

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

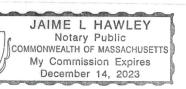
AS OF MARCH 31, 2023 OF THE CONDITION AND AFFAIRS OF THE

AIX Specialty Insurance Company

0088 NAIC Company Code 12833 Employer's ID Number

	NAIC Group Code	0088	0088	NAIC Company C	ode <u>12833</u> Employer's	s ID Number	20-5233538			
Organized under the Laws	s of	(Current) Dela	(Prior) aware		, State of Domicile or Port of	Entry	DE			
Country of Domicile				United States	of America					
Incorporated/Organized _		06/20/2006			Commenced Business _		12/22/2006			
Statutory Home Office		1209 Orange			\	Wilmington, DE,	US 19801-1120			
		(Street and N	umber)		(City o	or Town, State, C	country and Zip Code)			
Main Administrative Office				440 Linco						
	Worcester, MA,	01653-0002		(Street and	(Number)	508-853	3-7200			
(Ci	ty or Town, State, Co	ountry and Zip	Code)		(4	Area Code) (Tele	ephone Number)			
Mail Address		0 Lincoln Stree		,		Worcester, MA,	JS 01653-0002			
	(Street an	d Number or F	P.O. Box)		(City o	or Town, State, C	ountry and Zip Code)			
Primary Location of Books	and Records			440 Linco						
	Worcester, MA, U	S 01653-0002		(Street and	Number)	508-853-720	in_8557928			
(Cir	ty or Town, State, Co			٠,	(<i>F</i>		ephone Number)			
Internet Website Address				WWW.HAN	OVER.COM					
Statutory Statement Conta	act	Dennis	M. Hazel	wood		508-85	3-7200-8557928			
	DHAZELWOOD@F	ANOVER CO	(Name)			(Area Code) 508-853	(Telephone Number)			
	(E-mail Ac		IVI	,		(FAX No				
				OFFIC	NEDO.					
Preside	ent	John Conne	er Roche	OFFIC	Vice President & Treasurer		Nathaniel William Clarkin			
Senior Vice President	&						Tathanio William Olarkii			
Secreta	ry	Charles Frede	erick Cronii	n	_					
			Donnia F	OTH						
Jeffrey Mark Farber, E				G		Willard T	y-Lunn Lee, Executive Vice President			
Denise Maureen Low	sley, Executive Vice	President	Bryan	James Salvatore,	Executive Vice President					
				DIRECTORS O						
	n Ellison Barnes rancis Kerrigan Jr.				ark Farber -Lunn Lee	Lindsay France Greenfield David John Lovely #				
	Maureen Lowsley				ner Roche		Bryan James Salvatore			
State of	Massachuset	ts	s	S:						
County of	Worcester									
The officers of this reporti	aa antitu baina dulu a	warn aaab daa		th th	- described officers of establish		d that are the account of a district of a large			
all of the herein described	d assets were the at	solute proper	ty of the sa	aid reporting entity.	free and clear from any liens	s or claims there	d that on the reporting period stated above, eon, except as herein stated, and that this			
statement, together with re condition and affairs of the	elated exhibits, schedes said reporting entity	dules and expl as of the repo	anations th	nerein contained, ar ad stated above, and	nnexed or referred to, is a full a	and true stateme	ent of all the assets and liabilities and of the ne period ended, and have been completed			
in accordance with the NA	AIC Annual Statemer	nt Instructions	and Accou	unting Practices and	d Procedures manual except t	to the extent that	t: (1) state law may differ; or, (2) that state			
respectively. Furthermore	e, the scope of this a	ttestation by the	ne describe	ed officers also incl	ludes the related corresponding	na electronic filin	their information, knowledge and belief, g with the NAIC, when required, that is an			
exact copy (except for forr to the enclosed statement	matting differences d	ue to electroni	c filing) of	the enclosed stater	ment. The electronic filing may	y be requested b	y various regulators in lieu of or in addition			
				1011						
() C)			/	(2)						
John Conr Pres	/			Charles Fredo Senior Vice President						
					a. Is this an original filin	ıa?	. Yes[X]No[]			
Subscribed and sworn to b			. 0000		b. If no,					
2nd day	y of	Ma	y, 2023			_ 1. State the amendment number 2. Date filed				
	luce				3. Number of pages					
Jaime Hawley Notary										
December 14, 2023		· · · ·		The second secon	e montante de la companya a companya de la companya	4				





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	55,076,721	0	55,076,721	54,670,095
2.	Stocks:				
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks	0	0	0	0
3.	Mortgage loans on real estate:				
	3.1 First liens	0	0	0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$	0	0	0	0
	4.2 Properties held for the production of income (less				
	\$0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5.	Cash (\$				
0.	(\$				
	investments (\$0)	202 840	0	202,849	073 /187
6	Contract loans (including \$0 premium notes)				0
	Derivatives				0
	Other invested assets				0
	Receivables for securities			10,478	0
	Securities lending reinvested collateral assets			· ·	0
	Aggregate write-ins for invested assets				0
	Subtotals, cash and invested assets (Lines 1 to 11)			55,290,048	
	Title plants less \$				
	only)	0	0	0	0
	Investment income due and accrued				389.737
	Premiums and considerations:			,200	
	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0	0
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$0) and				
	contracts subject to redetermination (\$0)	0	0	0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0	0
	16.3 Other amounts receivable under reinsurance contracts				0
17.	Amounts receivable relating to uninsured plans	0	0	0	0
	Current federal and foreign income tax recoverable and interest thereon				1, 124
	Net deferred tax asset			1,164,840	717,250
	Guaranty funds receivable or on deposit			0	0
	Electronic data processing equipment and software			0	0
	Furniture and equipment, including health care delivery assets				
	(\$0)				0
	Net adjustment in assets and liabilities due to foreign exchange rates				0
	Receivables from parent, subsidiaries and affiliates				0
	Health care (\$0) and other amounts receivable				0
25.	Aggregate write-ins for other than invested assets	4,116,569	4,116,569	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and	00 004 005	0.540.544	E0 00E 404	FO 754 000
<u> </u>	Protected Cell Accounts (Lines 12 to 25)	63,381,635		56,835,124	56,/51,693
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	63,381,635	6,546,511	56,835,124	56,751,693
	DETAILS OF WRITE-INS				
1101.		0	0	0	0
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	<u> </u>	0	0
2501.	Other Non-admitted Assets	4,116,569	4,116,569	0	0
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)	4,116,569	4,116,569	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		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		
	Net deferred tax liability		0
8.	Borrowed money \$	0	0
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
	including \$0 for medical loss ratio rebate per the Public Health Service Act)	0	0
10.	Advance premium		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)	5,210,325	3,580,654
13.	Funds held by company under reinsurance treaties	0	0
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$0 certified)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		
20.	Derivatives		
21. 22.	Payable for securities Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$0 and interest thereon \$		
25.	Aggregate write-ins for liabilities		0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		3,585,491
27.	Protected cell liabilities	0	0
28.	Total liabilities (Lines 26 and 27)	5,289,680	3,585,491
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
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)	8/6,668	2,497,426
36.	Less treasury stock, at cost: 36.10 shares common (value included in Line 30 \$	0	0
	36.2		0
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)		53,166,202
38.	Totals (Page 2, Line 28, Col. 3)	56,835,124	56,751,693
50.	DETAILS OF WRITE-INS	00,000,124	30,701,000
2501.	DETAILS OF WITHE-ING		0
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.		0	0
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201.			0
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		0
3299.	Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

