aggregate valve ins for non-envirting deductions (Line 2 through 5)					
6. Total underwriting death or (lose) (Line 3 through 6). 7. Net income or protected colle 8. Net underwriting gain or (lose) (Line 1 minut Line 6 + Line 7). 8. Net underwriting gain or (lose) (Line 1 minut Line 6 + Line 7). 9. Net investment income earned 9. Net investment income earned 1. Net revestment gain (lose) (Line 3 + 10) (THEN NCOME 1. Net revestment gain (lose) (Line 5 + 10) (THEN NCOME 1. Net gain or (lose) (Line 5 + 10) (THEN NCOME 1. Net gain or (lose) (Line 5 + 10) (THEN NCOME 1. Net gain or or (lose) (Line 5 + 10) (THEN NCOME 1. Net gain or or (lose) (Line 6 + 10) (Line 1 minut Line 6 + Line 7). 1. Finance and service charges or scindards in permitters 9. 0 monut charged off 8 9. 0 monut charged off 8 9. 0 monut charged off 8 10 0 0 0 1		Aggregate write-ins for underwriting deductions	0		
7. Nel honome of protected cells 0		Total underwriting deductions (Lines 2 through 5)	0		0
8. Not underworting gain or (loss) (Line 1 minus Line 6 + Line 7) WYSTEMEN MYSTEMEN NOOME 9. Not investment income samed 9. Not investment plans (loss) (Lines 9 + 10) Not reliable capital gains of loss) (Lines 9 + 10) 10. Not reliable capital gains of loss) (Lines 9 + 10) 11. Not gain or (Joss) (Lines 9 + 10) 12. Not gain or (Joss) (Lines 9 + 10) 13. Firance and service charges not included in permisms 10. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					0
Not investment income earmed		Not underwriting gain or (loss) (Line 1 minus Line 6 ± Line 7)			-
9. Net investment income samed 560 (078) 1 (41,072) 10. Net rotatized capital gains (loses) (inces 9 + 10) 639 (200 .460,461 883,246 To Het gain or (loss) from agents' or premium balances charged of (amount recovered \$ \$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.				
10. Net realized capital gains (osses) less capital gains tax of \$.589 .7860 .440, 461 .883, 346 .883,			640.076	460 400	024 272
11. Net Invostment gain (loss) (fines 9 + 10)					
The Land Control of					
12 Net gain or (loss) from agentar or premium balances charges off (amount recovered \$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	11.			460,481	883,245
S					
13. Finance and service charges not included in premiums	12.		_	_	
14. Aggregate will-birs for miscullamous mome 0		\$0 amount charged off \$	0		_
15. Total other income (Lines 12 through 14)					
Net Income before dividends to policyholders, after capital gains tax and before all other federal and foreign income bases (Line 8 + 11 + 15).	14.				-
and foreign income taxes (Lines 8 * 11 * 15).	15.	, ,	0	0	0
17. Dividends to policyholders 0 0 0 0 0	16.	Net income before dividends to policyholders, after capital gains tax and before all other federal	200 200	100 101	202 245
Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income bases, linch of mirrus Line 17, 19, 19, 20, 48, 88, 20, 48, 88, 190, 450, 451, 19, Federal and foreign income bases incurred 131, 278 94, 886 190, 450, 450, 20, 20, 20, 20, 20, 20, 20, 20, 20, 2					
Foreign Income taxes (Line 16 minus Line 17)			0	0	0
19. Federal and foreign income taxes incurred 131,278 94,866 190,459 508,012 365,615 6982,735 628,735 628,735 628,735 638,012 638,	18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and	620, 200	460 401	002 245
Net income (Line 18 minus Line 19)(to Line 22) 508,012 365,615 692,785	40				
CAPITAL AND SUPPLUS ACCOUNT 34,730,543 34,032,381 34,032,380 22. Net income (from Line 20)			·	· ·	
21. Surplus as regards policyholders, December 31 prior year. 34,730,543 34,023,81 34,023,93 34,023,93 34,023,93 34,023,93 34,023,93 34,023,93 34,023,93 34,023,93	20.	, , , , , , , , , , , , , , , , , , , ,	508,012	365,615	692,795
Net Income (from Line 20) S68,012 S65,615 G692,785			24		
23			, ,	, ,	
24. Change in net unrealized capital gains (losses) loss capital gains tax of \$ 0					
25. Change in net unrealized foreign exchange capital gain (loss)	23.	Net transfers (to) from Protected Cell accounts	0		
25	24.	Change in net unrealized capital gains (losses) less capital gains tax of \$0	0		
27. Change in nonadmitted assets 0 0 0 0 0 0 0 0 0	25.	Change in net unrealized foreign exchange capital gain (loss)	0		
28. Change in provision for reinsurance	26.	Change in net deferred income tax	0	0	5,368
Change in surplus notes	27.				0
Surplus (contributed to) withdrawn from protected cells	28.			0	0
31	29.	Change in surplus notes	0	0	0
32. Capital changes:	30.				0
32.1 Paid in	31.	Cumulative effect of changes in accounting principles	0	0	0
32.2 Transferred from surplus (Stock Dividend)	32.	Capital changes:			
32.3 Transferred to surplus 0		32.1 Paid in	0	0	0
32.3 Transferred to surplus 0		32.2 Transferred from surplus (Stock Dividend)			0
33.1 Paid in 0		32.3 Transferred to surplus			0
33.2 Transferred to capital (Stock Dividend)	33.	Surplus adjustments:			
33.3 Transferred from capital		33.1 Paid in	0	0	0
33.3 Transferred from capital		33.2 Transferred to capital (Stock Dividend)			0
35. Dividends to stockholders			0	0	0
35. Dividends to stockholders	34.	Net remittances from or (to) Home Office	0	0	0
36. Change in treasury stock 0					0
37. Aggregate write-ins for gains and losses in surplus (1) 0 0 38. Change in surplus as regards policyholders (Lines 22 through 37). 508,011 365,615 698,163 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 35,238,554 34,397,996 34,730,543 DETAILS OF WRITE-INS 0501 0 0502 0 0 0 0503 0 0 0 0 0504 0 0 0 0 0509. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0 0 0 0 1401. 1402 0 0 0 0 0 1402. 1403 0 0 0 0 0 1409. 1404 0 0 0 0 0 0 1409. 1403 0	36.		0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37) 508,011 365,615 698,163 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 35,238,554 34,397,996 34,730,543 DETAILS OF WRITE-INS 0501. 0 0 0 0 0502. 0 0 0 0 0503. 0 0 0 0 0599. 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 0 1401. 0 0 0 0 0 0 1402. 0 0 0 0 0 1403. 0 0 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 0 3701. Rounding (1) 0 0 0 3702. 3703. Summary of remaining write-ins for	37.	•	(1)	0	0
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS 0501. 0502. 0503. 0598. Summary of remaining write-ins for Line 5 from overflow page. 0509. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 1401. 1402. 1403. 1409. Summary of remaining write-ins for Line 14 from overflow page. 0 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			508.011	365.615	698.163
DETAILS OF WRITE-INS				· · ·	· · · · · · · · · · · · · · · · · · ·
0501. 0502. 0503. 0503. 0503. 0503. 0503. 0503. 0503. 0503. 0503. 0509. <td< td=""><td>- 55.</td><td><u> </u></td><td>,-30,00.</td><td>2 . , 22. , 000</td><td>2.,.00,0.0</td></td<>	- 55.	<u> </u>	,-30,00.	2 . , 22. , 000	2.,.00,0.0
0502. 0503. 0503. 0503. 0503. 0503. 0503. 0503. 0503. 0509. <td< td=""><td>0501</td><td></td><td></td><td></td><td></td></td<>	0501				
0503. 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. 0 0 0 1402. 0 0 0 1403. 0 0 0 1498. Summary of remaining write-ins for Line 14 from overflow page 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 3701. Rounding (1) 0 0 3702. 3703. 0 0 0 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0 0					
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. 0 0 0 1402. 0 0 0 1403. 0 0 0 1498. Summary of remaining write-ins for Line 14 from overflow page 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 3701. Rounding (1) 0 0 3702. 0 0 0 3703. 0 0 0 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0 0					
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0 0 0 1401.		Summary of remaining write-ins for Line 5 from overflow page	n	n	n
1401. 0 0 0 1402. 0 0 0 1403. 0 0 0 1498. Summary of remaining write-ins for Line 14 from overflow page 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 3701. Rounding (1) 0 0 3702. 0 0 0 3703. 0 0 0 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0 0					ი l
1402. 1403. 1403. 1403. 1403. 1403. 1403. 1403. 1403. 1403. 1403. 1404. <td< td=""><td></td><td>Totalo (Ellies 000 Filliough 0000 plus 0000)(Ellie o above)</td><td></td><td></td><td></td></td<>		Totalo (Ellies 000 Filliough 0000 plus 0000)(Ellie o above)			
1403.			السنانية المستقدمة ا	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 3701. Rounding (1) 0 0 3702. 3703. 3703. 0 0 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0 0					
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 3701. Rounding (1) 0 0 3702. (1) 0 0 3703. (1) 0 0 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0 0					
3701. Rounding		, ,			0
3702. 3703. 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0		· · · · · · · · · · · · · · · · · · ·			0
3703. 3703. Summary of remaining write-ins for Line 37 from overflow page 0 0 0 0		·	(1)	0	0
3798. Summary of remaining write-ins for Line 37 from overflow page00					
, g					
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above) (1) 0					
	3799.	Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	(1)	0	0

