

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF JUNE 30, 2019

OF THE CONDITION AND AFFAIRS OF THE

Allmerica Financial Benefit Insurance Company

NAIC Group Code 0088 0088 NAIC Company Code 41840 Employer's ID Number 23-2643430

Organized under the Laws of	Michigan		, State of Domicile or Port of	Entry MI
Country of Domicile		United Sta	tes of America	
Incorporated/Organized	12/28/2000		Commenced Business	07/01/1976
Statutory Home Office	808 North Highlander	Way		Howell, MI, US 48843-1070
	(Street and Numbe	r)	(City of	r Town, State, Country and Zip Code)
Main Administrative Office			ncoln Street	
Worces	ster, MA, US 01653-0002	(Street a	and Number)	508-853-7200
	, State, Country and Zip Code)	1	,(A	stea Code) (Telephone Number)
Mail Address	440 Lincoln Street		. v	Vorcester, MA, US 01653-0002
	(Street and Number or P.O. B	ox)		Town, State, Country and Zip Code)
Primary Location of Books and Reco	ords	440 Li	ncoln Street	
		(Street a	and Number)	
	ster, MA, US 01653-0002			508-853-7200 8554476
(City or Town	, State, Country and Zip Code)		A)	rea Code) (Telephone Number)
Internet Website Address		WWW.HA	ANOVER.COM	
Statutory Statement Contact	Kathleen B.	Edwards		508-853-7200-8554476
KEDWA	(Nam ARDS@HANOVER.COM	ne)		(Area Code) (Telephone Number) 508-853-6332
	(E-mail Address)			(FAX Number)
		05	FICERS	
		UFI		
President	John Conner Roo	Executive Vice President & Treasurer		Ann Kirkpatrick Tripp #
Secretary				
		0	THER	
Mark Leo Berthiaume, Execut			astro, Executive Vice President	Jeffrey Mark Farber, Executive Vice President & CFO
J. Kendall Huber, Executive Vi	ice President & GC	Richard William Lave	y, Executive Vice President	Bryan James Salvatore, Executive Vice President
Warren Ellison Barnes # Jeffrey Mark Farber		DIRECTORS OR TRUSTEES Mark Leo Berthiaume		Kathleen Elizabeth deCastro
			ndall Huber	Paul John Mueller
John Conner Ro Mark Joseph Welz		Bryan Ja	mes Salvatore	Ann Kirkpatrick Tripp
wark Joseph Weiz				
State of Mas	ssachusetts			

SS: Worcester County of

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

50 , John Conner Roch President

Λ 5

inn

Charles Frederick Cronin Secretary

b. If no,

Ann Kirkpatrick Tripp

Executive Vice President & Treasurer

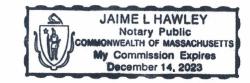
Subscribed and vorn to before me this 2nd day of

Jaime

Notary December 14, 2023



August, 2019



Yes [X] No []

- a. Is this an original filing?
 - 1. State the amendment number.
 - 2. Date filed
 - 3. Number of pages attached.

	AJC	SETS			
		1	Current Statement Date	3 Net Admitted Assets	4 December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2) 	Admitted Assets
			0		
	Stocks:				
	Preferred stocks				0
2		0	0	0	0
	Nortgage loans on real estate:				
3	.1 First liens	0	0	0	0
3		0	0	0	0
4. R	Real estate:				
4	.1 Properties occupied by the company (less \$0				
	encumbrances)	0	0	0	0
4	.2 Properties held for the production of income (less				
	\$0 encumbrances)	0	0	0	0
4	.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
F O	Cash (\$				
	(\$423) and short-term		_		
	investments (\$0)				
	Contract loans (including \$			0	0
	Derivatives		0	0	0
	Other invested assets			0	0
	Receivables for securities				
10. S	Securities lending reinvested collateral assets	0	0	0	0
11. A	Aggregate write-ins for invested assets	0	0	0	0
12. S	Subtotals, cash and invested assets (Lines 1 to 11)		0		
13. T	itle plants less \$0 charged off (for Title insurers				
0	ınly)	0	0	0	0
14. lr	nvestment income due and accrued		0		
	Premiums and considerations:				
1	5.1 Uncollected premiums and agents' balances in the course of collection	0	0	0	0
	5.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
1	5.3 Accrued retrospective premiums (\$0) and				
		0	0	0	0
10 0		0	0	0	0
	Reinsurance:	0	0	0	0
	6.1 Amounts recoverable from reinsurers		0	0	0
	6.2 Funds held by or deposited with reinsured companies		0		0
	6.3 Other amounts receivable under reinsurance contracts		0	0	0
	mounts receivable relating to uninsured plans		0	0	0
	Current federal and foreign income tax recoverable and interest thereon		0	0	0
	let deferred tax asset		0	0	0
	Guaranty funds receivable or on deposit		0	0	0
20. E	ectronic data processing equipment and software	0	0	0	0
21. F	urniture and equipment, including health care delivery assets				
	(\$0)		0	0	0
22. N	let adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. R	Receivables from parent, subsidiaries and affiliates		0		0
24. H	lealth care (\$	0	0	0	0
25. A	ggregate write-ins for other than invested assets	0	0	0	0
26. T	otal assets excluding Separate Accounts. Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)		0		
27. F	rom Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts		0	0	0
	otal (Lines 26 and 27)	50,960,094	0	50,960,094	50,361,565
D	DETAILS OF WRITE-INS				
1101					
1102.					
1103.					
1198. S	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
	otals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.					
2502.					
			+		
2503.			-		
	Summary of remaining write-ins for Line 25 from overflow page		0	0	C
	otals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	