STATEMENT OF INCOME

0502.		OTATEMENT OF INC	• · · · · ·	•	
President earnor			1 Current	_	-
Previous earnet 1. Prev					
1. Productines carecat 1.1 Direct optimins 5		LINDERWRITING INCOME	. oa. to Bato	10 2 410	2000111201 01
1.1 Direct (writtens 4, 483, 387)	1				
1.2 Accounted porteines	١.		45 940 208	45 916 243	183 802 853
1. 1- Net (written)					
1. Net position 1. Net pos					
DEDUCTIONS:					
2. Losses incurred (commat accident year \$		· ·		0	0
2 2 Assumed					
2 A Seasment 0, 0 0 0 0 2 2 2 2 2 2	2.				
2 - 2 Cederd					
2 Net 0 0 0 0 0 0 0 0 0					
3. Los adjustment expenses incurred					
4. Other underwriting expensives incurred					
5 Aggregate write ins for nutrienvillag declinations	3.				
5 Aggregate write ins for nutrienvillag declinations	4.	Other underwriting expenses incurred	0	0	0
6. Total underwriting deutloctors (Lines 2 through 9)	5.	Aggregate write-ins for underwriting deductions	0	0	0
7. Net income of protected calls 0		Total underwriting deductions (Lines 2 through 5)	0	0	0
8. Net underwriting gain (coss) (Line t minus Line 6 - Line 7) 9. Net underwriting gain (coss) (Line s minus Line 6 - Line 7) 9. Net underwriting gain (coss) (Line 8 - 10) 9. Net investment plain (coss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (loss) (Line 8 - 10) 9. Net plain or (Line 12 (Li					0
Net investment income earmed		Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	0		0
9. Net investment innome earmed 1. Net revisitor capital gains (loses) lies a capital gains tax of \$ 0 0 1 (12.35) 1. Net revisitor of gain (lose) (lines 9 + 10)	0.				
10. Not realized capital gains (losses) loss capital gains tax of \$	•		057 750	040 570	1 202 402
1.1. Net levestment gain (loss) (Lines 9 + 10). OTHER NCOME			·		
Net Patrice		Net realized capital gains (losses) less capital gains tax of \$			
12. Net gain or (loss) from agents' or premium balances charged off (annount recovered \$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	11.	- ' ' '	357,753	348,578	1,370,098
\$ 0 mount charged off \$ 0 0 0 0 14. Aggregate write-ins for miscallaneous income. 0 0 0 0 0 15. Total other income. (Lines 21 trough 14). 0 0 0 0 0 16. Net income before divisions to policyholders. after capital gains tax and before all other federal and not origin income taxes (line 8 + 11 + 15). 0					
13. Finance and service charges not included in premiums	12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered			
13. Finance and service charges not included in premiums		\$0 amount charged off \$0)	0	0	0
14. Aggregate write-ins for miscellaneous income	13.	Finance and service charges not included in premiums	0	0	0
16	14.	Aggregate write-ins for miscellaneous income		0	0
and foreign income taxes (Lines 8 + 11 + 15)	15.	Total other income (Lines 12 through 14)	0	0	0
and foreign income taxes (Lines 8 + 11 + 15)	16.	Net income before dividends to policyholders, after capital gains tax and before all other federal			
17. Dividends to policyholders. 0 0 0 0 0 0		and foreign income taxes (Lines 8 + 11 + 15)	357,753	348,578	1,370,098
Net Income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (incurred 75,128 71,800 287,355 286,255 276,778 1,807,355	17.	- · · · · · · · · · · · · · · · · · · ·			
to relign income taxes (Line 16 minus Line 17)		· · ·			
19. Federal and foreign income taxes incurred 75, 128 71,800 287,355	10.	foreign income taxes (Line 16 minus Line 17)	357,753	348,578	1,370,098
Net income (Line 18 minus Line 19(t) Cline 22) 282,825 276,778 1,082,743	19.	- · · · · · · · · · · · · · · · · · · ·			
CAPITAL AND SUPPLUS ACCOUNT 53,166,202 54,194,167 54,194,194,194 54,194,194,194 54,194,194 54,194,194 54,194,194 54,194,194 54,1		· · · · · · · · · · · · · · · · · · ·			·
21 Surplus as regards policyholders, December 31 prior year	20.	· · · · · · · · · · · · · · · · · · ·	252,525	2.0,0	.,002,: 10
22. Net income (from Line 20)	21		53 166 202	54 104 167	54 194 167
23. Net transfers (to) from Protected Cell accounts.					
24. Change in net unrealized capital gains (losses) less capital gain tax of \$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
25 Change in net unrealized foreign exchange capital gain (loss)		Net transfers (to) from Protected Cell accounts		0	0
26. Change in net deferred income tax 493,705 81,970 561,091 27. Change in nonadmitted assets (2,397,088) (390,334) (2,671,799) 28. Change in surplus notes 0 0 0 0 30. Surplus contributed to withdrawn from protected cells 0 0 0 0 31. Cumulative effect of changes in accounting principles 0 0 0 0 32. Transferred from surplus (Stock Dividend) 0 0 0 0 32. Transferred from surplus (Stock Dividend) 0 0 0 0 33. Surplus adjustments: 33.1 Flaid in 0 0 0 0 33. Transferred from capital 0 0 0 0 0 33. Transferred from capital 0 0 0 0 0 35. Dividends to stockholders 0 0 0 0 0 36. Change in treasury stock 0 0 0 0 0 30. Change in surplus as regards policyholders (Lines 22 through 37) (1,620,758) (31,586) (1,227,965) 37. Aggregate write-ins for Line from overflow page </td <td></td> <td>Change in net unrealized capital gains (losses) less capital gains tax of \$</td> <td></td> <td>0</td> <td>0</td>		Change in net unrealized capital gains (losses) less capital gains tax of \$		0	0
27	25.	Change in net unrealized foreign exchange capital gain (loss)	0	0	0
28. Change in provision for reinsurance	26.				
Change in surplus notes	27.				
30. Surplus (contributed to) withdrawn from protected cells	28.	Change in provision for reinsurance	0	0	0
31. Cumulative effect of changes in accounting principles	29.	Change in surplus notes	0	0	0
32 Capital changes:	30.				
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:			
32.2 Transferred from surplus (Stock Dividend)		32.1 Paid in	0	0	0
32.3 Transferred to surplus				0	0
33.1 Paid in 0 0 0 0 0 0 0 0 0					
33.1 Paid in	33	•			
33.2 Transferred to capital (Stock Dividend)			0	n	0
33.3 Transferred from capital					
34. Net remittances from or (to) Home Office .0 .0 .0 35. Dividends to stockholders .0 .0 .0 .0 36. Change in treasury stock .0 .0 .0 .0 .0 37. Aggregate write-ins for gains and losses in surplus .0 <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
35. Dividends to stockholders 0 .0 .0 36. Change in treasury stock 0 0 .0 37. Aggregate write-ins for gains and losses in surplus 0 0 0 38. Change in surplus as regards policyholders (Lines 22 through 37). (1,620,758) (31,586) (1,027,965) 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 51,545,444 54,162,581 53,166,202 DETAILS OF WRITE-INS 0501. 0 0 0 0 0502. 0 0 0 0 0503. 0 0 0 0 0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0 0 0 0 1401. 0 0 0 0 1402. 1498. 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 <td>31</td> <td></td> <td></td> <td></td> <td></td>	31				
36. Change in treasury stock 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
37. Aggregate write-ins for gains and losses in surplus 0 0 0 38. Change in surplus as regards policyholders (Lines 22 through 37) (1,620,758) (31,586) (1,027,965) 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 51,545,444 54,162,581 53,166,202 DETAILS OF WRITE-INS 0501.					
38. Change in surplus as regards policyholders (Lines 22 through 37). (1,620,758) (31,586) (1,027,965) 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 51,545,444 54,162,581 53,166,202 DETAILS OF WRITE-INS 0501. 0 0 0 0 0 0502. 0 0 0 0 0 0509. Summary of remaining write-ins for Line 5 from overflow page 0 0 0 0 0 0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0 0 0 0 1401. 0 0 0 0 0 1402. 1403. 1498. Summary of remaining write-ins for Line 14 from overflow page 0 0 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 0 0 3701. 0 0 0 0 0 3702. 3708. Summary of remaining write-ins for Line 37 from overflow page 0 0 0 0 0 0 3703. 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0 0 0 0 0 0 0				0	0
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 51,545,444 54,162,581 53,166,202				(04.500)	(4.007.005)
DETAILS OF WRITE-INS 0501 0					
0501.	39.	· · · · · · · · · · · · · · · · · · ·	51,545,444	54,162,581	53,166,202
0502 0503 0 0<					
0503.	0501.		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. 0 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	0502.				
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0 0 0 1401	0503.				
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0 0 0 1401	0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0
1401.		Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1402.			0		0
1403.					
1498. Summary of remaining write-ins for Line 14 from overflow page 0 0 0 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 3701. 0 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					
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 3701.					_
3701.				_	
3702.			U		0
3703. 3703. Summary of remaining write-ins for Line 37 from overflow page				0	0
3798. Summary of remaining write-ins for Line 37 from overflow page					
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above) 0 0 0	3798.	· · · · · · · · · · · · · · · · · · ·			
	3799.	Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	0	0

CASH FLOW

			0	
		1 Current Year	2 Prior Year	3 Prior Year Ended
		To Date	To Date	December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	1,629,671	69,945	3,345,054
2.	Net investment income	364,450	336,515	1,353,276
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	1,994,121	406,460	4,698,330
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 \$			
	gains (losses)	1	(1)	316,999
10.	Total (Lines 5 through 9)	1	(1)	316,999
11.	Net cash from operations (Line 4 minus Line 10)	1,994,120	406,461	4,381,331
		.,	,	.,,
	Cash from Investments			
40				
12.	Proceeds from investments sold, matured or repaid:	202 202	000 700	4 000 707
	12.1 Bonds		,	
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	322,228	822,792	4,906,707
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	726,050	1,540,720	7,050,364
	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	10,478	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	736,528	1,540,720	7,050,364
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)	(414,300)	(717,928)	(2,143,657)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock		0	0
	16.3 Borrowed funds		0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
				0
	16.6 Other cash provided (applied)	(2,350,458)	(380,111)	(2,662,585)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(2,350,458)	(380,111)	(2,662,585)
	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).	(770,638)	(691,578)	(424,912)
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	973,487	1,398,399	1,398,399
	19.2 End of period (Line 18 plus Line 19.1)	202,849	706,821	973,487

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

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

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

	SSAP#	F/S Page	F/S Line #	2023	2022
NET INCOME	OOAI #	1 age	LIIIC #	2023	2022
(1) State basis (Page 4, Line 20, Columns 1 & 3)	xxx	XXX	XXX	\$ 282,625	\$ 1,082,743
(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	\$ 282.625	\$ 1.082.743
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	xxx	XXX	XXX	\$ 51,545,444	\$ 53,166,202
(6) State Prescribed Practices that are an increase/(decrease)	from NAIC SA	ιP:		\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) fr	rom NAIC SAF	P :		\$ -	\$ -
(8) NAIC SAP (5-6-7=8)	xxx	XXX	XXX	\$ 51.545.444	\$ 53.166.202

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

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

C. Accounting Policy

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds not backed by loans are stated at either amortized cost or fair value, using the scientific interest method, in accordance with the NAIC Purposes and Procedures of the Securities Valuation Office.
- (3) The Company does not own any common stocks.
- (4) The Company does not own any preferred stocks.
- (5) The Company does not own any mortgage loans.
- (6) Loan-backed securities are stated at either amortized cost or fair value, in accordance with the NAIC Purposes and Procedures of the Securities Valuation
- (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

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company does not own any mortgage loans.

B. Debt Restructuring

The Company did not have any restructured debt.

C. Reverse Mortgages

The Company does not own any reverse mortgages.

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

 1. Less than 12 Months
 \$ 12,310

 2. 12 Months or Longer
 \$ 272,183

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

 1. Less than 12 Months
 \$ 318,124

 2. 12 Months or Longer
 \$ 2,348,196

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

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

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

			Gross (Admit	ted) Restricted			
			Current Year			6	7
	1	2	3	4	5		
Restricted Asset Category	Total Genera Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)
a. Subject to contractual obligation for which							
liability is not shown	\$	- \$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. Collateral held under security lending							
agreements	\$	- \$ -	\$ -	\$ -	\$ -	\$ -	\$ -
c. Subject to repurchase agreements	\$	- \$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Subject to reverse repurchase agreements	\$	- \$ -	\$ -	\$ -	\$ -	\$ -	\$ -
e. Subject to dollar repurchase agreements f. Subject to dollar reverse repurchase	\$	- \$ -	\$ -	\$ -	\$ -	\$ -	\$ -
agreements	\$	- \$ -	\$ -	\$ -	\$ -	-	\$ -
g. Placed under option contracts h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$	- \$ - - \$ -	\$ - \$ -	\$ -	\$ - \$ -	\$ - \$ -	\$ -
i. FHLB capital stock	\$	- \$ -	\$ -	\$ -	\$ -	\$ -	\$ -
j. On deposit with states	\$ 4,152,464	\$ -	\$ -	\$ -	\$ 4,152,464	\$ 3,651,962	\$ 500,502
k. On deposit with other regulatory bodies I. Pledged collateral to FHLB (including assets	\$	- \$ -	\$ -	\$ -	\$ -	\$ -	\$ -
backing funding agreements) m. Pledged as collateral not captured in other	\$	- \$	\$ -	\$ -	\$ -	\$ -	\$ -
categories	\$	- \$	\$ -	\$ -	\$ -	\$ -	\$ -
n. Other restricted assets	\$ 6,805,658		\$ -	\$ -	\$ 6,805,658	\$ 5,155,657	\$ 1,650,001
o. Total Restricted Assets (Sum of a through n)	\$ 10,958,122	: \$ -	\$ -	\$ -	\$ 10,958,122	\$ 8,807,619	\$ 2,150,503

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

	Current Year								
		8		9	Perce	ntage			
					10	11			
Restricted Asset Category		Total Non- admitted Restricted	F	Total Admitted Restricted 5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)			
Subject to contractual obligation for which liability is not shown	\$	-	\$		0.000%	0.000%			
b. Collateral held under security lending agreements	\$	_	\$	_	0.000%	0.000%			
c. Subject to repurchase agreements	\$	_	\$	_	0.000%	0.000%			
d. Subject to reverse repurchase agreements	\$	_	\$	-	0.000%	0.000%			
e. Subject to dollar repurchase agreements f. Subject to dollar reverse repurchase	\$	-	\$	-	0.000%	0.000%			
agreements	\$	-	\$	-	0.000%	0.000%			
g. Placed under option contracts	\$	-	\$	-	0.000%	0.000%			
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$	-	\$	-	0.000%	0.000%			
i. FHLB capital stock	\$	-	\$	-	0.000%	0.000%			
j. On deposit with states	\$	-	\$	4,152,464	6.552%	7.306%			
k. On deposit with other regulatory bodies	\$	-	\$	-	0.000%	0.000%			
Pledged collateral to FHLB (including assets backing funding agreements) Pledged as collateral not captured in other captureries.	\$	-	\$	-	0.000%	0.000%			
categories n. Other restricted assets	\$	4 116 560	\$	2 600 000	0.000%	0.000%			
o. Total Restricted Assets (Sum of a through n)	\$	4,116,569 4,116,569	\$	2,689,089 6,841,553	10.738% 17.289%	4.731% 12.038%			

- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28
- 2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not applicable

3.

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

		G	ross (Admitte		8	Perce	entage			
			Current Year	•		6	7		9	10
	1	2	3	4	5					
				Protected Cell					Gross	
		Protected Cell Account	Cell Account (S/A)	Account Assets			Increase/	Total Current	(Admitted & Nonadmitted)	Admitted Restricted to
	Total General	Activity	Restricted	Supporting G/A	Total	Total From	(Decrease) (5		Restricted to	Total Admitted
Description of Assets	Account (G/A)	(a)	Assets	Activity (b)	(1 plus 3)	Prior Year	minus 6)	Restricted	Total Assets	Assets
Held in Trust for New York										
Surplus Lines	\$ 2,689,089	\$ -	\$ -	\$ -	\$ 2,689,089	\$ 2,687,534	\$ 1,555	\$ 2,689,089	4.243%	4.731%
Third Party Administrator Cash	\$ 4,116,569	\$ -	\$ -	\$ -	\$ 4,116,569	\$ 2,468,123	\$ 1,648,446	\$ -	6.495%	0.000%
Total (c)	\$ 6,805,658	\$ -	\$ -	\$ -	\$ 6,805,658	\$ 5,155,657	\$ 1,650,001	\$ 2,689,089	10.738%	4.731%

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Total Line for Columns 1 through 7 should equal 5L(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)n Columns 9 through 11 respectively.
- 4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Not applicable

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

Not applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

Not applicable

NOTE 7 Investment Income

Not applicable

NOTE 8 Derivative Instruments

NOTE 9 Income Taxes

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

1.