CASH FLOW

	CASH FLOW	4	2	3
		Current Year To Date	2 Prior Year To Date	Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	0	0	0
2.	Net investment income	674,323	521,788	1,051,712
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	674,323	521,788	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	0
9.	Federal and foreign income taxes paid (recovered) net of \$539 tax on capital gains (losses)	108,999	89,001	184,001
10	, ,	108,999	89,001	184,001
10.	Total (Lines 5 through 9)		·	·
11.	Net cash from operations (Line 4 minus Line 10)	565,324	432,787	867,711
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	1,704,035	2, 179, 846	7,085,377
	12.2 Stocks			0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate			0
	12.5 Other invested assets			0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	300,000	251,588	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,004,035	2,431,434	7,085,377
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	1,775,735	2,828,867	8,289,294
	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	48,412
	13.7 Total investments acquired (Lines 13.1 to 13.6)	1,775,735	2,828,867	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)	228,300	(397,433)	(1,252,329)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0	0
	16.3 Borrowed funds		0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
	16.5 Dividends to stockholders		0	0
	16.6 Other cash provided (applied)	(40,233)	(102,818)	(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)	(40,233)	(102,818)	(41,473)
	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)	753,391	(67,463)	(426,091)
		100,001	(07,403)	(420,091)
10	Cash, cash equivalents and short-term investments:			
19.	19.1 Beginning of year	131,991	558,082	558,082

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	<u> </u>	1 age	LITIC #	2022	2021
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 508,012	\$ 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	\$ 508.012	\$ 692.795
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	xxx	XXX	XXX	\$ 35,238,554	\$ 34,730,543
(6) State Prescribed Practices that are an increase/(decrease)	from NAIC SA	λP:		\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) f	rom NAIC SAI	P:		\$ -	\$ -
(8) NAIC SAP (5-6-7=8)	xxx	XXX	XXX	\$ 35,238,554	\$ 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
- (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

b) The

- (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:

2. 12 Months or Longer

1. Less than 12 Months	\$ 72,866
2. 12 Months or Longer	\$ 24,061
e aggregate related fair value of securities with unrealized losses:	
1. Less than 12 Months	\$ 1,134,370

(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.

142,595

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

Not applicable

L. Restricted Assets

No change

M., N., O., P.

Not applicable

Q. Prepayment Penalty and Acceleration Fees

	Gene	eral Account	Prote	ected Cell
1. Number of CUSIPs		2		-
2. Aggregate Amount of Investment Income	\$	2,815	\$	-

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 Greather 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 \$116,687 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

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	Ad	Imitted Assets	(Level 1)	(Level 2)	(Level 3)	Net	Asset Value (NAV)	Not Practic (Carrying V	
Bonds	\$ 31,853,961	\$	34,025,121	\$ 5,319,565	\$ 22,181,670	\$ 4,352,726	\$	-	\$	-
Cash and Short Term										
Investments	\$ 885,315	\$	885,382	\$ 634,805	\$ 250,510	\$ -	\$	-	\$	-

D., E.