ASSETS

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LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Statement Date	December 31, Prior Year
1.	Losses (current accident year \$	0	0
2.	Reinsurance payable on paid losses and loss adjustment expenses	0	0
3.	Loss adjustment expenses		
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		0
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		0
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		
7.2	Net deferred tax liability		
8.	Borrowed money \$0 and interest thereon \$0	0	0
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
	including warranty reserves of \$0 and accrued accident and health experience rating refunds		
	including \$0 for medical loss ratio rebate per the Public Health Service Act)		
10.	Advance premium	0	0
11.	Dividends declared and unpaid: 11.1 Stockholders	0	0
		-	0
12.	11.2 Policyholders		0
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$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.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		0
24.	Capital notes \$0 and interest thereon \$0		0
25.	Aggregate write-ins for liabilities	0	0
LU.			
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		19,464
	Total liabilities excluding protected cell liabilities (Lines 1 through 25) Protected cell liabilities		19,464
26.		26,801	
26. 27.	Protected cell liabilities		0
26. 27. 28.	Protected cell liabilities	26,801 0 26,801 0	
26. 27. 28. 29.	Protected cell liabilities	26,801 0 26,801 0 4,200,000	0
26. 27. 28. 29. 30.	Protected cell liabilities	26,801 0 26,801 0 4,200,000 0 0	
26. 27. 28. 29. 30. 31.	Protected cell liabilities	26,801 0 26,801 0 0 0 0 0 0	
26. 27. 28. 29. 30. 31. 32.	Protected cell liabilities	26,801 0 26,801 0 0 0 0 0 0 0 0 0 0 0 0	
 26. 27. 28. 29. 30. 31. 32. 33. 	Protected cell liabilities	26,801 0 26,801 0 0 0 0 0 0 0 0 0 0 0 0	
 26. 27. 28. 29. 30. 31. 32. 33. 34. 	Protected cell liabilities	26,801 0 26,801 0 _0	
 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 	Protected cell liabilities	26,801 0 26,801 0 _0	
 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 	Protected cell liabilities	26,801 0 26,801 0 0 0 0 0 0 0 0 0 0 0 13,733,293 0 _0	
 26. 27. 28. 30. 31. 32. 33. 34. 35. 36. 37. 	Protected cell liabilities Total liabilities (Lines 26 and 27) Aggregate write-ins for special surplus funds Common capital stock Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 36.2 0 Surplus as regards policyholders (Lines 29 to 35, less 36)	26,801 0 26,801 0 0 0 0 0 0 0 0 0 0 0 0 33,000,000 33,000,000 000 0 0 000 0 0 0000 0 0 0000 0 000000	
 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 	Protected cell liabilities Total liabilities (Lines 26 and 27) Aggregate write-ins for special surplus funds Common capital stock Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 36.2 0 shares preferred (value included in Line 30 \$ 0 Surplus as regards policyholders (Lines 29 to 35, less 36) Totals (Page 2, Line 28, Col. 3)	26,801 0 26,801 0 0 0 0 0 0 0 0 0 0 0 13,733,293 000 _0	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38.	Protected cell liabilities	26,801 0 26,801 0 0 0 0 0 0 0 0 0 0 33,000,000 33,293 000000	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. <u>38.</u> 2501. 2502. 2503.	Protected cell liabilities Total liabilities (Lines 26 and 27) Aggregate write-ins for special surplus funds Common capital stock Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) Totals (Page 2, Line 28, Col. 3) DETAILS OF WRITE-INS	26,801 0 	0 0 4,200,000 0000
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598.	Protected cell liabilities Total liabilities (Lines 26 and 27) Aggregate write-ins for special surplus funds Common capital stock Preferred capital stock Aggregate write-ins for other than special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 36.2 0 Surplus as regards policyholders (Lines 29 to 35, less 36) Totals (Page 2, Line 28, Col. 3) DETAILS OF WRITE-INS Summary of remaining write-ins for Line 25 from overflow page	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599.	Protected cell liabilities	26,801 0 	0 0 4,200,000 0000
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2903.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2902. 2903. 2998. 2999. 3201.	Protected cell liabilities	26,801 0 	
26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. <u>38.</u> 2501. 2502. 2503. 2598. <u>2599.</u> 2901. 2902. 2903. 2998. <u>2999.</u> 3201. 3202.	Protected cell liabilities	26,801 0 	