	As of	End of Current	Period		12/31/2022	•	Change			
	(1)	(2)	(3) (Col. 1 + 2)	(4)	(5)	(6) (Col. 4 + 5)	(7) (Col. 1 - 4)	(8) (Col. 2 - 5)	(9) (Col. 7 + 8)	
	Ordinary	Capital	` Total ´	Ordinary	Capital	` Total ´	`Ordinary ´	` Capital ´	` Total ´	
(a) Gross Deferred Tax Assets	\$ 1,375,606	\$ -	\$ 1,375,606	\$ 871,380	\$ -	\$ 871,380	\$ 504,226	\$ -	\$ 504,226	
(b) Statutory Valuation Allowance Adjustment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 1,375,606	\$ -	\$ 1,375,606	\$ 871,380	\$ -	\$ 871,380	\$ 504,226	\$ -	\$ 504,226	
(d) Deferred Tax Assets Nonadmitted	\$ 46,114	\$ -	\$ 46,114	\$ -	\$ -	\$ -	\$ 46,114	\$ -	\$ 46,114	
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 1,329,492	\$ -	\$ 1,329,492	\$ 871,380	\$ -	\$ 871,380	\$ 458,112	\$ -	\$ 458,112	
(f) Deferred Tax Liabilities	\$ 128,888	\$ 35,764	\$ 164,652	\$ 113,363	\$ 40,767	\$ 154,130	\$ 15,525	\$ (5,003)	\$ 10,522	
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 1,200,604	\$ (35,764)	\$ 1,164,840	\$ 758,017	\$ (40,767)	\$ 717.250	\$ 442,587	\$ 5,003	\$ 447.590	

2.

	As of	End of Current	Period		12/31/2022			Change	
	(1)	(2)	(3) (Col. 1 + 2)	(4)	(5)	(6) (Col. 4 + 5)	(7) (Col. 1 - 4)	(8) (Col. 2 - 5)	(9) (Col. 7 + 8)
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ 266,446	\$ -	\$ 266,446	\$ 457,273	\$ -	\$ 457,273	\$ (190,827)	\$ -	\$ (190,827)
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ 898,394	\$ -	\$ 898,394	\$ 272,878	\$ -	\$ 272,878	\$ 625,516	\$ -	\$ 625,516
Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ 898,394	\$ -	\$ 898,394	\$ 272,878	\$ -	\$ 272,878	\$ 625,516	\$ -	\$ 625,516
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	\$ 7,557,091	XXX	xxx	\$ -	xxx	XXX	\$ 7,557,091
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ 128,888	\$ 35,764	\$ 164,652	\$ 113,363	\$ 27,866	\$ 141,229	\$ 15,525	\$ 7,898	\$ 23,423
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 1,293,728	\$ 35,764	\$ 1,329,492	\$ 843,514	\$ 27,866	\$ 871,380	\$ 450,214	\$ 7,898	\$ 458,112

3.

 2023
 2022

 10660.000%
 11097.000%

 \$50,380,604
 \$52,448,952

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

4. Tax Planning Strategies

	As of End of 0	Current Period	12/31	/2022	Cha	ange
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	(Col. 1 - 3) Ordinary	(Col. 2 - 4) Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
Adjusted Gross DTAs amount from Note 9A1(c)	\$ 1,375,606	\$ -	\$ 871,380	\$ -	\$ 504,226	\$ -
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 1,329,492	\$ -	\$ 871,380	\$ -	\$ 458,112	\$ -
Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%

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

Yes [] No [X]

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

Current income taxes incurred consist of the following major components:

1	Current	Income	Tay

- (a) Federal
- (b) Foreign
- (c) Subtotal (1a+1b)
- (d) Federal income tax on net capital gains
- (e) Utilization of capital loss carry-forwards
- (f) Other
- (g) Federal and foreign income taxes incurred (1c+1d+1e+1f)

2. Deferred Tax Assets:

(a) Ordinary:

- (1) Discounting of unpaid losses
- (2) Unearned premium reserve
- (3) Policyholder reserves
- (4) Investments
- (5) Deferred acquisition costs
- (6) Policyholder dividends accrual
- (7) Fixed assets
- (8) Compensation and benefits accrual
- (9) Pension accrual
- (10) Receivables nonadmitted
- (11) Net operating loss carry-forward
- (12) Tax credit carry-forward
- (13) Other

(99) Subtotal (sum of 2a1 through 2a13)

- (b) Statutory valuation allowance adjustment
- (c) Nonadmitted
- (d) Admitted ordinary deferred tax assets (2a99 2b 2c)
- (e) Capital:
 - (1) Investments
 - (2) Net capital loss carry-forward
 - (3) Real estate
 - (4) Other

(99) Subtotal (2e1+2e2+2e3+2e4)

- (f) Statutory valuation allowance adjustment
- (g) Nonadmitted
- (h) Admitted capital deferred tax assets (2e99 2f 2g)
- (i) Admitted deferred tax assets (2d + 2h)

3. Deferred Tax Liabilities:

- (a) Ordinary:
 - (1) Investments
 - (2) Fixed assets
 - (3) Deferred and uncollected premium
 - (4) Policyholder reserves
 - (5) Other

(99) Subtotal (3a1+3a2+3a3+3a4+3a5)

- (b) Capital:
 - (1) Investments
 - (2) Real estate (3) Other
- (99) Subtotal (3b1+3b2+3b3) (c) Deferred tax liabilities (3a99 + 3b99)
- 4. Net deferred tax assets/liabilities (2i 3c)

	(1)		(2)		(3)
	s of End of rrent Period		12/31/2022		(Col. 1 - 2) Change
\$	75,128	\$	287,355	\$	(212,227)
\$	-	\$	<u> </u>	\$	-
\$	75,128	\$	287,355	\$	(212,227)
\$	-	\$	480	\$	(480)
\$	-	\$	-	\$	-
\$	75,128	\$	207 025	\$	(212,707)
Φ	73,120	Ф	287,835	φ	(212,707)
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$ \$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	_	\$	-	\$	-
\$	500,604	\$	353,073	\$	147,531
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	975.002	\$	- E10 207	\$ \$	256 605
\$	875,002 1,375,606	\$	518,307 871,380	\$	356,695 504,226
\$	-	\$		\$	-
\$	46,114	\$	_	\$	46,114
\$	1,329,492	\$	871,380	\$	458,112
\$	-	\$	-	\$	-
\$ \$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	-	\$		\$	
\$	1,329,492	\$	871,380	\$	458,112
\$	-	\$	-	\$	-
\$	128,888	\$	113,363	\$	15,525
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	128,888	\$	113,363	\$	15,525
Ψ	120,000	Ψ	110,000	Ψ	10,020
\$	35,764	\$	40,767	\$	(5,003)
\$	-	\$	-	\$	-
\$	-	\$	-	\$	-
\$	35,764	\$	40,767	\$	(5,003)
\$	164,652	\$	154,130 717,250	\$	10,522
\$	1,164,840	\$	717,250	\$	447,590

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

Adjusted gross deferred tax assets Total deferred tax liabilities Net deferred tax assets (liabilities) Tax effect of change in unrealized gains (losses) Change in net deferred income tax

(1) As of End of urrent Period	(2) 12/31/2022	(3) (Col. 1 - 2) Change
\$ 1,375,606	\$ 871,380	\$ 504,226
\$ 164,652	\$ 154,130	\$ 10,522
\$ 1,210,954	\$ 717,250	\$ 493,704
		\$ -
		\$ 493,704

On August 16, 2022, the Inflation Reduction Act ("Act") was enacted and included a new corporate alternative minimum tax ("CAMT"). The Act and the CAMT go into effect for tax years beginning after 2022. The CAMT is 15 percent of the corporation's "adjusted financial statement income" for the tax year, reduced by corporate alternative minimum foreign tax credit, and will only apply to corporations (determined on an affiliated group basis) with average adjusted financial statement income in excess of \$1 billion for the three prior tax years. This threshold is reduced to \$100 million in the case of certain foreign-parented corporations. The Company does not expect to be subject to the CAMT in 2023.

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

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

Tax provision at statutory rate Non-admitted assets Total

As of End of Current Period							
	Tax	Rate					
\$	75,128	21.0%					
\$	(493,704)	-138.0%					
\$	(418,576)	-117.0%					

As of End of Current Period

Tax Rate

\$ 75,128 21.0%

\$ (493,704) -138.0%

\$ (418,576) -117.0%

Federal income taxes incurred Change in net deferred income taxes Total statutory income taxes

- E. Operating Loss and Tax Credit Carryforwards
 - 1. At the end of the current reporting period, the Company has no net operating loss carryforwards, and no capital loss carryforwards.
 - 2. The Company has the following federal income taxes which are available for recoupment in the event of future losses:

For the tax year 2022: \$ 242,574 For the tax year 2023: \$ 23,872

- 3. At the end of the current reporting period, the Company has no deposits under section 6603 of the Internal Revenue Service Code.
- F. Consolidated Federal Income Tax Return
 - 1. The Company's Federal Income Tax Return is consolidated with the following affiliated companies:

440 Lincoln Street Holding Company LLC NOVA Casualty Company

AIX, Inc.

OPUS Investment Management Inc
Allmerica Financial Alliance Insurance Company

Professionals Direct Inc

Allmerica Financial Benefit Insurance Company

The Hanover American Insurance Company

Allmerica Plus Insurance Agency, Inc.

The Hanover Atlantic Insurance Company Ltd.

Campania Holding Company, Inc.

The Hanover Casualty Company

Campmed Casualty & Indemnity Company, Inc.

The Hanover Insurance Company
Citizens Insurance Company of America

The Hanover Insurance Group, Inc.

The Hanover National Insurance Company
Citizens Insurance Company
Citizens Insurance Company
Citizens Insurance Company
Citizens Insurance Company
Company
Citizens Insurance Company
Comp

Citizens Insurance Company of Ohio The Hanover New Jersey Insurance Company Citizens Insurance Company of the Midwest Veravest Investment Inc

Educators Insurance Agency, Inc.

Verlan Fire Insurance Company
Hanover Specialty Insurance Brokers, Inc.

Verlan Holdings Inc

Massachusetts Bay Insurance Company

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

Not applicable

I. Alternative Minimum Tax (AMT) Credit

Not applicable

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

A. Nature of Relationships

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

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

Not applicable

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

Not applicable

D. Amouts due to or from Related Parties

At the end of the current reporting period, the Company reported \$5,353 as amounts due to an affiliated company. These arrangements require that intercompany balances be settled within 30 days.

E. Guarantees or Contingencies for Related Parties

Not applicable

F. Management, Service Contracts, Cost Sharing Arrangements

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

G. Nature of Relationships that Could Affect Operations

All outstanding shares of the Company are owned by NCC.

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

Not applicable

NOTE 11 Debt

Not applicable

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

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

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

Not applicable

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

Outstanding Shares

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

B Dividend Rate of Preferred Stock

Not applicable

C-F Dividend Restrictions

Dividends on common stock are paid as declared by the Board of Directors of the Company. Under the insurance regulations of Delaware, the maximum amount of dividends which the Company may pay to shareholders is limited to its earned surplus at the end of the prior year. At December 31, 2022, the Company had earned surplus of \$2,497,426. Furthermore, the maximum amount of dividends which the Company may pay without prior approval of the Department is limited to the greater of 10% of the most recent year-end policyholders' surplus or net income, excluding realized capital gains. Accordingly, the Company maximum dividend that may be paid at January 1, 2023 without prior approval is \$2,497,426.