Not applicable

NOTE 21 Other Items

A. Unusual or Infrequent Items

Not Applicable

B. Troubled Debt Restructuring: Debtors

Not applicable

C. Other Disclosures

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

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

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

Not applicable

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves

-

2. Date of the most recent evaluation of this liability

06/30/2022

3. Was anticipated investment income utilized in the calculation?

Yes [X] No []

NOTE 31 High Deductibles

Not applicable

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

Not applicable

NOTE 33 Asbestos/Environmental Reserves

Not applicable

NOTE 34 Subscriber Savings Accounts

Not applicable

NOTE 35 Multiple Peril Crop Insurance

Not applicable

NOTE 36 Financial Guaranty Insurance

Not applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring Domicile, as required by the Model Act?	the filing of Disclosure of Material Transactions with the State of	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 clareporting entity?	harter, by-laws, articles of incorporation, or deed of settlement of the	Yes [] No [X]
2.2	If yes, date of change:		
3.1		ystem consisting of two or more affiliated persons, one or more of which	Yes [X] No []
3.2	Have there been any substantial changes in the organizational chart s	since the prior quarter end?	Yes [] No [X]
3.3	If the response to 3.2 is yes, provide a brief description of those change	ges.	
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	e issued by the SEC for the entity/group.	0000944695
4.1	Has the reporting entity been a party to a merger or consolidation duri	ing the period covered by this statement?	Yes [] No [X]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state ceased to exist as a result of the merger or consolidation.	e of domicile (use two letter state abbreviation) for any entity that has	
	1 Name of Entity	2 3 NAIC Company Code State of Domicile	
5.	If the reporting entity is subject to a management agreement, includin in-fact, or similar agreement, have there been any significant changes If yes, attach an explanation.	g third-party administrator(s), managing general agent(s), attorneys regarding the terms of the agreement or principals involved?] No [] N/A [X
6.1	State as of what date the latest financial examination of the reporting	entity was made or is being made.	12/31/2019
6.2		ne available from either the state of domicile or the reporting entity. This ate the report was completed or released.	12/31/2019
6.3	the reporting entity. This is the release date or completion date of the	available to other states or the public from either the state of domicile or examination report and not the date of the examination (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 exastatement filed with Departments?	amination report been accounted for in a subsequent financial Yes [] No [] N/A [X
6.6	Have all of the recommendations within the latest financial examination	on report been complied with?] No [] N/A [X
7.1		registrations (including corporate registration, if applicable) suspended or	Yes [] No [X]
7.2	If yes, give full information:		
8.1	Is the company a subsidiary of a bank holding company regulated by	the Federal Reserve Board?	Yes [] No [X]
8.2	If response to 8.1 is yes, please identify the name of the bank holding	company.	
8.3	Is the company affiliated with one or more banks, thrifts or securities f	firms?	Yes [X] No []
8.4	regulatory services agency [i.e. the Federal Reserve Board (FRB), the	n (city and state of the main office) of any affiliates regulated by a federal e Office of the Comptroller of the Currency (OCC), the Federal Deposit	
	Insurance Corporation (FDIC) and the Securities Exchange Commiss	ion (SEC)] and identity the affiliate's primary federal regulator.	
	Insurance Corporation (FDIC) and the Securities Exchange Commiss 1 Affiliate Name	2 3 4 5 Location (City, State) FRB OCC FDIC	6 S SEC

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 pe 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 profe relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity; (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and		Yes [X]	No []	
	(e) Accountability for adherence to the code.				
9.11	If the response to 9.1 is No, please explain:				
9.2 9.21	Has the code of ethics for senior managers been amended?		Yes []	No [X]	
3.21	il the response to 3.2 is 165, 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 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?				,
	INVESTMENT				
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made a 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:	\$		0)
13.	Amount of real estate and mortgages held in short-term investments:				
14.1 14.2	Does the reporting entity have any investments in parent, subsidiaries and affiliates?		Yes []		
	1 Prior Yea Book/Ad Carring	ar-End justed	Bool	2 ent Quarter k/Adjusted ying Value	
4.21	Bonds	0	\$	ying value	0
4.22	Preferred Stock \$	0			
	Common Stock \$		\$		0
	Short-Term Investments \$		\$		0
	Mortgage Loans on Real Estate\$		\$		0
	All Other\$		۵		0
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)				
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.				
	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.	\$;		J

GENERAL INTERROGATORIES

No	1		nancial Condition Examiners Handbook, complete the following: 2 Custodian Address							
Bank of New York Mellon	me of Custodian(s)	225 Libert	y Street, New Yor	k, NY 10286	ess					
For all agreements that do no ocation and a complete expl	ot comply with the requirements of the	l he NAIC Financial Cc	ondition Examiners	s Handbook, pr	rovide the name,					
1 Name(s))	3 Complete Explanation(s)								
lave there been any change yes, give full information re	s, including name changes, in the crating thereto:	ustodian(s) identified	in 17.1 during the	current quarte	r?	Yes]	No [
1 Old Custodian	2 New Custodia	an Da	3 te of Change		4 Reason					
nake investment decisions of	lentify all investment advisors, investor behalf of the reporting entity. For a the investment accounts"; "hand	assets that are manadle securities"]	ged internally by e							
		Affi	2 liation							
•	, Inc									
7.5097 For those firms/individesignated with a "L	riduals listed in the table for Questio ") manage more than 10% of the re	n 17.5, do any firms/i	ndividuals unaffiliated assets?	ated with the re	eporting entity (i.e.	Yes	[]	No		
7.5098 For firms/individuals	unaffiliated with the reporting entity	/ (i.e. designated with	a "U") listed in the	e table for Que	stion 17.5, does the					
total assets under m	anagement aggregate to more than	1 50% of the reporting	entity's invested	assets?		Yes	[]	No		
able below.	listed in the table for 17.5 with an a	iffiliation code of "A" (, ,			he				
1 Central Registration	2		3		4		lnves Manag Agree	geme		
Depository Number 107569 Opus	Name of Firm or Individual nvestment Management, Inc	laut	Legal Entity Id	dentifier (LEI)	Registered With		(IMA) DS			
lave all the filing requiremer no, list exceptions:	its of the Purposes and Procedures	Manual of the NAIC I	Investment Analys	sis Office been	followed?	Yes	[X]	No		
a. Documentation neces security is not availab		of the security does no								
c. The insurer has an ac	rent on all contracted interest and p tual expectation of ultimate payment lesignated 5GI securities?	t of all contracted inte				Yes	[]	No		
a. The security was purchb. The reporting entity is lc. The NAIC Designation	urities, the reporting entity is certifying assed prior to January 1, 2018. Including capital commensurate with the was derived from the credit rating a ter rating held by the insurer and available.	the NAIC Designation	reported for the s CRP in its legal ca	ecurity. apacity as a NF						
d. The reporting entity is	not permitted to share this credit ratidesignated PLGI securities?	ing of the PL security	with the SVO.	Ü		Yes	[]	No		
E fund: a. The shares were purch	le BA non-registered private fund, the ased prior to January 1, 2019.			_	of each self-designated					
	nolding capital commensurate with t lic credit rating(s) with annual surve	_	•	-	NDODO : :					