STATEMENT OF INCOME

r			0	0
		Current	2 Prior Year	3 Prior Year Ended
		Year to Date	to Date	December 31
4 1				
	remiums earned: .1 Direct (written \$	222 716 376	202 043 255	
	.2 Assumed (written \$			
	.3 Ceded (written \$			
	4 Net (written \$0)		0	0
	DEDUCTIONS:			
	osses incurred (current accident year \$0):			
	.1 Direct			
	2 Assumed			
	.3 Ceded			
	4 Net		0	0
	oss adjustment expenses incurred		0	0
4. O 5. A	Other underwriting expenses incurred ggregate write-ins for underwriting deductions		0 0	0
6. T	otal underwriting deductions (Lines 2 through 5)		0	
	let income of protected cells		0	0
8. N	let underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	0	0	0
0. 14				
9. N	let investment income earned	740.374	637.890	
	let realized capital gains (losses) less capital gains tax of \$		17,016	8,636
	let investment gain (loss) (Lines 9 + 10)			1,308,591
	OTHER INCOME	, ,	- ,	,- ,
	let gain or (loss) from agents' or premium balances charged off (amount recovered			
9	\$0 amount charged off \$0)		0	0
13. F	inance and service charges not included in premiums		0	0
	ggregate write-ins for miscellaneous income	0	0	0
15. T	otal other income (Lines 12 through 14)	0	0	0
16. N	let income before dividends to policyholders, after capital gains tax and before all other federal			
	and foreign income taxes (Lines 8 + 11 + 15)			
	lividends to policyholders	0	0	0
18. N	let income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	746 181	654 906	1,308,591
	ederal and foreign income taxes incurred	154,989	130,895	262,325
	let income (Line 18 minus Line 19)(to Line 22)	591,192	524,011	1,046,266
20. 1	CAPITAL AND SURPLUS ACCOUNT	001,102	024,011	1,040,200
21. S	urplus as regards policyholders, December 31 prior year	50,342,101	45,285,812	45,285,812
	let income (from Line 20)		, ,	1,046,266
23. N	let transfers (to) from Protected Cell accounts			
	hange in net unrealized capital gains (losses) less capital gains tax of \$0	0	0	0
25. C	change in net unrealized foreign exchange capital gain (loss)	0	0	0
26. C	change in net deferred income tax		0	
	change in nonadmitted assets		0	0
28. C	hange in provision for reinsurance		0	0
29. C	change in surplus notes	0	0	0
	urplus (contributed to) withdrawn from protected cells	0	0	0
31. C	Cumulative effect of changes in accounting principles	0	0	0
	Capital changes:			
	2.1 Paid in	0	0	0
		0	0	0
	2.3 Transferred to surplus	0	0	0
	urplus adjustments:			4 000 000
	3.1 Paid in	0	0	4,000,000
	3.2 Transferred to capital (Stock Dividend)	L	0	0
	3.3 Transferred from capital			U
34. N 35. D	let remittances from or (to) Home Office	U	0	0 ^
	hindends to stockholders		0 0	<u>0</u> N
	ggregate write-ins for gains and losses in surplus	v	0	
	Barge in surplus as regards policyholders (Lines 22 through 37)	591,192	524,011	5,056,289
	surplus as regards policyholders, as of statement date (Lines 21 plus 38)	50,933,293	45,809,823	50,342,101
1	ETAILS OF WRITE-INS		.0,000,020	55,51 <u>2</u> ,101
0502				
0503				
	ummary of remaining write-ins for Line 5 from overflow page	0	0	0
	otals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1401		0	0	0
1402				
1403				
1498. S	ummary of remaining write-ins for Line 14 from overflow page	0	0	0
-	otals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
3701				
3702				
3703				
3798. S	ummary of remaining write-ins for Line 37 from overflow page	0	0	0
	otals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	0	0

CASH FLOW

		Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	0	0	0
2.	Net investment income			
3.	Miscellaneous income	0	0	(
4.	Total (Lines 1 to 3)	788,506	662,804	1,359,585
5.	Benefit and loss related payments	0	0	
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	
7.	Commissions, expenses paid and aggregate write-ins for deductions	0	0	(
8.	Dividends paid to policyholders	0	0	
9.	Federal and foreign income taxes paid (recovered) net of \$1,507 tax on capital			
	gains (losses)	145,000	98,002	243,00
10.	Total (Lines 5 through 9)	145,000	98,002	243,00
11.	Net cash from operations (Line 4 minus Line 10)	643,506	564,802	1,116,58
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds		2,358,230	
	12.2 Stocks	0	0	
	12.3 Mortgage loans	0	0	
	12.4 Real estate	0	0	
	12.5 Other invested assets	0	0	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0	
	12.7 Miscellaneous proceeds	0	0	11,86
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,093,872		
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	1.711.390	5.321.681	8.307.34
	13.2 Stocks			, ,
	13.3 Mortgage loans		0	
	13.4 Real estate	0	0	
	13.5 Other invested assets		0	
	13.6 Miscellaneous applications	13,908	248,875	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	1,725,298	5,570,556	8,307,34
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0,001,01
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(631,426)	(3,212,326)	(4,429,09
15.	Net cash nom investments (Line 12.6 minus Line 13.7 and Line 14)	(031,420)	(3,212,320)	(4,423,030
16.	Cash from Financing and Miscellaneous Sources			
	16.1 Surplus notes, capital notes		0	
	16.2 Capital and paid in surplus, less treasury stock			
	16.3 Borrowed funds		0	
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		.0	
	16.5 Dividends to stockholders			
	16.6 Other cash provided (applied)	(11,622)	3,301,744	3,310,24
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5	(11,022)	0,001,111	0,010,21
	plus Line 16.6)	(11,622)	3,301,744	3,321,43
	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)	458		
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year			

20.0001. Bonds acquired in settlement of capital contribution	0	3,952,590
20,0002. Accrued interest on securities acquired in settlement of capital contribution		
		,

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Allmerica Financial Benefit Insurance Company ("the Company") are presented on the basis of accounting practices prescribed or permitted by the Michigan Department of Insurance and Financial Services.

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

NET INCOME	SSAP #	F/S Page	F/S Line #	 2019	 2018
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	xxx	XXX	\$ 591,192	\$ 1,046,266
(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	\$ 591,192	\$ 1,046,266
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	xxx	XXX	XXX	\$ 50,933,293	\$ 50,342,101
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:				\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:				\$ -	\$ -
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 50,933,293	\$ 50,342,101

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

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

C. Accounting Policy

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds not backed by loans are stated at either amortized cost or fair value, using the scientific interest method, in accordance with the NAIC Purposes and Procedures of the Securities Valuation Office.