G-M

Not applicable

NOTE 14 Liabilities, Contingencies and Assessments

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

Not applicable

G. All Other Contingencies

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

NOTE 15 Leases

Not applicable

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

Not applicable

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

A., B.

Not applicable

C. Wash Sales

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

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

Not applicable

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

Not applicable

NOTE 20 Fair Value Measurements

Α.

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

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

- U.S. government determination of direct versus indirect government support and whether any contingencies exist with respect to the timely payment of principal and interest.
- All other governments estimates of appropriate market spread versus underlying related sovereign treasury curves dependent on liquidity and direct or contingent support.
- Corporate bonds, which are included in Industrial and miscellaneous bonds overall credit quality, including assessments of the level and variability of:
 economic sensitivity; liquidity; corporate financial policies; management quality; regulatory environment; competitive position; ownership; restrictive
 covenants; and security or collateral.
- Municipal bonds, which are included in States, territories and possessions; Political subdivisions of states, territories and possessions; and Special revenue
 and special assessment obligations overall credit quality, including assessments of the level and variability of: sources of payment such as income, sales
 or property taxes, levies or user fees; credit support such as insurance; state or local economic and political base; natural resource availability; and
 susceptibility to natural or man-made catastrophic events such as hurricanes, earthquakes or acts of terrorism.
- Residential mortgage-backed securities, U.S. agency pass-thrus and collateralized mortgage obligations ("CMOs") which are included in U.S. governments
 and Special revenue and special assessment obligations estimates of prepayment speeds based upon: historical prepayment rate trends; underlying
 collateral interest rates; geographic concentration; vintage year; borrower credit quality characteristics; interest rate and yield curve forecasts; government
 or monetary authority support programs; tax policies; and delinquency/default trends.
- Residential mortgage-backed securities, non-agency CMOs, which are included in Industrial and miscellaneous bonds estimates of prepayment speeds based upon: historical prepayment rate trends; underlying collateral interest rates; geographic concentration; vintage year; borrower credit quality characteristics; interest rate and yield curve forecasts; government or monetary authority support programs; tax policies; delinquency/default trends; and severity of loss upon default and length of time to recover proceeds following default.
- Commercial mortgage-backed securities, which are included in Industrial and miscellaneous bonds overall credit quality, including assessments of the value and supply/demand characteristics of: collateral type such as office, retail, residential, lodging, or other; geographic concentration by region, state, metropolitan statistical area and locale; vintage year; historical collateral performance including defeasance, delinquency, default and special servicer trends; and capital structure support features.
- Asset-backed securities, which are included in Industrial and miscellaneous bonds overall credit quality, including assessments of the underlying
 collateral type such as credit card receivables, auto loan receivables and equipment lease receivables; geographic diversification; vintage year; historica
 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 Practicable (Carrying Value)
Bonds Cash and Short-Term	\$ 50,362,145	\$	55,076,721	\$ 5,245,976	\$ 45,116,169	\$ -	\$ -	\$ -
Investments	\$ 202.849	\$	202.849	\$ 202.849	\$ _	\$ _	\$ -	\$ -

D., E.

Not applicable

NOTE 21 Other Items

A. Unusual or Infrequent Items

Not applicable

B. Troubled Debt Restructuring: Debtors

Not applicable

C. Other Disclosures

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

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

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-transferable Tax Credits

Not applicable

F. Subprime Mortgage Related Risk Exposure

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

G. Insurance-Linked Securities (ILS) Contracts

Not applicable

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

Not applicable

NOTE 22 Events Subsequent

Not applicable

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables

No change

B. Reinsurance Recoverable in Dispute

Not applicable

C. Reinsurance Assumed and Ceded

No change

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

Not applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not applicable

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Not applicable

NOTE 26 Intercompany Pooling Arrangements

Not applicable

NOTE 27 Structured Settlements

Not applicable

NOTE 28 Health Care Receivables

Not applicable

NOTE 29 Participating Policies

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves

\$ -

2. Date of the most recent evaluation of this liability

03/31/2023

3. Was anticipated investment income utilized in the calculation?

Yes [X] No []

NOTE 31 High Deductibles

Not applicable

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

Not applicable

NOTE 33 Asbestos/Environmental Reserves

Not applicable

NOTE 34 Subscriber Savings Accounts

Not applicable

NOTE 35 Multiple Peril Crop Insurance

Not applicable

NOTE 36 Financial Guaranty Insurance

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring the filing of Disclo Domicile, as required by the Model Act?					Yes [] No [Х]
1.2	If yes, has the report been filed with the domiciliary state?					Yes [] No []
2.1	Has any change been made during the year of this statement in the charter, by-laws, art reporting entity?					Yes [] No [Х]
2.2	If yes, date of change:				····			
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of is an insurer?					Yes [X]] No []
3.2	Have there been any substantial changes in the organizational chart since the prior quar	rter end?				Yes [] No [Х]
3.3								
3.4						Yes [X]	1 No [1
3.5							944695	•
4.1	Has the reporting entity been a party to a merger or consolidation during the period cove							X 1
4.2		-						,
	1 Name of Entity	2 IAIC Company Code	3 State of Domicile					
	· · · · · · · · · · · · · · · · · · ·							
5.	If the reporting entity is subject to a management agreement, including third-party admin in-fact, or similar agreement, have there been any significant changes regarding the terr If yes, attach an explanation.	nistrator(s), managing	general agent(s), attr r principals involved?	orney- ? Y	'es [] No [] N/	/A [X]
6.1	State as of what date the latest financial examination of the reporting entity was made or	r is being made			·····_	12/3	1/2019	
6.2	State the as of date that the latest financial examination report became available from e date should be the date of the examined balance sheet and not the date the report was					12/3	1/2019	
6.3	State as of what date the latest financial examination report became available to other s the reporting entity. This is the release date or completion date of the examination repordate).	t and not the date of the	ne examination (bala	nce shee	et	02/2	2/2021	
6.4	By what department or departments? Delaware Insurance Department							
6.5	Have all financial statement adjustments within the latest financial examination report be statement filed with Departments?				es [] No [] N/	'A [X]
6.6	Have all of the recommendations within the latest financial examination report been com-	nplied with?		۱۱	'es [] No [] N/	'A [X]
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (included revoked by any governmental entity during the reporting period?					Yes [] No [Х]
7.2	If yes, give full information:							
8.1	Is the company a subsidiary of a bank holding company regulated by the Federal Reserv	ve Board?				Yes [] No [Х]
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.							
8.3						Yes [X]] No []
8.4	If response to 8.3 is yes, please provide below the names and location (city and state of regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Com Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and ide	ptroller of the Current	y (OCC), the Federa	al Deposi				
	1	2	3_	4	5	6		
	Affiliate Name Loc Opus Investment Management, Inc	cation (City, State)		OCC	FDIC	SEC YES		
			1 1			1		

GENERAL INTERROGATORIES

9.1	Are the serior officers (principal executive onlice), principal inflation officers in principal inflation officers of controlled includes the following standards?	ersonal an	d professional	Yes [Х]	No []
9.11	(e) Accountability for adherence to the code. If the response to 9.1 is No, please explain:						
9.2 9.21	Has the code of ethics for senior managers been amended?			_]	No []	X]
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 lf yes, indicate any amounts receivable from parent included in the Page 2 amount:						
	INVESTMENT						
	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or o use by another person? (Exclude securities under securities lending agreements.)]	No []	X]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:						
13. 14.1 14.2	Amount of real estate and mortgages held in short-term investments:						
		Bo Ca	1 rior Year-End pok/Adjusted arrying Value	E	Book/	2 nt Qua Adjust ng Val	ed
	Bonds			\$			
	Preferred Stock			\$			
	Common Stock			\$ \$			
	Mortgage Loans on Real Estate			\$			
	All Other			\$			
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)			\$			
	Total Investment in Parent included in Lines 14.21 to 14.26 above			\$			
15.1 15.2	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		Yes	[] No	-	-	-
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement da						
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2			\$			0
	16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL,						
	16.3 Total payable for securities lending reported on the liability page.						

GENERAL INTERROGATORIES

			or Safekeeping Agreements uirements of the NAIC Finan					Yes		•	•
		1 Name of Custodi	an(s)		С	2 ustodian Addı	ress				
	Bank of New York Mel			225 Liberty S							
7.2	For all agreements that location and a comple		the requirements of the NAIC	C Financial Condi	ion Examiners	Handbook, p	rovide the name,				
	1 Name(·	2 Location(s)		Co	3 omplete Expla	nation(s)				
7.3 7.4	Have there been any of If yes, give full information		me changes, in the custodia	an(s) identified in 1	7.1 during the	current quarte	er?	Yes	[] N	0 [X
	1 Old Custo	odian	2 New Custodian	Date o	3 f Change		4 Reason				
			New Gustoulan								
7.5	make investment deci	sions on behalf of the	etment advisors, investment reporting entity. For assets ent accounts"; "handle secu	that are managed							
	Opus Investment Mana	Name of Firm or agement, Inc	Individual	Affiliati							
			the table for Question 17.5, ore than 10% of the reporting					Yes	; []	No [
			th the reporting entity (i.e. de					Yes	; []	No [
7.6	For those firms or inditable below.	viduals listed in the ta	able for 17.5 with an affiliation	n code of "A" (affil	ated) or "U" (u	naffiliated), pi	rovide the information for t	he			
	1		2		3					5	
							4			estn	
	Central Registration Depository Number	N	ame of Firm or Individual		Legal Entity Id	entifier (LEI)	Registered With		Man Agı (IM	age reen A) F	ment nent iled
	Depository Number	Opus Investment Mar	ame of Firm or Individual	5	Legal Entity Id	entifier (LEI) LM0S85			Man Agı	age reen A) F	ment nent iled
3.1 3.2	Depository Number 107569	Opus Investment Mar	agement, Inc	5	Legal Entity Id 49300UFGZJWL1	entifier (LEI) LM0S85	Registered With		Man Agı (IM DS	age reen A) F	ment nent Filed
	Depository Number 107569 Have all the filing requ If no, list exceptions: By self-designating 50 a. Documentation security is not a b. Issuer or obligo c. The insurer has	Opus Investment Mar	agement, Inc	al of the NAIC Inventional of	Legal Entity Id 49300UFGZJWL1 stment Analys for each self-de ist or an NAIC	entifier (LEI) LM0885 is Office been esignated 5GI CRP credit ra	Registered With SEC followed? security: ating for an FE or PL	Yes	Man Agi (IM DS	age reen A) F	ment nent Filed
3.2	Depository Number 107569	Opus Investment Mar irrements of the Purp ir	ring entity is certifying the for a full credit analysis of the set tracted interest and principal nof ultimate payment of all collections are conting entity is certifying the following entity is certifying entity is certifying the following entity is certifying the following entity is certifying the following entity is certifying entity is certified entity is certified	al of the NAIC Inventional of the NAIC Inventional of the NAIC Inventional of the NAIC Inventional of the NAIC CREST of	Legal Entity Id 49300UFGZJWL1 stment Analys for each self-dedicts or an NAIC and principal. s of each self-dedicts or an self-dedicts or sel	entifier (LEI) LM0385 is Office been esignated 5GI CRP credit ra designated PL ecurity. pacity as a NI ce regulators.	Registered With SEC	Yes	Man Agi (IM DS	age reen A) F	ment nent filed
9.	Depository Number 107569	Opus Investment Mar irrements of the Purp ir	ring entity is certifying the foa full credit analysis of the set tracted interest and principal n of ultimate payment of all classecurities? corting entity is certifying the foal classecurities?	al of the NAIC Inventional of the NAIC Inventional of the NAIC Inventional of the NAIC Inventional of the NAIC CREST of	Legal Entity Id 49300UFGZJWL1 stment Analys for each self-dedicts or an NAIC and principal. s of each self-dedicts or an self-dedicts or sel	entifier (LEI) LM0385 is Office been esignated 5GI CRP credit ra designated PL ecurity. pacity as a NI ce regulators.	Registered With SEC	Yes	Man Agi (IM DS	age reen A) F	ment nent filed
9.	Depository Number 107569	Opus Investment Mar	ring entity is certifying the fo a full credit analysis of the set tracted interest and principal n of ultimate payment of all collections of the securities? orting entity is certifying the following entity is certifying entity is certifying entity in the following entity is certifying the following entity is certifying entity in the securities?	al of the NAIC Investigation in the NAIC Investigation in the NAIC Investigation in the NAIC Investigation in the NAIC CREST of the PL security with the PL security with the PL security is certification of the NAIC CREST of the PL security with the PL security	Legal Entity Id 49300UFGZJWL1 stment Analys for each self-de cist or an NAIC and principal. s of each self-de corted for the s in its legal car of the SVO. fying the follow corted for the s AIC CRP in its	entifier (LEI) LM0585 is Office been esignated 5GI CRP credit ra designated PL ecurity. pacity as a NI ce regulators. ving elements ecurity. legal capacity	Registered With SEC	Yes	Man Agi (IM DS	age reen A) F	ment nent filed