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?													
2.		loss that may oc	red any risk with ocur on the risk,							Yes [] N	lo [X]			
3.1	Have any of the	e reporting entity	y's primary reins	urance contract	s been cancele	d?				Yes [] N	lo [X]			
3.2	If yes, give full and complete information thereto.													
4.1	(see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero?													
					TOTAL DI	SCOUNT		DIS	COUNT TAKEN	I DURING PER	IOD			
	1	2	3	4	5	6	7	8	9	10	11			
Line	of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL			
		0.0	0.000	0	0	0	0	0	0	0	(
			TOTAL	0	0	0	0	0	0	0	(
5.	Operating Perc	-									0.000			
			cent											
	5.3 A&H exper	nse percent excl	uding cost conta	ainment expense	es						0.000			
6.1	Do you act as a	a custodian for h	nealth savings a	ccounts?						Yes [] N	lo [X]			
6.2	If yes, please p	provide the amou	unt of custodial t	funds held as of	the reporting da	ate			\$					
6.3	Do you act as a	an administrator	r for health savin	igs accounts?						Yes [] N	lo [X]			
6.4	If yes, please p	provide the balar	nce of the funds	administered as	of the reporting	g date			\$		0			
7.	Is the reporting	entity licensed	or chartered, re	gistered, qualifie	ed, eligible or wr	riting business i	n at least two st	ates?		Yes [X] N	lo []			
7.1			assume reinsura?							Yes [] N	lo []			

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date	9
---	---

Showing All New Reinsurers - Current Year to Date											
1	2	3	4	5	6 7 Effective Certified Reinsurer Date of						
NAIC Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Rating Certified Reinsurer (1 through 6) Rating						
				7,7	, , , , , , , , , , , , , , , , , , ,						
·····											
				<u></u>							
·····											
<u> </u>			····								
 											
·			·								
	1	1		1							

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

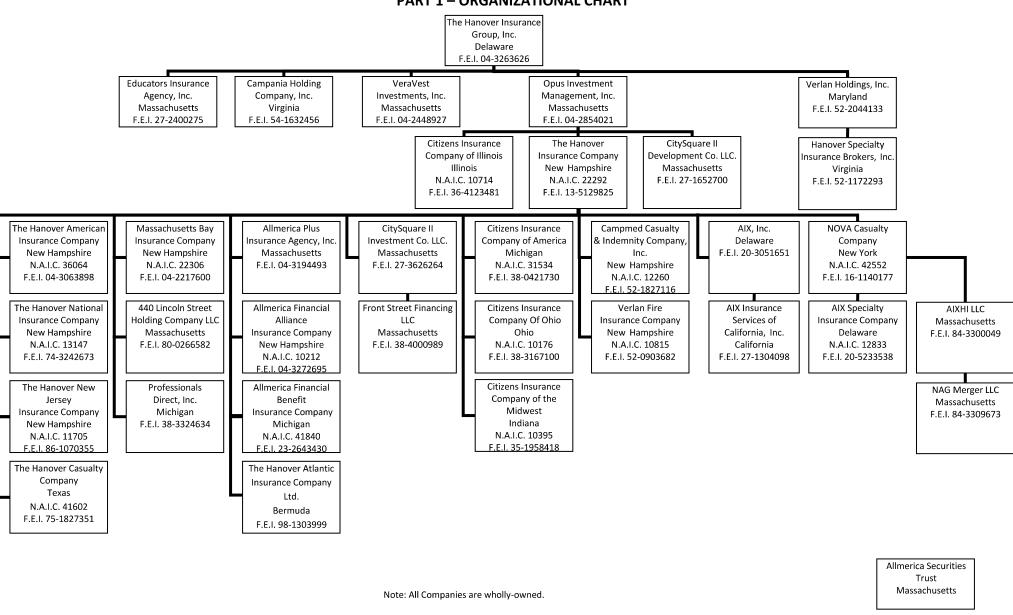
2. 3. 4. 5.	States, etc. Alabama		1 Active Status (a)	Direct Premiur 2 Current Year	3 Prior Year	Direct Losses Paid (4 Current Year	5 Prior Year	Direct Loss 6 Current Year	7
2. 3. 4. 5.	Alabama				Prior Year	Current Vear	Prior Vear	Current Voor	
2. 3. 4. 5.	Alabama		(a)	To Doto					Prior Year
2. 3. 4. 5.			L.	To Date 404,540	To Date 389,360	To Date 8,100	To Date207,063	To Date 472,062	To Date 473,648
3. 4. 5.	/ llusiku		L		4,298		0	7.615	7,113
4. 5.	Arizona		L		2,123,587	1,097,046	1,127,392	4,810,945	6,692,365
	Arkansas				941,554	163,983	240,535	1,019,397	2,516,597
_	California		L		14,967,322	5,816,699	8,728,509	39, 162, 150	46,615,031
6.	Colorado	CO	L	2,523,682	2,559,463	1,964,396	5,703,391	4,601,046	6,207,309
7.	Connecticut	CT	L	37,046,036	34,195,880	24 , 142 , 291	13,945,020	52,988,659	46,965,471
	Delaware		L		232,320	128,283	5,933	652,497	1,324,310
9.	District of Columbia	DC	L		1,970,930	708,433	518,271	2,684,095	2,672,881
10.	Florida	FL	L		4,481,829	2,179,526	2,695,705	17,242,450	19,736,271
	Georgia				3,374,533	310,975	488,843	4,908,149	3,215,859
	Hawaii		L	,	28 , 107	10,443	0	24,218	13,756
	Idaho		L		224,315	25,516	96,606	361,471	195,637
	Illinois		L		3,529,283		719,570	6,505,783	6,588,714
	Indiana				1,074,162	356,809	273,511	2,026,751	2,005,957
	lowa		<u>-</u>		159,423	50,376	130,204	452,248	547,756
	Kansas		L			171,899	64,473	685,379	393,671
	Kentucky			, ,	1,469,047	829,454	2,522,638	3,899,059	4,351,669
	Louisiana		L		9,419,614	8,579,658	7,470,721	19,905,029	24,479,575
	Maine		L		319,590	41,712	6,580	559,185	418,296
	Maryland		L		5,317,198 2,091,675	3,354,097	1,393,746356,681		9,211,550 3,703,501
	Massachusetts Michigan		L		2,474,577		1,115,704	11,958,664	3,703,501 3,405,922
	Minnesota			3,791,039	3,727,558	2,184,717	964,941	6.237.504	4,515,002
	Mississippi		L			213,697	114,372	806,459	000 477
	Missouri		L			444 , 176	691,948	2,943,016	
	Montana			,	39,243	0	091,948	140,199	31,473
	Nebraska		L		38,428	34,638	4,307	265,085	300,652
	Nevada		L	788,159	936,086	130,907	1,002,231	911,809	876 , 188
	New Hampshire			· ·	537,601	93,332	29,535	1,779,025	1,501,706
	New Jersey		L	1,302,743	831,345	316,928	36,249	859,023	779,483
	New Mexico		Ĺ	180,652	167,302	8,595		321,026	48,657
	New York			· ·	1,938,845		913,012	2,672,277	2,332,333
	North Carolina		L		8,861,927	4,567,048	2,152,835	15,665,978	14,480,154
	North Dakota		N		0	0	0	0	0
	Ohio		L	.263,917	451,400	292,893	1,246,479	660,006	
	Oklahoma		L	· ·	853,202	252,967	169,936	1,811,346	1,915,761
	Oregon		L	3,494,739	3,543,914	2,027,062	3,529,449	7,086,178	11, 119,524
	Pennsylvania		L	1,129,470	839,644	135,312	177,019	2, 173, 937	1,698,339
	Rhode Island				408,225	30,360	98,652	1,269,573	615,542
41.	South Carolina	SC	L	3,755,043	3,294,831	596,640	283,467	4,252,113	4,545,006
	South Dakota		L	99,329	43,108	7,462	18,014	159,083	72,177
43.	Tennessee	TN		5,777,355	5,982,362	3,663,234	3,788,664	18,091,941	20,011,606
	Texas		L	7,818,231	7,009,722	1,530,760	3,833,686	16,635,839	15,305,200
	Utah		L	1,656,651	1,360,631	1,027,056	343,737	2,506,340	2,807,413
46.	Vermont	VT	L		106,699	11,630	7,918	130,862	121,421
	Virginia		L	, , .	6, 166, 417	1,235,409	1,622,904	11,732,963	8,928,681
	Washington		L		4,076,614	1,936,756	1,073,236	7,386,873	6,013,774
	West Virginia				226,354	55,023	6,214	484,686	548,298
	Wisconsin		L		1,095,033	332,593	199 , 193	1,229,105	1,083,699
	Wyoming			0	0	0	0	0	0
	American Samoa				0	0	0	0	0
	Guam				0	0	0	0	0
	Puerto Rico		N	0	0	0	0	0	0
	U.S. Virgin Islands	VI	N	0	0	0	0	0	0
56.	Northern Mariana Islands	MD	N	0	۸	0	0	۸	0
E7	Canada		NN	467	0 506		0	0	
	Aggregate Other Alie		XXX	407	000	0 n	0	0	۱۷
	00 0	1101	XXX	153,446,573	145,346,852	74,343,941	70,174,937	305,322,982	295,301,775
	Totals	INIC	^^^	100,770,070	170,070,002	14,040,341	10, 114,501	000,022,302	233,301,773
	DETAILS OF WRITE		\	0	0	0	0	_	^
58001.			XXX	U	0	0	U	0	0
58002.			XXXXX						
	Summany of romainin		XXX						
ეგყყგ.	Summary of remainin write-ins for Line 58								
	overflow page		XXX	0	0	0	0	0	0
58999.	Totals (Lines 58001 tl								
	58003 plus 58998)(L				_	_	_	_	_
	above) e Status Counts:		XXX	0	0	0	0	0	0