(3,4) The Company does not own any preferred or common stocks.

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

Going Concern

D.

Not applicable

NOTE 2 Accounting Changes and Corrections of Errors

Not applicable

NOTE 3 Business Combinations and Goodwill

Not applicable

NOTE 4 Discontinued Operations

Not applicable

NOTE 5 Investments

A., B., C.

Not applicable

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.

STATEMENT AS OF JUNE 30, 2019 OF THE ALLMERICA FINANCIAL BENEFIT INSURANCE COMPANY NOTES TO FINANCIAL STATEMENTS

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a) The aggregate amount of unrealized losses:1. Less than 12 Months2. 12 Months or Longer	\$ \$	- 227
 b) The aggregate related fair value of securities with unrealized losses: 1. Less than 12 Months 2. 12 Months or Longer 	\$ \$	53,146

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

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

Not applicable

L. Restricted Assets

1. Restricted Assets (Including Pledged)

No change

2-4.

Not applicable

M., N., O., P., 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

Not applicable

NOTE 9 Income Taxes

No change

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

A. Nature of Relationships

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

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

Not applicable

C. Change in Terms of Intercompany Arrangements

Not applicable
Amounts Due to or from Related Parties

No change

D

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.

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

G. Nature of Relationships that Could Affect Operations

All outstanding shares of the Company are owned by Hanover.

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, Shareholders' Dividend Restrictions and Quasi-Reorganizations

(1) Outstanding Shares

The Company has 42,000 shares of \$100 par value common stock authorized and 42,000 shares issued and outstanding.

(2) Dividend Rate of Preferred Stock

Not applicable

(3-6) Dividend Restrictions

Pursuant to Michigan's statute, the maximum dividend and other distributions that an insurer may pay in any twelve-month period, without prior approval of the Michigan Insurance Commissioner, is limited to the greater of 10% of such insurer's statutory policyholder surplus as of December 31, of the immediately preceding year or the statutory net income less realized gains, for the immediately preceding calendar year. Accordingly, the maximum dividend that may be paid at January 1, 2019 without prior approval is \$5,034,210. Dividends or distributions made within the preceding twelve months were considered in the above computations.

(7-13)

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 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 by asset class include, but are not limited to:

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

• Asset-backed securities, which are included in Industrial and miscellaneous bonds – overall credit quality, including assessments of the underlying collateral type such as credit card receivables, auto loan receivables and equipment lease receivables; geographic diversification; vintage year; historical collateral performance including delinquency, default and casualty trends; economic conditions influencing use rates and resale values; and contract structural support features.

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

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

(5) Not applicable

B. Not applicable

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

							Not
							Practicable
	Aggregate	Admitted				Net Asset	(Carrying
Type of Financial Instrument	Fair Value	Assets	(Level 1)	(Level 2)	(Level 3)	Value (NAV)	Value)
Bonds	\$ 51,648,299	\$ 50,343,163	\$ 8,707,758	\$ 42,531,120	\$ 409,421	\$ -	\$ -
Cash and Short-Term Investments	\$ 106,984	\$ 106,984	\$ 106,984	\$ -	ş -	\$ -	\$ -

D., E.

Not applicable

NOTE 21 Other Items

A. Unusual or Infrequent Items

Not applicable

B. Troubled Debt Restructuring: Debtors

Not applicable

C. Other Disclosures

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

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

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

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-transferable Tax Credits

Not applicable

F. Subprime Mortgage Related Risk Exposure

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

G. Insurance-Linked Securities (ILS) Contracts

Not applicable

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.

Not applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not applicable

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Not applicable

NOTE 26 Intercompany Pooling Arrangements

Not applicable

NOTE 27 Structured Settlements

Not applicable

NOTE 28 Health Care Receivables

Not applicable

NOTE 29 Participating Policies

Not applicable

\$

- 06/30/2019 Yes[X] No[]

NOTE 30 Premium Deficiency Reserves

Liability carried for premium deficiency reserves
 Date of the most recent evaluation of this liability
 Was anticipated investment income utilized in the calculation?

NOTE 31 High Deductibles

Not applicable

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

Not applicable

NOTE 33 Asbestos/Environmental Reserves

Not applicable

NOTE 34 Subscriber Savings Accounts

Not applicable

NOTE 35 Multiple Peril Crop Insurance

Not applicable

NOTE 36 Financial Guaranty Insurance

Not applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?	Yes [] No [X]				
1.2	If yes, has the report been filed with the domiciliary state?	Yes [] No []				
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes [] No [X]				
2.2	If yes, date of change:					
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?	Yes [X] No []				
3.2	Have there been any substantial changes in the organizational chart since the prior quarter end?	Yes [X] No []				
3.3	If the response to 3.2 is yes, provide a brief description of those changes. Hanover Australia HoldCo Pty Ltd. and its subsidiaries were sold during the current quarter.					
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?	Yes [X] No []				
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.	0000944695				
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.	Yes [] No [X]				
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.					
	1 2 3 Name of Entity NAIC Company Code State of Domicile					
5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney- in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?] No [] N/A [X]				
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	12/31/2014				
6.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.	12/31/2014				
6.3	6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).					
6.4	By what department or departments?					
6.5	Michigan Department of Insurance and Financial Services Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?] No [] N/A [X]				
6.6	Have all of the recommendations within the latest financial examination report been complied with?] No [] N/A [X]				
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?	Yes [] No [X]				
7.2	If yes, give full information:					
8.1	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?	Yes [] No [X]				
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.					
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?	Yes [X] No []				
8.4	If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal					