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If yes, attach a	entity is a memin explanation.			Ū	·				'es [] No [] N/A [X]
2.		•		or portion thereo	of, reinsured?					Yes []	No [X]
3.1	Have any of th	e reporting entity	y's primary reins	urance contract	s been cancele	ed?				Yes []	No [X]
3.2	If yes, give full	and complete in	formation theret	to.							
4.1	(see Annual St	liabilities for unp tatement Instruc r than zero?	tions pertaining	to disclosure of	discounting for	definition of " ta	abular reserves") discounted a	t a rate of	Yes []	No [X]
4.2	If yes, complet	e the following s	chedule:								
				-	TOTAL DI					EN DURING PE	
Line	1 of Business	2 Maximum Interest	3 Discount Rate	4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 TOTAL	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 TOTAL
		0.0	0.000	0	0	0	0	0	()	0
			TOTAL	0	0	0	0	0	() (
5.	5.2 A&H cost of	percent	cent								0.000
	5.3 A&H exper	nse percent excl	uding cost conta	inment expense	es						0.000
6.1	Do you act as	a custodian for h	nealth savings a	ccounts?						Yes []	No [X]
6.2	If yes, please p	provide the amou	unt of custodial f	unds held as of	the reporting d	ate			\$		
6.3	Do you act as	an administrator	for health savin	gs accounts?						Yes []	No [X]
6.4	If yes, please p	provide the balar	nce of the funds	administered as	s of the reportin	g date			\$		
7.	Is the reporting	g entity licensed	or chartered, reg	gistered, qualifie	ed, eligible or w	riting business i	n at least two st	ates?		Yes [X]	No []
7.1		reporting entity								Yes []	No []

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

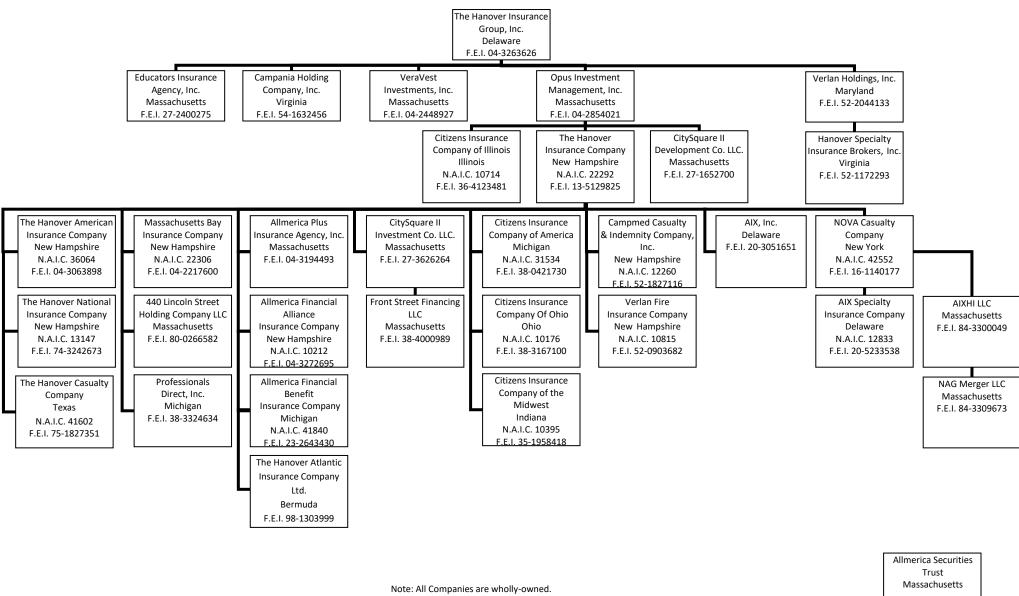
		Showing All New Reinsurers - Current Year to Da	ate		
1 NAIC	2 ID	Showing All New Reinsurers - Current Year to Da 3 Domiciliary		6 Certified Reinsurer	7 Effective Date of Certified Reinsurer
Company Code	Number	Name of Reinsurer Jurisdiction	Type of Reinsurer	Rating (1 through 6)	Rating
		Table 51 (and 51)	Type of Normana.	(: uoug.: o)	
		NONE			

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

		- 1		Date - Allocated	Direct Losses Paid (Deduction Columns)	Direct Less	aa I Innaid
		1 Active	Direct Premi	ums Written 3	Direct Losses Paid (Deducting Salvage) 5	Direct Loss 6	es Unpaid 7
		Status	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
	States, etc.	(a)	To Date	To Date	To Date	To Date	To Date	To Date
1.	AlabamaAL	E	395,500	374,393	589,941	274,468		1,989,171
2.	Alaska AK	E		94 , 159	111	15,931	374,089	604,525
3.	Arizona AZ	E		537,337	209,544	950,756	, - ,	2,807,734
4.	Arkansas AR	E	98,423	90,862	12,871	614,513	,	497,923
5.	CaliforniaCA	<u>E</u>		5,649,695	4,939,128	2,406,495	33,584,142	37,021,728
6.	Colorado CO	E	,	854,339	381,049	139,629		
7.	Connecticut CT	E		447,992	352,664		.,,	
8.	Delaware DE	D		25,481	0	11,500		173,653
9.	District of Columbia DC	E		136,424	33,912	0		455,533
10.	FloridaFL	E		3,910,959	559,974			21,642,805
11.	Georgia GA	E		2,203,348	70,580	502,223	4,603,594	3,973,509
12.	Hawaii HI	E	,	815,809	26,217			1,532,543
13.	IdahoID	E		204,976	1,977	120,844		375, 172
14.	IllinoisIL	E		1,299,412	543, 167	660,738	4,908,171	
15.	Indiana IN	E	,	595,435	27,688	36,628		1,758,978
16.	lowaIA	E		384,508	327	1,868,807	, ,	2,990,493
17.	Kansas KS	E		38,480	797	(2,500)		173, 178
18.	Kentucky KY	E		164,981	4,889	1,178	820,427	986, 157
19.	LouisianaLA	E	, ,	700,775	480,074	36,950	, , .	5,549,504
20.	Maine ME	E		221,587	13,213	0		709,270
21.	Maryland MD	E		265,263	15,290	5,674	922,275	1,040,322
22.	Massachusetts MA	E	, ,	1,593,155	311,516	2,052,556		6,580,822
23.	MichiganMI	E		1,301,810	168,818	148,768	, -,	3,593,260
24.	Minnesota MN	E		312,003	268,007	75,815	2,464,856	2,582,543
25.	MississippiMS	E		214,255	55,878	(1,000)		941,895
26.	MissouriMO	E	. ,	358,673	1,358	356,819	779,768	
27.	Montana MT	E	,	374,986	54 , 128	14,700	353,962	258,276
28.	NebraskaNE	E		511, 124	0	18,583	451,610	344,288
29.	NevadaNV	E		521,989	13,418	(27, 145)	- , -	530,437
30.	New Hampshire NH	E		173,326	65,478	2,920	1,349,202	882,697
31.	New Jersey NJ	E		2,335,619	337, 148	27,934	13,378,640	7,906,208
32.	New MexicoNM	E		142,362	313,605	5,877		810,271
33.	New York NY	E	5,692,426	6,666,741	292,025	886,287	34,057,245	24,356,143
34.	North CarolinaNC	E		596,598	199,368	42,305	, ,	1,800,339
35.	North DakotaND	E		75,043	144,519	0	296,147	366,068
36.	Ohio OH	E	. , .	432,336	143,984	11,238	2,672,833	2,667,047
37.	Oklahoma OK	E		78, 177	45,788	191,903	436,683	631, 195
38.	Oregon OR	E		1,061,115	292,252			1,605,724
39.	PennsylvaniaPA	E		2,319,320	510,379	351,411	, ,	9,794,917
40.	Rhode IslandRI	E	369,528	352,582	921,516	0	3,588,891	2,073,264
41.	South Carolina SC	E	192,998	341,734	320,849	66,823	2,686,859	2,689,384
42.	South Dakota SD	E		218,921	115,000	0	297,211	159,161
43.	Tennessee TN		603,690	400,386	408,485	391,449	3,902,269	4,859,978
44.	Texas TX			3,435,715	565,077		17,761,830	12,579,334
45.	UtahUT	E		482,808	1,792		1,162,749	638,763
46.	Vermont VT	E		175,054	57, 114	299	1,174,373	1,094,436
47.	VirginiaVA	E		2,452,750	3,538		3,247,510	2,422,090
48.	WashingtonWA		1,058,581	1,261,206	1,064,670			
49.	West VirginiaWV		132,456	61,058	0	, -	682,047	642,131
50.	Wisconsin WI			430 , 113	7,138		, - ,-	2,166,081
51.	WyomingWY	E		23, 162	955,000			917,940
52.	American Samoa AS		0	0	0	0	0	0
53.	Guam GU	N		0	0	0	0	0
54.	Puerto RicoPR	N		0	0	0	0	0
55.	U.S. Virgin Islands VI	N	0	0	0	0	0	0
56.	Northern Mariana IslandsMP	N	0	0	0	0	0	0
57.	Canada CAN			0	0	0	0	0
58.	Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59.	Totals DETAILS OF WRITE-INS	XXX	44,633,337	47,720,336	15,901,261	17,891,383	221,846,341	197,818,694
58001.		XXX						
		XXX						
58002.		XXX						
	Summary of remaining write-ins for Line 58 from							
58999.	overflow page Totals (Lines 58001 through	XXX	0	0	0	0	0	0
(-) A -4:	58003 plus 58998)(Line 58 above) e Status Counts:	XXX	0	0	0	0	0	0