^{......49} 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

oup Name surance Group	12833	ID Number 80-0266582 84-3300049 27-1304098	Federal RSSD	0114	Name of Securities Exchange if Publicity Traded	Names of	Domi-	Relation-		Type of Control (Ownership, Board,	Control is Owner-		Is an SCA	
surance Group	Company Code	Number 80-0266582 84-3300049 27-1304098		0114	Exchange if Publicly Traded	Names of	Domi-			(Ownership,	is			ļ
surance Group	Company Code	Number 80-0266582 84-3300049 27-1304098		0114	Exchange if Publicly Traded	Names of	Domi-				_			
surance Group	Company Code	Number 80-0266582 84-3300049 27-1304098		0114	Exchange if Publicly Traded	Names of	Domi-			Board,	Owner-		SCA	1
surance Group	Company Code	Number 80-0266582 84-3300049 27-1304098		0114	if Publicly Traded	Names of	Domi-	chin						
surance Group	Company Code	Number 80-0266582 84-3300049 27-1304098		0114		Names of		SHIP		Management,	ship		Filing	
surance Group	Code12833	Number 80-0266582 84-3300049 27-1304098		Olle		I INALLIES OF	ciliary	to		Attorney-in-Fact,	Provide		Re-	
surance Group	Code12833	Number 80-0266582 84-3300049 27-1304098		OUZ	(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	auired?	
surance Group	12833	80-0266582 84-3300049 27-1304098	ROOD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
surance Group surance Group surance Group surance Group surance Group surance Group	12833	84-3300049 27-1304098		Ont	internationary	440 Lincoln Street Holding Company LLC	MA	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO NO	
surance Groupsurance Group .	12833	27-1304098				AIXHI LLC	MA	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Groupsurance Group						AIX Insurance Services of California, Inc.	CA	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Groupsurance Group		20-5233538				AIX Specialty Insurance Company	DE		,	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		20-3051651				AIX. Inc.	DE	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
		04-3272695				Allmerica Financial Alliance Insurance Co	NH	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
ou. u ui oup		23-2643430				Allmerica Financial Benefit Insurance Co.	MI	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	. NO	
surance Group		04-3194493				Allmerica Plus Insurance Agency, Inc.	MA	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		J. 0101100				Allmerica Securities Trust	MA	NIA		Management	100.000	The Hanover Insurance Group, Inc.	. NO	
surance Group		54-1632456				Campania Holding Company, Inc.	VA	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		52-1827116				Campmed Casualty & Indemnity Co. Inc.	NH	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		38-0421730				Citizens Insurance Company of America	MI	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		36-4123481				Citizens Insurance Company of Illinois	IL			Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
surance Group		38-3167100				Citizens Insurance Company of Ohio	0H	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		35-1958418				Citizens Insurance Company of the Midwest	IN	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
surance Group		27-1652700				CitySquare II Development Co., L.L.C	MA			Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		27-3626264				CitySquare II Investment Co., L.L.C	MA			Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		27-2400275				Educators Insurance Agency, Inc.	MA	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		38-4000989				Front Street Financing LLC	MA	NIA		Ownership, Board, Management		The Hanover Insurance Group, Inc	NO	
surance Group		52-1172293				Hanover Specialty Insurance Brokers, Inc.	VA	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		04-2217600				Massachusetts Bay Insurance Company	NH	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
surance Group		84-3309673				NAG Merger LLC	MA	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		16-1140177				NOVA Casualty Company	NY	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
surance Group		04-2854021				Opus Investment Management, Inc.	MA	UIP		Ownership, Board, Management		The Hanover Insurance Group, Inc.	NO	1
surance Group		38-3324634				Professionals Direct. Inc.	MI	NIA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	
surance Group		04-3063898				The Hanover American Insurance Company	NH	RE		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	1
surance Group		98-1303999				The Hanover Atlantic Insurance Company Ltd.	BMU	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	YES	
		75–1827351				The Hanover Casualty Company	TX			Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	NO	(
surance Group					New York Stock Exchange			UIP	-p timorit mariagonorit; irio				NO.	1
								IA	The Hanover Insurance Company	Ownership Board Management		The Hanover Insurance Group. Inc.		1
surance Groupsurance Groupsurance Groupsurance Groupsurance Groupsurance Groupsurance								IA.			100.000	The Hanover Insurance Group, Inc.		
surance Groupsurance Group .	11705							NIA						
surance Group surance Group surance Group surance Group surance Group surance Group	11705							IA						
surance Group surance Group surance Group surance Group surance Group surance Group								NIA						
surance Group surance Group surance Group surance Group surance Group surance Group	10815	52-2044133										1		
	rance Group rance Group rance Group	rance Group	rance Group	rance Group	rance Group	rance Group	The Hanover Insurance Company 13147 74-3242673 The Hanover Insurance Group, Inc. The Hanover Insurance Group, Inc. The Hanover Insurance Group, Inc. The Hanover National Insurance Company 11705 86-1070355 The Hanover New Jersey Insurance Company The Hanover New Jersey Insurance Company 11705 The Hanover Insurance Company 11705 The Hanover New Jersey Insurance Company 11705 Th	Tance Group 22292 13-5129825 The Hanover Insurance Company NH	The Hanover Insurance Company	The Hanover Insurance Company	rance Group	rance Group	rance Group	rance Group