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

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

GENERAL INTERROGATORIES

9.1 9.11	 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity; (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code. If the response to 9.1 is No, please explain: 	Yes [X] No)[]			
9.2	Has the code of ethics for senior managers been amended?	Yes [1 No	, r x 1			
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).						
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers? If the response to 9.3 is Yes, provide the nature of any waiver(s).	Yes [] No	[X]			
FINANCIAL							
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	Yes [X] No	[]			
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$			7,4	62		

INVESTMENT

11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or oth use by another person? (Exclude securities under securities lending agreements.)	nerwise made available	e for	Yes [] No [X]]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		\$			0
13.	Amount of real estate and mortgages held in short-term investments:					0
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			Yes [] No [X]]
14.2	If yes, please complete the following:					
		1			2	
		Prior Year-End			irrent Quarte	
		Book/Adjusted Carrying Value			ook/Adjusted arrying Value	
14 21	Bonds		0	\$	anying value	<u>,</u>
	Preferred Stock		0	\$		0
	Common Stock		0	\$		0
	Short-Term Investments		0	\$		0
	Mortgage Loans on Real Estate		0	\$		0
	All Other			\$		
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$.0	\$		0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	\$.0			
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			Yes [] No [X]]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?			Yes [] No []
	If no, attach a description with this statement.					
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement dat	<u>.</u>				
10.						•
	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, P					
	16.3 Total payable for securities lending reported on the liability page.		\$			0

GENERAL INTERROGATORIES

17. 17.1	offices, vaults or safet custodial agreement v Outsourcing of Critical	y deposit boxes, v vith a qualified ba I Functions, Custo	- Special Deposits, real estate, mo were all stocks, bonds and other s nk or trust company in accordanc odial or Safekeeping Agreements requirements of the NAIC Finance	ecurities, owne with Section of the NAIC Fil	ed throughout t 1, III - General nancial Condition	he current year Examination C on Examiners H	held pursuant to a considerations, F. Handbook?	Yes	[X] No[]
		1							
	Bank of New York Mel	Name of Cus	todian(s)	225 Liberty	ress				
	Dalik of New Tork Mer	1011		225 Liberty	Street, New It	JIK, NI 10200 .			
17.2	For all agreements that location and a comple		vith the requirements of the NAIC	Financial Con	dition Examine	rs Handbook, p	rovide the name,		
	1		2			3			
	Name((S)	Location(s)			Complete Expla	nation(s)		
17.3 17.4	If yes, give full informa			(s) identified in		e current quarte		Yes	[] No [X]
	1 Old Custo	dian	2 Now Custodian	Dete	3 of Change		4 Reason		
	Old Custo		New Custodian		of Change		Reason		
17.5	make investment deci	sions on behalf o	the reporting entity. For assets the transmission of the reporting entity. For assets the timent accounts"; "handle secure	nat are manage rities"]	ed internally by				
		Name of Firm	1 n or Individual	2 Affilia					
	Opus Investment Mana	agement, Inc							
	·								
			ed in the table for Question 17.5, c more than 10% of the reporting e					Yes	[] No []
			d with the reporting entity (i.e. des and aggregate to more than 50% of					Yes	[] No []
17.6	For those firms or indi table below.	viduals listed in th	ne table for 17.5 with an affiliation	code of "A" (af	filiated) or "U"	(unaffiliated), pi	rovide the information for th	е	
	1		2			3	4		5 Investment Management
	Central Registration								Agreement
	Depository Number		Name of Firm or Individual		Legal Entity	Identifier (LEI)	Registered With Securities and Exchange		(IMA) Filed
	107569	Opus Investment	Management, Inc				Commission		DS
18.1 18.2	Have all the filing required to the filing required to the fillengies of the filleng	irements of the P	urposes and Procedures Manual	of the NAIC In	estment Analy	vsis Office been	followed?	Yes	[X] No[]
19.	a. Documentation security is not a b. Issuer or obligo c. The insurer has	n necessary to per available. or is current on all s an actual expect	eporting entity is certifying the follomit a full credit analysis of the sec contracted interest and principal pation of ultimate payment of all co 5GI securities?	curity does not payments. ontracted intere	exist or an NAI est and principa	C CRP credit ra	ating for an FE or PL	Yes	[] No [X]
20.	a. The security wa b. The reporting er	s purchased prior ntity is holding cap	reporting entity is certifying the fo to January 1, 2018. Dital commensurate with the NAIC ad from the credit rating assigned	Designation r	eported for the	security.			

on a current private letter rating held by the insurer and available for examination by state insurance regulators. d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

4.2 If yes, complete the following schedule:

				TOTAL D	ISCOUNT		DISCOUNT TAKEN DURING PERIOD					
1	2	3	4	5	6	7	8	9	10	11		
	Maximum	Discount	Unpaid	Unpaid			Unpaid	Unpaid				
Line of Business	Interest	Rate	Losses	LAE	IBNR	TOTAL	Losses	LAE	IBNR	TOTAL		
	0.0	0.000	0	0	0	0	0	0	0	0		
	TOTAL	0	0	0	0	0	0	0	0			

5. Operating Percentages:

	5.1 A&H loss percent	0.000 %
	5.2 A&H cost containment percent	
	5.3 A&H expense percent excluding cost containment expenses	0.000 %
6.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]
6.2	If yes, please provide the amount of custodial funds held as of the reporting date	0
6.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]
6.4	If yes, please provide the balance of the funds administered as of the reporting date	0
7.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X] No []
7.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [] No []