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

															$\overline{}$
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Туре	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.Š. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
ode	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No))
	The Hanover Insurance Group		80-0266582				440 Lincoln Street Holding Company LLC	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N0	
	The Hanover Insurance Group		84-3300049				AIXHI LLC	MA	NI A	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
88	The Hanover Insurance Group	12833	20-5233538				AIX Specialty Insurance Company	DE	RE	Nova Casualty Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		20-3051651				AIX, Inc	DE	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
88	The Hanover Insurance Group	10212	04-3272695				Allmerica Financial Alliance Insurance Co	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
88	The Hanover Insurance Group	41840	23-2643430				Allmerica Financial Benefit Insurance Co	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		04-3194493				Allmerica Plus Insurance Agency, Inc	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group						Allmerica Securities Trust	MA	NIA	The Hanover Insurance Group, Inc	Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		54-1632456				Campania Holding Company, Inc	VA	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
38	The Hanover Insurance Group	12260	52-1827116				Campmed Casualty & Indemnity Co. Inc	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
38	The Hanover Insurance Group	31534	38-0421730				Citizens Insurance Company of America	MI	IA	The Hanover Insurance Company	Ownership, Board, Management	. 100.000	The Hanover Insurance Group, Inc	NO	
38	The Hanover Insurance Group	10714	36-4123481				Citizens Insurance Company of Illinois	IL	IA	Opus Investment Management, Inc	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	J
38	The Hanover Insurance Group	10176	38-3167100				Citizens Insurance Company of Ohio	0H	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
38	The Hanover Insurance Group	10395	35-1958418				Citizens Insurance Company of the Midwest	IN	IA	The Hanover Insurance Company	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-1652700				CitySquare II Development Co., L.L.C	MA	NIA	Opus Investment Management, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-3626264				CitySquare II Investment Co., L.L.C	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management	100 . 000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		27-2400275				Educators Insurance Agency, Inc	MA	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		38-4000989				Front Street Financing LLC	MA	NIA	CitySquare II Investment Co. LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		52-1172293				Hanover Specialty Insurance Brokers, Inc	VA	NIA	Verlan Holdings, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
88	The Hanover Insurance Group	22306	04-2217600				Massachusetts Bay Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		84-3309673				NAG Merger LLC	MA	NI A	AIXHI LLC	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
38	The Hanover Insurance Group	42552	16-1140177				NOVA Casualty Company	NY	UDP	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		04-2854021				Opus Investment Management, Inc	MA	UIP	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		38-3324634				Professionals Direct, Inc.	MI	NIA	The Hanover Insurance Company	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc	NO	
38	The Hanover Insurance Group		04-3063898				The Hanover American Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		98-1303999				The Hanover Atlantic Insurance Company Ltd.	BMU	I A	The Hanover Insurance Company	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc	YES	
38	The Hanover Insurance Group	41602	75-1827351				The Hanover Casualty Company	TX	IA		Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc	NO	.
88	The Hanover Insurance Group		13-5129825				The Hanover Insurance Company	NH	UIP	Opus Investment Management, Inc	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc	NO	
88	The Hanover Insurance Group		04-3263626			New York Stock Exchange .	The Hanover Insurance Group, Inc	DE	UIP			0.000		NO	.
88	The Hanover Insurance Group	13147	74-3242673				The Hanover National Insurance Company	NH	IA		Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		04-2448927				VeraVest Investments, Inc.	MA	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	
88	The Hanover Insurance Group	10815	52-0903682				Verlan Fire Insurance Company	NH	IA	The Hanover Insurance Company	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc	NO	
	The Hanover Insurance Group		52-2044133				Verlan Holdings, Inc	MD	NIA	The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	NO	.

_					\	
	Asterisk			Exp	a n	

PART 1 - LOSS EXPERIENCE

	Line of Business	1 Direct Premiums Earned	current Year to Date 2 Direct Losses Incurred	3 Direct Loss Percentage	4 Prior Year to Date Direct Loss Percentage
1.	Fire	7,674,136	1,944,292	25.3	49.
2.1	Allied Lines			12.8	36.
2.2	Multiple peril crop			0.0	0.
2.3	Federal flood		0	0.0	0.
2.4	Private crop		0		0.
2.5	Private flood		26		0
3.	Farmowners multiple peril		0		0.
4.	Homeowners multiple peril				0.
5.1	Commercial multiple peril (non-liability portion)		951,715		54
5.2	Commercial multiple peril (liability portion)		1,845,908		38
6.	Mortgage guaranty		0		0.
8.	Ocean marine		0		0.
9.	Inland marine				16.
10.	Financial guaranty		000,144		0.
11.1	Medical professional liability - occurrence		(68,478)		
11.2	Medical professional liability - claims-made	· ·	709,962		
	Earthquake		0		0
12.	Comprehensive (hospital and medical) individual				0
13.1 13.2	Comprehensive (hospital and medical) individual				0
			0		
14.	Credit accident and health		0		0.
15.1	Vision only				0.
15.2	Dental only		0		0.
15.3	Disablity income		0		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			0.0	0.
17.1	Other liability - occurrence			43.9	41.
17.2	Other liability - claims-made			29.6	29.
17.3	Excess workers' compensation			0.0	45.
18.1	Products liability - occurrence	2,120,188	1,394,374	65.8	33.
18.2	Products liability - claims-made				
19.1	Private passenger auto no-fault (personal injury protection)				
19.2	Other private passenger auto liability				
19.3	Commercial auto no-fault (personal injury protection)				
19.4	Other commercial auto liability				
21.1	Private passenger auto physical damage	0	0	0.0	0.
21.2	Commercial auto physical damage	144	133	92.4	45.
22.	Aircraft (all perils)	0	0	0.0	0.
23.	Fidelity	825	115	13.9	0.
24.	Surety	0	0	0.0	0.
26.	Burglary and theft	0	0	0.0	0.
27.	Boiler and machinery	172,135	0	0.0	0.
28.	Credit		0	0.0	0.
29.	International	0	0	0.0	0.
30.	Warranty				
31.	Reinsurance - Nonproportional Assumed Property				
32.	Reinsurance - Nonproportional Assumed Liability				
33.	Reinsurance - Nonproportional Assumed Financial Lines				
34.	Aggregate write-ins for other lines of business	_	0	0.0	0.
35.	Totals	45,940,208	15,580,147	33.9	37.
	DETAILS OF WRITE-INS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,	33.0	37.
3401.	DETAILS OF WRITE-INS				
3401. 3402.					
3403.	Summary of remaining write-ins for Line 34 from overflow page				
3498.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			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			
2.1	Allied Lines	1,964,294	1,964,294	1,810,568
2.2	Multiple peril crop			0
2.3	Federal flood		0	0
2.4	Private crop			0
2.5	Private flood			0
3.	Farmowners multiple peril			0
4.	Homeowners multiple peril			0
5.1	Commercial multiple peril (non-liability portion)			3,169,950
5.2	Commercial multiple peril (liability portion)			3,640,699
6.	Mortgage guaranty			0
8.	Ocean marine			0
9.	Inland marine			1,906,437
10.	Financial guaranty			0
11.1	Medical professional liability - occurrence	′	/ -	412,796
11.2	Medical professional liability - claims-made			3,962,880
12.	Earthquake			0
13.1	Comprehensive (hospital and medical) individual			0
13.2	Comprehensive (hospital and medical) group			0
14.	Credit accident and health			0
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
15.9	Other health			0
16.	Workers' compensation			0
17.1	Other liability - occurrence			14,144,078
17.2	Other liability - claims-made			
17.3	Excess workers' compensation			0
18.1	Products liability - occurrence		2,516,417	2,471,178
18.2	Products liability - claims-made			0
19.1	Private passenger auto no-fault (personal injury protection)			0
19.2	Other private passenger auto liability			0
19.3	Commercial auto no-fault (personal injury protection)			83
19.4	Other commercial auto liability			31,117
21.1	Private passenger auto physical damage			0
21.2	Commercial auto physical damage			516
22.	Aircraft (all perils)			0
23.	Fidelity			0
24.	Surety			0
26.	Burglary and theft			0
27.	Boiler and machinery			125 , 145
28.	Credit			0
29.	International			0
30.	Warranty			0
31.	Reinsurance - Nonproportional Assumed Property			
32.	Reinsurance - Nonproportional Assumed Liability			
33.	Reinsurance - Nonproportional Assumed Financial Lines		XXX	XXX
34.	Aggregate write-ins for other lines of business		0	0
35.	Totals	44,633,337	44,633,337	47,720,336
3401.	DETAILS OF WRITE-INS			
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page			0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0

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

	1	2	3	4	5	6	7	8	9	10	11	12	13
											Prior Year-End	Prior Year-End	
								Q.S. Date Known			Known Case Loss	IBNR Loss and	Prior Year-End
			T		2023 Loss and		Q.S. Date Known				and LAE Reserves	LAE Reserves	Total Loss and
		District	Total Prior	2023 Loss and	LAE Payments on		Case Loss and	LAE Reserves on		T. (.) (0.0)	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 2023 Loss and LAE	LAE Reserves on Claims Reported		Q.S. Date IBNR	Total Q.S. Loss and LAE	(Savings)/ Deficiency	(Savings)/	Developed (Savings)/
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	Deficiency
	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)
	and Ext received	110001100	(0010: 1+2)	Tour End	Tour End	(0010. 110)	T HOL TOOL ENG	Thor Tour End	110001100	(00.0.7 + 0 + 0)	mindo con 1)	111111d0 001. 2)	(0010. 11112)
1. 2020 + Prior													
2. 2021													
3. Subtotals 2021 + Prior													
4. 2022					\								
5. Subtotals 2022 + Prior					<u></u>								
6. 2023	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.

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

STATEMENT AS OF MARCH 31, 2023 OF THE AIX SPECIALTY INSURANCE COMPANY OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

			_
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	54,670,095	52,533,413
2.	Cost of bonds and stocks acquired	726,050	7,050,364
3.	Accrual of discount	12,893	53,009
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	(11,914)
6.	Deduct consideration for bonds and stocks disposed of	322,228	4,911,303
7.	Deduct amortization of premium	10,089	48,070
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	4,596
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	55,076,721	54,670,095
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	55,076,721	54,670,095

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

	During the Current Quarter fo		erred Stock by NAIC	Designation				T
NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)		726,050	322,228	2,418	49,826,927 .	0	0	49,420,687
2. NAIC 2 (a)	5,249,408	0	0	386	5,249,794	0	0	5,249,408
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	54,670,095	726,050	322,228	2,804	55,076,721	0	0	54,670,095
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2		0	0	0	0	0	0	0
10. NAIC 3			0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	54,670,095	726,050	322,228	2,804	55,076,721	0	0	54.670.095

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

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

NONE

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

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

NONE

Schedule E - Part 2 - Verification - Cash Equivalents

NONE

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

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

NONE

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

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

NONE

EQ.

STATEMENT AS OF MARCH 31, 2023 OF THE AIX SPECIALTY INSURANCE COMPANY

SCHEDULE D - PART 3

Show All Long-Term	Danda and Staal	Acquired During the	Current Quarter

			OHOW AH I	Long-Term Bonds and Stock Acquired Duning the Current Quarter	!				
1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation,
									NAIC
									Designation
									Modifier
									and
									SVO
					Number of			Paid for Accrued	Admini-
CUSIP			Date		Shares of			Interest and	strative
Identification	Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
97705M-ZE-8	WISCONSIN ST		01/27/2023	GOLDMAN		230,000	230,000	1,391	1.B FE
0509999999. S	ubtotal - Bonds - U.S. States, Territories and Possessions					230,000	230,000	1,391	XXX
04636N-AF-0	ASTRAZENECA FINANCE LLC		03/02/2023	UBS			500,000 .		1.G FE
1109999999. S	ubtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					496,050	500,000	203	XXX
	otal - Bonds - Part 3					726,050	730,000	1,594	XXX
	otal - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. To						726,050	730,000	1,594	XXX
450999997. To	otal - Preferred Stocks - Part 3					0	XXX	0	XXX
	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
	otal - Preferred Stocks					0	XXX	0	XXX
	otal - Common Stocks - Part 3					0	XXX	0	XXX
	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
	otal - Common Stocks					0	XXX	0	XXX
5999999999. To	otal - Preferred and Common Stocks		•			0	XXX	0	XXX
			····						
			·····						
	F.I.I.								
6009999999 - T	otals					726,050	XXX	1,594	XXX