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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			20.3	
2.1	Allied Lines		969,314	56.7	16.
2.1	Multiple peril crop		,	0.0	0.
2.2	Federal flood			0.0	0.
2.3	Private crop			0.0	0.
2.4	Private Gop		(9,463)		(27.
2.5 3.	Farmowners multiple peril		(9,403)	, ,	0.
	Homeowners multiple peril		2,415,140		
4. -	Commercial multiple peril		29,480,518		71.
5. 6.	Mortgage guaranty		0		
8.	Ocean marine		0		0.
o. 9.	Inland marine		15,913		
10.	Financial guaranty		0		0.
11.1	Medical professional liability - occurrence		0		0.
11.2	Medical professional liability - decimende		0		0.
12.	Earthquake		(10.564)		
	Comprehensive (hospital and medical) individual		0	,	0.
13.1 13.2	Comprehensive (nospital and medical) individual Comprehensive (hospital and medical) group			0.0	0.
13.2 14.	Comprenensive (nospital and medical) group Credit accident and health			0.0	0.
	Vision only			0.0	0.
15.1	Dental only			0.0	0.
15.2	Disablity income			0.0	ا. 0
15.3					0.
15.4	Medicare supplement			0.0	
15.5	Medicaid Title XIX			0.0	0.
15.6	Medicare Title XVIII			0.0	0.
15.7	Long-term care			0.0	0.
15.8	Federal employees health benefits plan			0.0	0.
15.9	Other health			0.0	0.
16.	Workers' compensation		17,321,714		31.
17.1	Other liability - occurrence			17.0	26.
17.2	Other liability - claims-made			(39.8)	32
17.3	Excess workers' compensation			0.0	0.
18.1	Products liability - occurrence		(239, 168)		
18.2	Products liability - claims-made			0.0	0.
19.1	Private passenger auto no-fault (personal injury protection)				0.
19.2	Other private passenger auto liability		14,812,383		57
19.3	Commercial auto no-fault (personal injury protection)		(448)		59.
19.4	Other commercial auto liability		, ,	44.7	107.
21.1	Private passenger auto physical damage			72.8	42.
21.2	Commercial auto physical damage		<i>'</i>	61.1	56.
22.	Aircraft (all perils)			0.0	0.
23.	Fidelity			122.6	29.
24.	Surety			0.0	0.
26.	Burglary and theft		(2,697)	,	
27.	Boiler and machinery		,	217.0	0.
28.	Credit			0.0	0.
29.	International			0.0	0.
30.	Warranty		0		0.
31.	Reinsurance - Nonproportional Assumed Property				XXX
32.	Reinsurance - Nonproportional Assumed Liability				
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0.0	0.
35.	Totals	150,616,490	77,347,759	51.4	56.
3401.	DETAILS OF WRITE-INS				
3402.					
3403.					
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0 [0.0	0.

PART 2 - DIRECT PREMIUMS WRITTEN

	Line of Business	Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire	554,747	1,000,172	1, 120, 110
2.1	Allied Lines	991,694	1,957,581	1,937,63
2.2	Multiple peril crop	0	0	
2.3	Federal flood	0	0	
2.4	Private crop	0	0	
2.5	Private flood		53,219	47,09
3.	Farmowners multiple peril	0	0	
4.	Homeowners multiple peril		4,278,961	5,019,88
5.	Commercial multiple peril	28,853,434	64,278,316	61,913,58
6.	Mortgage guaranty	0	0	
8.	Ocean marine	0	0	
9.	Inland marine		137 , 130	170,60
10.	Financial guaranty		0	
11.1	Medical professional liability - occurrence			
11.2	Medical professional liability - claims-made			
12.	Earthquake			738,98
	Comprehensive (hospital and medical) individual	,		700,90
13.1	Comprehensive (nospital and medical) individual			
13.2				
14.	Credit accident and health			
15.1	Vision only		0	
15.2	Dental only		0	
15.3	Disablity income		0	
15.4	Medicare supplement		0	
15.5	Medicaid Title XIX		0	
15.6	Medicare Title XVIII		0	
15.7	Long-term care		0	
15.8	Federal employees health benefits plan	0	0	
15.9	Other health	0	0	
16.	Workers' compensation		37,783,412	33,414,50
17.1	Other liability - occurrence	1,096,741	2,811,948	2,773,19
17.2	Other liability - claims-made	126,103	179,208	98,46
17.3	Excess workers' compensation		0	
18.1	Products liability - occurrence		442,529	632,63
18.2	Products liability - claims-made			
19.1	Private passenger auto no-fault (personal injury protection)			
19.2	Other private passenger auto liability			21,053,87
19.3	Commercial auto no-fault (personal injury protection)			
19.4	Other commercial auto liability			2,753,26
	Private passenger auto physical damage			12,896,78
21.1				
21.2	Commercial auto physical damage	, , , , , , , , , , , , , , , , , , ,	·	477,55
22.	Aircraft (all perils)			
23.	Fidelity			1, 10
24.	Surety			
26.	Burglary and theft		·	6,92
27.	Boiler and machinery		254,819	272,66
28.	Credit			
29.	International			
30.	Warranty	0	0	
31.	Reinsurance - Nonproportional Assumed Property	xxx	xxx	XXX
32.	Reinsurance - Nonproportional Assumed Liability	xxx	xxx	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	xxx	xxx	XXX
34.	Aggregate write-ins for other lines of business	0	0	
35.	Totals	74,716,830	153,446,573	145,346,85
	DETAILS OF WRITE-INS		. ,	, , , ,
3401.	52174120 O. WALLE 1140			
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page		U	