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1	2	3	owing All New Reinsurers - 0	5	6	7
NAIC Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified
+						
+						

STATEMENT AS OF JUNE 30, 2019 OF THE ALLMERICA FINANCIAL BENEFIT INSURANCE COMPANY SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

		1 Activo	Direct Premi		Direct Losses Paid	u u /	Direct Losse	es Unpaid
	States, etc.	Active Status (a)	2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1.	Alabama	L						
2.	AlaskaAK	L				0	,	
3.	ArizonaAZ	LL	2,576,199			1,417,993		
4.	ArkansasAR	LL.	6,084,895			2,937,491	6,385,877	
5.	CaliforniaCA	L			8,117,655	6,878,641		
6.	ColoradoCO	L	2,903,517	2,665,566	2,019,167	1,399,708		5,754,29
7.	ConnecticutCT	L	4,459,447	4,056,175	1,518,180	2, 180, 820		
8.	DelawareDE	L						
9.	District of ColumbiaDC	L				107,741		
10.	FloridaFL	L	3,205,966	3,415,232	1,069,464	2,020,316	5,337,820	5,219,82
11.	GeorgiaGA	L				8,780,354		
12.	HawaiiHI	L			0	0		
13.	IdahoID	L						
14.	IllinoisIL	L	5,051,703	4,820,444	1,623,754	2,413,179		
15.	IndianaIN	L	3,065,379	3, 112, 572	1,280,890			2,470,87
16.	lowa IA	L						
17.	KansasKS	L						
18.	KentuckyKY	L						
19.	LouisianaLA	L	12,414,681		8,371,828	7,668,651		
20.	MaineME	L	5,038,352	4,941,486	1,875,819	1,672,169		7,670,7
21.	MarylandMD	L	3,923,737	3,727,344	1,457,840	1,271,489		5,552,38
22.	MassachusettsMA	L				4,708,122		
23.	MichiganMI	L	9,077,913		3,386,288	5,788,168	12,779,991	
24.	MinnesotaMN	L	5, 132,984	4,298,318	1,742,910	1,368,834		
25.	MississippiMS	LL						
	Missouri	LL						
27.	MontanaMT	LL				4,839		
28.	NebraskaNE	L			435			
	NevadaNV	L			1,216,303			
30.	New HampshireNH	L	11,763,827	12,206,672		6,981,077		
	New JerseyNJ	L	10,688,562		5,103,310	5,495,419	23,789,102	24,468,55
	New MexicoNM	L	141,997		(26,386)			
33.	New York	L	9,319,836			8,686,820		
	North CarolinaNC	1	3,946,392	4,214,471		2,302,177	, ,	
	North DakotaND	L	4.971	0		0		
36.	OhioOH	<u>-</u>	1,699,024	1,683,207		609.576		1,974,16
37.	OklahomaOK	L	6,680,850				, ,	
38.	OregonOR	L		1,924,090	3,750,055			
39.	Pennsylvania PA				1,766,068	1.955.278		
40.	Rhode IslandRI		1,367,614	1,425,541			1,071,237	
41.	South CarolinaSC	<i>-</i>	3,079,278		1,171,233			
41.	South DakotaSD						4,691	
43.	TennesseeTN	<u>-</u>				1,064,998		
	TexasTX	I.						
	UtahUT	I	1,545,088	1,306,755				
	VermontVT	I	1, 545, 088					
	VermontVI VirginiaVA	I						474,3 11,381,90
	WashingtonWA	I			1, 162, 320			
	West VirginiaWV	 I						2,019,03
	West VirginiaWV WisconsinWI	 	24,112					
			15,052,993		8,739,519	6,457,6950		
	WyomingWY	L	1, 130 0		0	0	61 0	
52.	American SamoaAS	NNNNN	0	0	0	0	0	
	GuamGU	NNNNN	0	0	0	0	0	
	Puerto RicoPR	NNNNN		•	0	0		
55.	U.S. Virgin IslandsVI	N	0	0	0	0	0	
56.	Northern Mariana IslandsMP	N	0	٥	0	n .	n	
57.	CanadaCAN		0 ^	0 ^	0 ^			
			0	0	0		U	
58.	Aggregate Other Alien OT			•		115 099 202	U 254 571 702	200 700 0
59.	Totals	XXX	224,472,128	215,140,327	117,743,797	115,988,202	354,571,793	309,780,0
	DETAILS OF WRITE-INS							
58001.		XXX	0	0	0	0	0	
58002.		XXX						
58003.								
58998.	Summary of remaining							
	write-ins for Line 58 from	1001	_	^	^			
F000-	overflow page	XXX	0	0	0	0	0	
J8999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58							
	58003 niue 500001/1 inc 50							

(a) Active Status Counts:

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

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

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

...6

Q - Qualified - Qualified or accredited reinsurer0

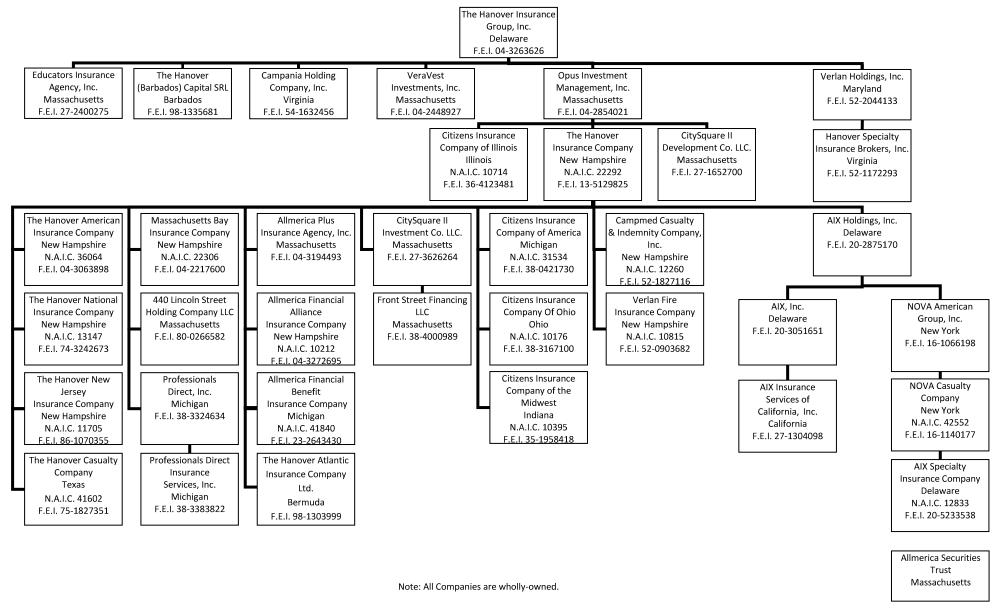
N - None of the above - Not allowed to write business in the state

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





Affiliated Investment Management Company

SCHEDULE Y PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	(8	9	10	11	12	13	14	15	16
							°	-	10					10	10
											Туре	lf			, ,
											of Control	Control			1
											(Ownership.	is		ls an	1
						N (0)			D 1 <i>i</i>		(I-)				1
						Name of Securities			Relation-		Board,	Owner-		SCA	1
						Exchange		Domi-	ship		Management,	ship		Filing	1
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	1
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	auired?	1
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)		Entity(ies)/Person(s)	(Y/N)	*
Code		Code		n33D	UIN	international)				(tage		(1/N)	1
	. The Hanover Insurance Group		80-0266582				440 Lincoln Street Holding Company LLC	MA	NIA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	N	I
	. The Hanover Insurance Group		20-2875170				AIX Holdings, Inc	DE	NI A	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	Y	
	The Hanover Insurance Group		27-1304098				AIX Insurance Services of California, Inc	CA		AIX, Inc.	Ownership, Board,Management		The Hanover Insurance Group, Inc	N	
	The Hanover Insurance Group		20-5233538				AIX Specialty Insurance Company	DE		Nova Casualty Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	N	I
	The Hanover Insurance Group		20-3051651				AIX, Inc	DE	NIA	AIX, Holdings, Inc.	Ownership, Board, Management		The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group	10212					Allmerica Financial Alliance Insurance Co	NH	ΙΑ	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	I
0088	The Hanover Insurance Group	41840	23-2643430				Allmerica Financial Benefit Insurance Co.	MI	RE	The Hanover Insurance Company	Ownership, Board, Management	100,000	The Hanover Insurance Group, Inc.	N	1
	The Hanover Insurance Group		04-3194493				Allmerica Plus Insurance Agency, Inc.		NIA	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	Ν	1
	The Hanover Insurance Group						Allmerica Securities Trust	MA		The Hanover Insurance Group, Inc.	Management	100.000	The Hanover Insurance Group, Inc.	N	 I
	The Hanover Insurance Group		54-1632456				Campanja Holding Company, Inc.	VA		The Hanover Insurance Group, Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	1
0088	The Hanover Insurance Group	12260	52-1827116				Campania Holding Company, Inc		NIA	The Hanover Insurance Group, Inc.	Ownership, Board,Management		The Hanover Insurance Group, Inc.	NI	1
														N	1
	The Hanover Insurance Group		38-0421730				Citizens Insurance Company of America	MI		The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	N	
	. The Hanover Insurance Group	10714					Citizens Insurance Company of Illinois	IL		Opus Investment Management, Inc	Ownership, Board, Management		The Hanover Insurance Group, Inc	N	·'
	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	N	
	The Hanover Insurance Group	10395	35-1958418				Citizens Insurance Company of the Midwest	IN	IA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	N	1
	The Hanover Insurance Group		27-1652700				CitySquare II Development Co., L.L.C	MA	NI A	Opus Investment Management, Inc.	Ownership, Board, Management		The Hanover Insurance Group, Inc	N	
	The Hanover Insurance Group		27-3626264				CitySquare II Investment Co., L.L.C	MA	NI A	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	N	
	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.	N	1
	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.	N	1
	The Hanover Insurance Group		52-1172293				Hanover Specialty Insurance Brokers. Inc.	VA		Verlan Holdings. Inc.	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	1
	The Hanover Insurance Group	22306	04-2217600				Massachusetts Bay Insurance Company	NH		The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	1
	The Hanover Insurance Group		16-1066198				NOVA American Group, Inc.	NY		AIX, Holdings, Inc.	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc.	N	1
	The Hanover Insurance Group	42552	16-1140177				NOVA American Group, file.	NY		Nova American Group. Inc.	Ownership, Board,Management		The Hanover Insurance Group, Inc.	N	1
			04-2854021					NY						N	I
	The Hanover Insurance Group						Opus Investment Management, Inc.		······	The Hanover Insurance Group, Inc.	Ownership, Board, Management		The Hanover Insurance Group, Inc.	N	1
	The Hanover Insurance Group		. 38-3383822				Professionals Direct Ins. Services, Inc	MI		Professionals Direct, Inc.	Ownership, Board, Management		The Hanover Insurance Group, Inc	N	
	. The Hanover Insurance Group		38-3324634				Professionals Direct, Inc.	MI		The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc	N	
	. 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	N	
	The Hanover Insurance Group		98-1303999				The Hanover Atlantic Insurance Company Ltd	BMU	IA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	Y	
	. The Hanover Insurance Group		98-1335681				The Hanover (Barbados) Capital SRL	BRB		The Hanover Insurance Group, Inc	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc	N	I
	The Hanover Insurance Group		75-1827351				The Hanover Casualty Company	TX	IA	The Hanover Insurance Company	Ownership, Board, Management		The Hanover Insurance Group, Inc.	N	
	The Hanover Insurance Group		13-5129825				The Hanover Insurance Company	NH		Opus Investment Management, Inc.	Ownership, Board, Management		The Hanover Insurance Group, Inc.	N	
0088	The Hanover Insurance Group		04-3263626			New York Stock Exchange	The Hanover Insurance Group. Inc.	DE	UIP			0.000	· · · · · · · · · · · · · · · · · · ·	N	1
	The Hanover Insurance Group		74-3242673				The Hanover National Insurance Company	NH	14	The Hanover Insurance Company	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc.	N	 1
	The Hanover Insurance Group	11705	86-1070355				The Hanover New Jersey Insurance Company	NH	ΙΔ	The Hanover Insurance Company	Ownership, Board, Management	100.000	The Hanover Insurance Group, Inc.	N	1
	The Hanover Insurance Group		04-2448927				VeraVest Investments. Inc.	MA		The Hanover Insurance Group, Inc.	Ownership, Board,Management		The Hanover Insurance Group, Inc.	N	 1
0088	The Hanover Insurance Group	10815	52-0903682				Verlan Fire Insurance Company	MA NH	NIA	The Hanover Insurance Group, Inc.	Ownership, Board,Management	100.000	The Hanover Insurance Group, Inc	NI	1
	The Hanover Insurance Group	GI OUI	52-0903682				Verlan Holdings. Inc.	NFL	NIA	The Hanover Insurance Company				N	,
	Ine Hanover Insurance Group		- 52-2044 133				verian Holdings, inc.	ND	NIA	The Hanover Thsurance Group, Thc.	Ownership, Board,Management		The Hanover Insurance Group, Inc.	N	1
Aster	risk		l	I	I	1	NO	хр			L		1		