SCHEDULE D - PART 4

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

					Show All For	ng-Term Bo	nds and Sto	ck Sola, Rec	ieemea or C												
1	2	3	4	5	6	7	8	9	10	Ch	ange In Boo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current	Change in	Foreign					Bond		nation
												Year's	Book/	Exchange	Book/				Interest/		Modifier
									Prior Year			Other Than		Change in	Adjusted	Foreign			Stock	Stated	and
									Book/	Unrealized		Temporary	Carrying	Book	Carrying	Exchange			Dividends	Con-	SVO
CUSIP		_			Number of				Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-		Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on		(Loss) on	During	Maturity	strative
ification		eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion		13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
36179V-DN-7 G2 N			. 03/01/2023 .	Paydown		3, 181	3, 181	3,266		0	(176)		(176)	0	3, 181	0	0	0	16	. 01/20/2050 .	1.A
36179V-HF-0 G2 N			. 03/01/2023 .	Paydown		1,023	1,023	1,024	1,029	0	(6)	0	(6)	0	1,023	0	0	0	3	. 03/20/2050 .	1.A
36179V-ZQ-6 G2 N			. 03/01/2023 .	Paydown		7,351	7,351	7,668	7,676	0	(325)	0	(325)		7,351	0	0	0	24	. 12/20/2050 .	1.A
	2016-173 CT - CMO/RMBS		. 03/01/2023 .	Paydown		32,441	32,441	32,816	32,517	0	(76)	0	(76)	0	32,441	0	0	0	164	. 10/20/2045 .	1.A
	2020-013 HB - CMO/RMBS		. 03/01/2023 .	Paydown		9,721	9,721	9,989	9,984	0	(263)	0	(263)	0	9,721	0	0	0	49	. 12/20/2048 .	1.A
97705M-NW-1 WISC	Subtotal - Bonds - U.S. Governmer	าเร	. 01/27/2023 .	Adiustment		53,717	53,717	54,762 230.000	54,563 230.000	0	(846)	0	(846)		53,717	0	0	0	256	XXX . 05/01/2033 .	1.B FE
	Subtotal - Bonds - U.S. States, Ter	ritorio				230,000	230.000	230,000	230,000		0		0		230,000		0		1.391	XXX	XXX
3128MJ-YZ-7 FH G	,	попе	. 03/01/2023 .			4,425				0	(170)	0	(172)	ŭ	4,425	0	0	0	1,391		1.1
3128MJ-ZB-9 FH G	-		. 03/01/2023 .	Paydown					4,597		(172)		(1/2)						23	. 10/01/2046 . . 12/01/2046 .	1.8
3132WM-NJ-9 FH 0			. 03/01/2023 .			1.361					(5)		(5)							. 04/01/2046 .	1.4
	660453 - RMBS		. 03/01/2023 .	Paydown		16.958	16,958		17.111		(153)		(153)						102	. 01/01/2047 .	1.4
	660661 - RMBS		. 03/01/2023 .	Paydown		836	836	879	919	0	(83)	0	(83)		836	0		0	6	. 07/01/2046 .	1 4
	2012-129 TD - CMO/RMBS		. 03/01/2023 .	Paydown		507	507	511	513	0	(6)	0	(6)	0	507	0	0	0	2	. 05/25/2040 .	1 4
	2013-130 A - CMO/RMBS		. 03/01/2023 .	Paydown		1,475			1.458	0	17	0	17	0	1.475	0	0	0	6	. 01/25/2044 .	1 A
	4099 VB - CMO/RMBS		. 01/17/2023 .	Paydown		3.652		3,816		0	0	0	0	0		0	0	0	9	. 09/15/2033 .	1.A
31418C-CH-5 FN N			. 03/01/2023 .	Pavdown		4,583	4,583	4,741	4,803	0	(220)	0	(220)	0	4,583	0	0	0	22	. 10/01/2046 .	1.A
92813T-EE-6 VIRG	GINIA ST HSG DEV AUTH HOMEOWNERSHIP M		. 03/01/2023 .	Paydown		2,549	2,549	2,460		0	83	0	83	0	2,549	0	0	0	12	. 08/25/2042 .	1.B FE
0909999999999999	Subtotal - Bonds - U.S. Special Re	venue	es			38,511	38,511	39,053	39,116	0	(605)	0	(605)	0	38,511	0	0	0	200	XXX	XXX
2509999997. T	otal - Bonds - Part 4					322,228	322,228	323,815	323,679	0	(1,451)	0	(1,451)	0	322,228	0	0	0	1,847	XXX	XXX
2509999998. T	otal - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2509999999. T	otal - Bonds					322,228	322,228	323,815	323,679	0	(1,451)	0	(1,451)	0	322,228	0	0	0	1,847	XXX	XXX
4509999997. T	otal - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
450999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4509999999. T	otal - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997. T	otal - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	otal - Preferred and Common Sto	cks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 -	Totals					322,228	XXX	323,815	323,679	0	(1,451)	0	(1,451)	0	322,228	0	0	0	1,847	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	Book Ba	lance at End of Ead	ch Month	9
		-			Di	uring Current Quart	er	
			Amount of	Amount of	6	7	8	1
			Interest Received					
		Rate of	During Current	at Current				
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
Bank of New York Mellon New York, NY		0.000	0	0	354,595	548,469	198,376	XXX.
0199998. Deposits in 2 depositories that do not								
exceed the allowable limit in any one depository (See			_	_				
instructions) - Open Depositories	XXX	XXX	0	0	214,311	221,022	4,473	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	568,906	769,491	202,849	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	568,906	769,491	202,849	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
				•••••				
				•••••				
			•••••	•	•••••		•••••	
0599999. Total - Cash	XXX	XXX	n	0	568.906	769.491	202.849	XXX

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



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

		1	2	Direct Los	ses Paid	5	Direct Losses Unpaid		8	
				3	4		6	7	Direct	
	States, etc.	Direct Premiums Written	Direct Premiums Earned	Amount	No. of Claims	Direct Losses Incurred	Amount Reported	No. of Claims	Losses Incurred But Not Reported	
1.	AlabamaAL	0	0	0	0	0	0	0	0	
2.	AlaskaAK	0	0	0	0	0	0	0	0	
3.	ArizonaAZ	0	0	0	0	(464)	0	0	569	
4.	ArkansasAR	0	0	0	0	0	0	0	0	
5.	CaliforniaCA	0	6,919	0	0	(4,558)	0	0	(17,605)	
6.	Colorado CO	0	0	0	0	(664)	0	0	(1,377)	
7.	ConnecticutCT	0	0	0	0	(1,486)	0	0	(7,265)	
8.	Delaware	0	0	0	0	0	0	0	(416)	
9. 10.	District of ColumbiaDC FloridaFL	0	0	0	0	(17)	0	0	(416)	
11.	GeorgiaGA	0		0	0	(418)		0	(2.163)	
12.	Hawaii HI	0	0	0	0	0	0	0	0	
13.	IdahoID	0	0	0	0	(244)	0	0	(1,144)	
14.	IllinoisIL	0	0	0	0	0	0	0	(33)	
15.	IndianaIN	0	0	0	0	(2,052)	0	0	(9,543)	
16.	lowaIA	0	0	0	0	0	0	0	0	
17.	KansasKS	0	0	0	0	0	0	0	0	
18.	Kentucky KY	0	0	0	0	(262)	0	0	(1,281)	
19.	Louisiana LA	0	0	0	0	(5,605)	13,000	1	(13,471)	
20.	Maine ME	0	0	0	0	(129)	0	0	(667)	
21.	Maryland MD	0	0	0	0 0	(125)	0	0	(647)	
22.	Massachusetts MA	0	8.402	0		(884)	0	0	(4,568)	
23.	MichiganMI Minnesota MN	0	8,402		0	(9,208)	0	0	(22,945)	
24. 25.	Minnesota MN Mississippi MS				٥	(320)	0	0	(1,093)	
26.	MissouriMO	0		0	0	(3.569)	0	0	27 . 128	
27.	Montana MT	0	0	0	0	0	0	0	0	
28.	Nebraska NE	0	0	0	0	0	0	0	0	
29.	Nevada NV	0	0	0	0	0	0	0	0	
30.	New HampshireNH	0	0	0	0	(1,067)	0	0	(5,518)	
31.	New JerseyNJ	0	0	0	0	0	0	0	0	
32.	New Mexico NM	0	0	0	0	(608)	0	0	(2,818)	
33.	New YorkNY	0	0	0	0	(841)	0	0	(4,345)	
34.	North CarolinaNC	0	0	0	0	(1,363)	0	0	(6,924)	
35.	North DakotaND	0	0	0	0	0	0	0	0	
36.	Ohio OH	0	3,289	0	0	(2,496)	0	0	(10,143)	
37.	Oklahoma OK Oregon OR	0	0	0	0	(162)	0	0	(837)	
38. 39.	Oregon OR Pennsylvania PA	0	0	0	0	23	0		(72)	
40.	Rhode IslandRI	0	0	0	0	(90)		0	(464)	
41.	South Carolina	0	0		0	(1,030)		0	(5,015)	
	South DakotaSD	0	0	0	0	0	0	0	0	
	TennesseeTN	0	0	0	0	(5,037)	0	0	26, 124	
44.	TexasTX	0	4, 187	0	0	(6,424)		0	(11,471)	
45.	UtahUT	0	0	0	0	(200)	0	0	(1,001)	
46.	VermontVT	0	0	0	0	0	0	0	0	
	VirginiaVA	0	2,466	0	0	(1,554)	0	0	(6,016)	
	WashingtonWA	7,616	9,956	0	0	(4,630)		0	(16,025)	
	West Virginia WV	0	0	0	0	0	0	0	0	
	Wisconsin WI	0	0	0	0	(135)		0	(696)	
	WyomingWY	0	0 0	0	0	0	0	0	0	
	American Samoa AS Guam GU	0	•	0	0	0	0	0		
53. 54.	Puerto Rico	0	0	0	0	0	0	0	0	
	U.S. Virgin IslandsVI	0	0	0	0	0	0	0	o	
	Nothern Mariana IslandsMP	0	0		0	0	0	0	0	
	Canada CAN		0	0	0	0	0	0	0	
58.	Aggregate Other Aliens OT Totals	0 7,616	0 35,219	0	0	0 (55,707)	0	0	0 (102,432)	
58001.	DETAILS OF WRITE-INS			-		(**************************************			, , , , , , , , ,	
58001.										
58002.										
	Summary of remaining write-ins for Line 58 from overflow page		0		0	0	0	0	0	
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	0	0	0	0	0	0	0	0	



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

		1	2	Direct Lo		5		ses Unpaid	8
				3	4		6	7	Direct Losses
		Direct	Direct			Direct			Incurred
	Otata	Premiums	Premiums		No. of	Losses	Amount	No. of	But Not
-	States, etc.	Written 0	Earned0	Amount 0	Claims 0	Incurred0	Reported 0	Claims 0	Reported
	AlabamaAL AlaskaAK	0	0	0	0	0	0	0	
	Arizona	0		0		0		0	
	ArkansasAR	0	0	0	0	0	0	0	
	CaliforniaCA	0		0		0	0	0	
6.	Colorado CO	0		0		0	0	0	
	Connecticut	0	0	0	0	0	0	0	
	DelawareDE	0	0	0	0	0	0	0	0
	District of ColumbiaDC	0	0	0	0	0	0	0	0
	FloridaFL	0	0	0	0	0	0	0	0
	GeorgiaGA	0	0	0	0	0	0	0	0
	Hawaii HI	0	0	0	0	0	0	0	0
	IdahoID	0	0	0	0	0	0	0	0
	Illinois	0	0	0	0	0	0	0	0
	IndianaIN	0	0	0	0	0	0	0	0
	lowaIA	0	0	0	0	0	0	0	0
	KansasKS	0	0	0	0	0	0	0	0
	Kentucky KY	0	0	0	0	0	0	0	0
	LouisianaLA	0	0	0	0	0	0	0	0
	Maine ME	0	0	0	0	0	0	0	0
	Maryland MD	0	0	0	0	0	0	0	0
	MassachusettsMA	0	0	0	0	0	0	0	0
	MichiganMI	0	0	0	0	0	0	0	0
	Minnesota MN	0	0	0	0	0	0	0	0
	Mississippi MS	0	0	0	0	0	0	0	0
	MissouriMO	0	0	0	0	0	0	0	0
	Montana MT	0	0	0	0	0	0	0	0
	Nebraska NE	0	0	0	0	0	0	0	0
_	Nevada NV	0	0	0	0	0	0	0	0
	New HampshireNH	0	0	0	0	0	0	0	0
	New Jersey NJ	0	0	0	0	0	0	0	0
	New Mexico NM	0	0	0	0	0	0	0	0
	New York NY	0	0	0	0	0	0	0	0
	North CarolinaNC	0	0	0	0	0	0	0	0
1	North DakotaND	0	0	0	0	0	0	0	0
	Ohio OH	0	0	0	0	0	0	0	0
	Oklahoma OK	0	0	0	0	0	0	0	0
	Oregon OR	0	0	0	0	0	0	0	0
	PennsylvaniaPA	0	0	0	0	0	0	0	0
	Rhode IslandRI	0	0	0	0	0	0	0	0
	South CarolinaSC	0	0	0	0	0	0	0	0
	South DakotaSD	0	0	0	0	0	0	0	0
	TennesseeTN	0	0	0	0	0	0		0
	TexasTX	0	0	0	0	0	0	0	11.675
	Utah UT	0	0	0	0	0	0	0	0
-	VermontVT	0	0	0	0	0	0	0	0
	VirginiaVA	0	0	0	0	0	0	0	0
	WashingtonWA	0	0	0	0	0	0	0	0
	West Virginia WV	0	0	0	0	0	0	0	0
	Wisconsin WI	0	0	0	0	0	0	0	0
	WyomingWY	0	0	0	0	0	0	0	0
	American Samoa AS	0	0	0	0	0	0	0	0
	GuamGU	0	0	0	0	0	0	0	0
	Puerto RicoPR	0	0	0	0	0	0	0	0
	U.S. Virgin IslandsVI	0	0	0	0	0	0	0	0
	Nothern Mariana IslandsMP	0	0	0	0	0	0	0	0
	Canada CAN	0	0	0	0	0	0	0	0
58.	Aggregate Other Aliens OT	0	0	0	0	0	0	0	0
	Totals	0	0	0	0	0	0	0	11,675
+	DETAILS OF WRITE-INS								
58002.									
58998.	Summary of remaining write-ins for Line 58 from overflow page		0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	0	0	0	0	0	0	0	0