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

	1	2	3	4	5	6	7	8	9	10	11	12	13
											Prior Year-End	Prior Year-End	
								Q.S. Date Known			Known Case Loss	IBNR Loss and	Prior Year-End
			T		2022 Loss and		Q.S. Date Known				and LAE Reserves	LAE Reserves	Total Loss and
		District	Total Prior	2022 Loss and	LAE Payments on	T. (.) 0000 (Case Loss and	LAE Reserves on		T. (.) O O .)	Developed	Developed	LAE Reserve
Years in Which	Prior Year-End	Prior Year- End IBNR	Year-End Loss and LAE	LAE Payments on Claims Reported	Claims Unreported	Total 2022 Loss and LAE	LAE Reserves on Claims Reported		Q.S. Date IBNR	Total Q.S. Loss and LAE	(Savings)/ Deficiency	(Savings)/	Developed (Sovings)/
Losses	Known Case Loss	Loss and LAE	Reserves	as of Prior	as of Prior	Payments	and Open as of	or Reopened Subsequent to	Loss and LAE	Reserves	(Cols.4+7	Deficiency (Cols. 5+8+9	(Savings)/ Deficiency
Occurred	and LAE Reserves	Reserves	(Cols. 1+2)	Year-End	Year-End	(Cols. 4+5)	Prior Year End	Prior Year End	Reserves	(Cols.7+8+9)	minus Col. 1)	minus Col. 2)	(Cols. 11+12)
	und ExtEntoconvoc	110001100	(0010: 1+2)	Todi Elia	Tour End	(0010: 1+0)	THOI TOUT LING	Ther rear End	110001100	(0010.1 1010)	mindo con 1)	11111100 001. 2)	(0010: 11112)
1. 2019 + Prior													
2. 2020						\							
3. Subtotals 2020 + Prior													
4. 2021				\									
5. Subtotals 2021 + Prior													
6. 2022	XXX	XXX	XXX	XXX			XXX				XXX	XXX	XXX
7. Totals													
8. Prior Year-End Surplus											Col. 11, Line 7	Col. 12, Line 7	Col. 13, Line 7
As Regards											As % of Col. 1	As % of Col. 2	As % of Col. 3
Policyholders											Line 7	Line 7	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.

	<u> </u>	Response
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	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.	YES
	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]	

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 reducitied		
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 lesses		
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

		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	1,775,735	8,289,294
3.	Accrual of discount	6,207	
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	(247)	(48,088)
6.	Deduct consideration for bonds and stocks disposed of	1,706,850	7,099,852
7.	Deduct amortization of premium	54,042	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	2,815	14,474
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	34,025,121	34,001,503
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	34,025,121	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

Burng ti	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	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)	31,745,623	726,980	510,011	· ·	31,745,623	32,039,053	0	31,262,448
2. NAIC 2 (a)	2,738,054	0	400,792	(100,617)	2,738,054	2,236,646	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	34,483,677	726,980	910,803	(24, 155)	34,483,677	34,275,698	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	n	0	0	0	0	n
14. Total Preferred Stock	0	0	0	0	0	0	0	0
		700,000	040.000	(04.455)	U	04 075 000		04 004 500
15. Total Bonds and Preferred Stock	34,483,677	726,980	910,803	(24, 155)	34,483,677	34,275,698	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

	1 Book/Adjusted	2	3	4 Interest Collected	5 Paid for Accrued Interest
	Carrying Value	Par Value	Actual Cost	Year-to-Date	Year-to-Date
770999999 Totals	250,577	XXX	250,585	0	3,267

SCHEDULE DA - VERIFICATION

Short-Term Investments

	Short-renn investments	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	0
2.	Cost of short-term investments acquired	250,585	0
3.	Accrual of discount	0	0
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals		0
6.	Deduct consideration received on disposals	0	0
7.	Deduct amortization of premium	8	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)	250,577	0
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	250,577	0

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 Equivalente)	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	4,516	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	4,516	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 **N O N E**

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

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

NONE

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

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

ΕÓ

6009999999 - Totals

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

SCHEDULE D - PART 3

				CONEDULE DI L'AIRI C					
			Show All I	Long-Term Bonds and Stock Acquired During the Current Quarte	er				
1	2	3	4	5	6	7	8	9	10
	_	Ů	•	Ĭ		•	ŭ	· ·	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		192,883	200,000	1,430	
01099999999. S	Subtotal - Bonds - U.S. Governments					192,883	200,000	1,430	XXX
64990F-S9-6	NEW YORK STATE DORMITORY AUTHORITY		05/19/2022	PIPER JAFFRAY		283,512	300,000	2, 170	1.B FE
0909999999999999	Subtotal - Bonds - U.S. Special Revenues					283,512	300,000	2, 170	XXX
2509999997. T	otal - Bonds - Part 3					476,395	500,000	3,599	XXX
2509999998. T	otal - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. T	otal - Bonds					476,395	500,000	3,599	XXX
4509999997. T	otal - Preferred Stocks - Part 3					0	XXX	0	XXX
4509999998. T	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
4509999999. T	otal - Preferred Stocks					0	XXX	0	XXX
5989999997. T	otal - Common Stocks - Part 3					0	XXX	0	XXX
	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
5989999999. T	otal - Common Stocks					0	XXX	0	XXX
5999999999. T	otal - Preferred and Common Stocks					0	XXX	0	XXX
			· · · · · · · · · · · · · · · · · · ·						