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

			1	2	Direct Los	sses Paid	5	Direct Losses Unpaid		8
				_	3	4	1	6	7	Direct
	States, etc.		Direct Premiums Written	Direct Premiums Earned	Amount	No. of Claims	Direct Losses Incurred	Amount Reported	No. of Claims	Losses Incurred But Not Reported
1.	Alabama	Al	0	0	Amount	Ciairis	0	()	Olaillis 0	Neported
1	Alaska	AL		0	0		0	0	0	0
	Arizona	AZ		0	0		(17)	0	0	840
	Arkansas	AZ AR		0	0		0	0	0	049
5.	California	CA		0	(6.120)		(67.257)	0	0	3.854
6.	Colorado	CA		0	0, 120)		(186)	0	0	1.068
7.	Connecticut	CT	0	0	0	0	172	0	0	2.018
	Delaware	DE	0	0	0	0	34	0	0	460
	District of Columbia	DC		0	0	0	44	0	0	590
	Florida	FL	0	0	0		149	0	0	1.384
	Georgia	GA		0	0		166	0	0	2.216
	Hawaii	HI		0	0		0	0	0	0
	Idaho	ID		0	0		38	0	0	408
	Illinois	ו וו		0	0		(2.245)	0	0	2.808
	Indiana	IN		0	0	0	126	0	0	1.234
16.	lowa	IA	0	0	0	0	0	0	0	1,204
		KS		0	0		1	0	0	15
	Kansas	KS KY	0 N	0	0		98	0	0	1 270
	Kentucky	KY	0		0	٥	98	0	0	
	Louisiana	= .	0	0	0	0		0	0	
	Maine	ME	0	0	0	0	120	0	0	1,609
	Maryland	MD					41			
	Massachusetts	MA	0	0	0	0	217	0	0	2,981
	Michigan	MI	0	11,589	0	0	(5,459)	0		24,503
	Minnesota	MN	0	0	0	0	29	0	0	394
	Mississippi	MS	0	0	0	0	0	0	0	0
26.	Missouri	MO	0	0	0	0	(1,022)	0	0	1,224
27.	Montana	MT	0	0	0	0	0	0	0	0
28.	Nebraska	NE	0	0	0	0	0	0	0	0
29.	Nevada	NV	0	0	0	0	0	0	0	0
30.	New Hampshire	NH	0	0	0	0	217	0	0	2,986
31.	New Jersey	NJ	0	0	0	0	0	0	0	2
32.	New Mexico	NM	0	0	0	0	153	0	0	1,524
33.	New York	NY	0	0	0	0	290	0	0	3,871
34.	North Carolina	NC	0	0	0	0	254	0	0	3,269
35.	North Dakota	ND	0	0	0	0	0	0	0	0
36.	Ohio	OH	0	0	0	0	(2,068)	0	0	4,385
37.	Oklahoma	OK	0	0	0	0	0	0	0	0
38.	Oregon	OR	0	0	0	0	29	0	0	384
	Pennsylvania	PA	0	0	0	0	66	0	0	771
	Rhode Island	RI	0	0	0	0	83	0	0	1,107
	South Carolina		0	0	0	0	125	0	0	1.464
	South Dakota		0	0	0	0	0	0	0	0
	Tennessee	_	0	0	0	0		0	0	1,450
	Texas		0	0	0	0	(120)		0	3,998
	Utah		0	0	0	0	91	0	0	999
	Vermont		0	0	0	0	0	0	0	0
	Virginia		0	0	0	0	27	0	0	366
	Washington		0	0	0	0	17	0	0	221
	West Virginia		0	0	0	0	0	^	•	0
	-		0	•	_	•	0	_	0	
	Wyoming		0	0	0	0	0	0		0
	Wyoming		0	0	•	•	0		0	
	American Samoa			•	0			_	0	0
	Guam			0			0	0	0	0
	Puerto Rico		0	0	0	0	0	0	0	0
	U.S. Virgin Islands		0	0	0	0	0	0	0	0
	Nothern Mariana Islands		0	0	0	0	0	0	0	0
	Canada		0	0	0	0	0	0	0	0
	Aggregate Other Aliens Totals	OT	0 0	0 11,589	0 (6,120)	0	0 (75,190)	0	0	0 85,106
	DETAILS OF WRITE-INS									1
58001.										
58002.										
58003.										
	Summary of remaining wri 58 from overflow page		0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 throug 58998)(Line 58 above)		0	0	0	0	0	0	0	0



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

			1	2	Direct Lo	sses Paid	5	Direct Loss	ses Unpaid	. 8	
					3	4		6	7	Direct	
			Direct	Direct			Direct			Losses	
			Direct Premiums	Direct Premiums		No. of	Direct Losses	Amount	No. of	Incurred But Not	
	States, etc.		Written	Earned	Amount	Claims	Incurred	Reported	Claims	Reported	
1.	Alabama	AL	0	0	0	0	0	0	0	0	
2.	Alaska	AK	0	0	0	0	0	0	0	0	
3.	Arizona	AZ	0	0	0	0	(3,092)	0	0	39,850	
4.	Arkansas	AR	0	0	0	0	(20)	0	0	62	
5.	California	CA	46,330	36 , 163	0	0	(1,147)	22	2	119,358	
6.	Colorado	CO	222,565	201,661	188,607	2	(18,226)	126,503	6	275,950	
7.	Connecticut		22,519	79,572	0	0	8,393	0	0	217,504	
8.	Delaware	DE	89,005	30,729	0	0	123	44	1	8,271	
9.	District of Columbia	DC	0	0	0	0	(1,132)	0	0	23,571	
10.	Florida	FL	11,501	25,639	0	0	2,720	0	0	34,322	
11.	Georgia	GA	110,616	104,845	0	0	(2,910)	44	1	74,032	
12.	Hawaii		0	0	0	0	0	0	0	0	
13.	Idaho		67,573	5,634	0	0	(108)	0	0	6,436	
14.	Illinois		38 , 192	37,593	0	0	(1,391)	0	0	91,466	
15.	Indiana		29,549	27,443	0	0	(8)	0	0	128,821	
16.	lowa		0	375	0	0	(649)	0	0	6,955	
17.	Kansas		0	0	0	0	(15)	0	0	46	
18.	Kentucky		0	0	0	0	(438)	0	0	2,494	
19.	Louisiana		0	1,755	0	0	(6,075)	292,002	5	55,939	
20.	Maine		151,657	50,437	0	0	4,022	0	0	145,604	
21.	Maryland		205,814	145,419	0	0	(8,491)	143	4	177,293	
22.	Massachusetts		253,957	246,435	0	0	28,771	0	0	623,035	
23.	Michigan	MI	69,096	71,076	0	0	(1,358)	0	0	282,089	
24.	Minnesota	MN	46,643	173,290	66,000	1	(54,220)	210,044	3	408,852	
25.	Mississippi	MS	0	0	0	0	0	0	0	0	
26.	Missouri	MO	0	0	0	0	(710)	0	0	7, 186	
27.	Montana	MT	10,238	4,404	0	0	187	0	0	6,401	
28.	Nebraska	NE	0	0	0	0	0	0	0	0	
29.	Nevada	NV	0	0	0	0	0	0	0	0	
30.	New Hampshire	NH	59,850	151,031	0	0	(663)	330 , 112	7	278,054	
31.		NJ	97,380	95,714	0	0	(2,285)	675,000	5	258,077	
32.	New Mexico	NM	0	0	0	0	(160)	0	0	560	
33.	New York	NY	307,896	214,262	0	0	115,616	277 , 222	8	620,554	
34.	North Carolina	NC	115,374	76,872	150,000	1	(12,099)	945,068	6	126,547	
35.	North Dakota	ND	0	7,581	0	0	(160)	0	0	16,843	
36.	Ohio	OH	117,608	483,972	1,366	1	27,443	212, 165	8	620,453	
37.	Oklahoma	OK	0	0	0	0	0	0	0	0	
38.	Oregon	OR	(11,281)	66,045	0	0	7,763	0	0	201,313	
39.	Pennsylvania	PA	375, 142	359,112	0	0	187,941	613,429	17	575,237	
40.	Rhode Island	RI	208,658	145,045	0	0	37,662	1,581,191	15	224,945	
41.	South Carolina	SC	0	3	0	0	(1,170)	0	0	12,343	
42.	South Dakota	SD	73,963	17,600	0	0	854	0	0	15,689	
43.	Tennessee	TN	0	0	117,500	1	3,319	0	0	103,553	
44.	Texas	TX	541,619	534,073	35,000	1	170,060	1, 156, 319	21	607,212	
45.	Utah	UT	24,778	34 , 179	0	0	5,121	22	1	91,424	
46.	Vermont		44,012	66,439	0	0	3,025	0	0	130,015	
47.	Virginia	VA	714,711	314, 123	0	0	27,421	715,484	17	605,567	
48.	Washington		258,685	223, 139	0	0	258,948	260 , 132	5	257,909	
49.	West Virginia		0	0	0	0		0	0	0	
50.	Wisconsin		13,741	306	0	0	(478)	0	0	3,374	
51.	Wyoming		0	0	0	0	0	0	0	0	
52.	American Samoa	AS	0	0	0	0	0	0	0	0	
53.	Guam		0	0	0	0	0	0	0	0	
54.	Puerto Rico		0	0	0	0	0	0	0	0	
55.	U.S. Virgin Islands		0	0	0	0	0	0	0	0	
56.	Nothern Mariana Islands		0	0	0	0	0	0	0	0	
57.	Canada	CAN	0	0	0	0	0	0	0	0	
58.	Aggregate Other Aliens	OT	0	0	0	0	0	0	0	0	
59.	Totals		4,317,391	4,031,966	558,473	7	772,384	7,394,946	132	7,485,206	
	DETAILS OF WRITE-INS										
58001.											
58002.											
58003.										ļ	
	Summary of remaining writ	a_ine for Lina							[·	
	58 from overflow page		0	0	0	0	0	0	0	0	
58999.	Totals (Lines 58001 throug									Ì	
	58998)(Line 58 above)		0	0	0	0	0	0	0	0	