XXX

XXX

SCHEDULE D - PART 4

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

					Show All Lo	ng-Term Bo	nas ana Sto	ck Sola, Rec	ro berneast	inerwise L	Jisposea (of During tr	e Current	Quarter							
1	2	3	4	5	6	7	8	9	10	Ch	ange In Bo	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	Adjusted	Change in	Adjusted	Foreign			Stock	Stated	and
									Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment	Value		Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying		`		(11 + 12 -	/Adjusted	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eian		of Purchaser	Stock	eration	Par Value	Cost	Value	Increase/ (Decrease)	tization)/ Accretion	Recog- nized	13)	Carrying Value	Disposal	Disposal	Disposal	Disposal	Year	Date	Symbol
	G2 MA6409 - RMBS	eigi	06/01/2022		SIUCK	4,467	4,467	4,586	value 4,654	(Decrease)			-,	value	4,467	Disposai	Disposai	Disposai	1 eai 54	01/20/2050	Symbol
	G2 MA7051 - RMBS			Paydown		4,467	7,760		8,093	0	(187)		(187)			0	0		34 63	12/20/2050	1.4
	G2 MA7589 - RMBS		06/01/2022	Paydown		7,700	7,921	8,193	8, 189	0	(267)		(267)		7,921	0	0	0	84	09/20/2051	1 A
	GNR 2016-173 CT - CMO/RMBS		06/01/2022			48 , 185	48 , 185	48,742	48,380	0	(195)		(195)	0	48 , 185	0	0	0	583	10/20/2045	1.A
38382W-DR-5	GNR 2021-117 PC - CMO/RMBS		06/01/2022	Paydown		6,048	6,048	6 , 157	6, 152	0	(105)		(105)	0	6,048	0	0	0	51	07/20/2051	1.A
	99. Subtotal - Bonds - U.S. Governme	nts				74,381	74,381	75,773	75,467	0	(1,086)	0	(1,086)	0	74,381	0	0	0	835	XXX	XXX
	FH G60037 - RMBS		06/01/2022			6,626	6,626	6,442	6,438	0	188		188	0	6,626	0	0	0	83	10/01/2043	1.A
	FHR 2113 QG - CMO/RMBS		06/01/2022	Paydown		3,399	3,400	3,655	3,595	0	(195)		(195)	0	3,400	0	0	0	80	01/15/2029	1.A
	FN AS1380 - RMBS		06/01/2022	Paydown		1,919 7,043	1,919 7,043	2,073 7,043	2, 156 7, 043	0	(237)	0	(237)	0	1,919 7,043	0	0	0	33	12/01/2043	1.A
	LOUISIANA HSG CORP SINGLE FAMILY MIG HEV			Pavdown			5,893		5,893	0		0	٥		5,893	0	0		93	12/01/2038	1.A FE
	ST CHARLES PARISH LA GULF OPPORTUNITY ZO			Maturity @ 100.00		300,000	300,000	306,531	300,964	0	(964)	0	(964)	0	300,000	0	0	0	6,000		2.B FE
	VIRGINIA ST HSG DEV AUTH HOMEOWNERSHIP M		06/01/2022			3,653	3,653	3,525	3,532	0	121	0	121	0	3,653	0	0	0	48	08/25/2042	1.B FE
090999999	99. Subtotal - Bonds - U.S. Special Re	evenu	es			328,533	328,533	335, 160	329,620	0	(1,087)	0	(1,087)	0	328,533	0	0	0	6,413	XXX	XXX
	ALBEMARLE CORP			Call @ 100.00		102,298	100,000	101,988	100,943	0	(151)	0	(151)	0	100,792	0	(792)	(792)	4,500		2.C FE
	LOCKHEED MARTIN CORP		05/11/2022	Call @ 100.00		50,517	50,000	48,943	49,406	0	49	0	49	0	49,455	0	545	545	1,432	01/15/2026	1.G FE
	STONEHENGE CAPITAL FUND CONNECTICUT IV L		06/15/2022	Paydown		97,530	97,530	97,530		0	0	0	0	0	97,530	0	0	0	3,901	12/15/2025	1.G
	STONEHENGE CAPITAL FUND CONNECTICUT VI, WFRBS 2012-C9 A3 - CMBS		06/15/2022	Paydown		197,834 62,279	197,834 62,279	197,834	197,834	0	(59)	0	(59)	0	197,834	0	0	0	7,562 786	12/15/2031 11/17/2045	1.C FE
	99. Subtotal - Bonds - Industrial and M	liccoll				510.458	507.643	509.501	508.051	٥	(161)		(161)		507.890	u	(247)	(247)	18.181	XXX	XXX
	97. Total - Bonds - Part 4	IISCEII	ianeous (On	aiiiiaieu)		913.371	910.556	920,434	913, 137	0	(2.335)		(2, 335)	0	910.803	0	(247)	(247)	25,429	XXX	XXX
	98. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Bonds					913,371	910.556	920.434	913.137	7///	(2,335)		(2, 335)	7000	910.803	0	(247)	(247)	25,429	XXX	XXX
	97. Total - Preferred Stocks - Part 4					0 0	XXX	320,404	0	0	(2,000)	0	(2,000)	0	310,000	0	0	0	25,429	XXX	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4509999999. Total - Preferred Stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX		
598999997. Total - Common Stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX		
598999999	98. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
598999999	99. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	99. Total - Preferred and Common Sto	ocks				0	XXX	0	0	0	0		0	0	0	0	0	0	0	XXX	XXX
600999999	99 - Totals					913,371	XXX	920,434	913, 137	0	(2,335)	0	(2,335)	0	910,803	0	(247)	(247)	25,429	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				
- 1 7	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
Bank of New York Mellon New York, NY		0.000	0	0	362,965	269,835	634,805	XXX
0199998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See	Y	V///	0	0	0	0	0	V///
instructions) - Open Depositories	XXX	XXX	•		·			XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	362,965	269,835	634,805	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	362,965	269,835	634,805	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
								+
0599999. Total - Cash	XXX	XXX	0	0	362,965	269,835	634,805	XXX

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



SUPPLEMENT FOR THE QUARTER ENDING JUNE 30, 2022 OF THE HANOVER AMERICAN INSURANCE COMPANY

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

Year To Date For The Period Ended JUNE 30, 2022

NAIC Group Code 0088		_		NAIC Company Code	3606	4					
Compar	ny Name HANO	VER AMERICAN INSU	RANCE COMPANY								
If the repo	orting entity writes	any director and officer (D8	RO) business, please provi	de the following:							
1.	Monoline Policies										
		1 Direct Written Premium	2 Direct Earned Premium	3 Direct Losses Incurred							
		\$0	\$0	\$0							
2.	Commercial Multi	ple Peril (CMP) Packaged I	Policies								
	2.1 Does the repo	d policy be quantified or estimated?									
	2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies										
								,			
			ide direct losses incurred (losses paid plus change in	asonable assumptions:case reserves) for the D&O liability coverage						