STATEMENT AS OF JUNE 30, 2019 OF THE ALLMERICA FINANCIAL BENEFIT INSURANCE COMPANY PART 1 - LOSS EXPERIENCE

			Current Year to Date		4
	Line of Business	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage
1.	Fire	0		0.0	(45.7)
2.	Allied Lines	0		0.0	
3.	Farmowners multiple peril	0	0	0.0	0.0
4.	Homeowners multiple peril	0	0	0.0	0.0
5.	Commercial multiple peril	0			
6.	Mortgage guaranty	0	0		.0.0
8.	Ocean marine	0		0.0	0.0
9.	Inland marine		8,018,227	.95.3	1,861.0
10.	Financial guaranty		0	0.0	0.0
11.1	Medical professional liability - occurrence			0.0	0.0
11.2	Medical professional liability - claims-made		0	0.0	0.0
12.	Earthquake			0.0	0.0
13.	Group accident and health	0	0	0.0	0.0
14.	Credit accident and health	0		0.0	0.0
15.	Other accident and health	0	0	0.0	0.0
16.	Workers' compensation		12,710,518		48.3
17.1	Other liability - occurrence		(7, 197)	0.0	(45.7)
17.2	Other liability - claims-made			0.0	0.0
17.3	Excess workers' compensation			0.0	0.0
18.1	Products liability - occurrence		231	0.0	(101.0)
18.2	Products liability - claims-made	0		0.0	0.0
-	Private passenger auto liability			74.6	62.3
	Commercial auto liability		52,542,547	58.0	59.2
21.	Auto physical damage		, , , , , , , , , , , , , , , , , , , ,	56.8	62.2
22.	Aircraft (all perils)			0.0	0.0
23.	Fidelity		0	0.0	0.0
24.	Surety			0.0	0.0
26.	Burglary and theft			0.0	127.2
27.	Boiler and machinery			0.0	0.0
28.	Credit			0.0	0.0
20.	International		0	0.0	0.0
29. 30.	Warranty				0.0
30.	Reinsurance - Nonproportional Assumed Property			0.0 	0.0
31.	Reinsurance - Nonproportional Assumed Liability				
33.	Reinsurance - Nonproportional Assumed Financial Lines		XXX		XXX
34.	Aggregate write-ins for other lines of business	0	0	0.0	0.0
35.	Totals	222,716,376	135,933,590	61.0	62.9
3401. 3402. 3403.	DETAILS OF WRITE-INS				
3403. 3498.	Summary of remaining write-ins for Line 34 from overflow page				
3498. 3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)		0	0.0	0.0 0.0
3433.	10(a) (LINES 3401 (III00911 3403 plus 3430)(LINE 34 above)	U	U	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

		1	2	3
			Current	Prior Year
	Line of Business	Current Quarter	Year to Date	Year to Date
1.	Fire	0	0	(1,579)
2.	Allied Lines	0 [0	(1,682)
3.	Farmowners multiple peril		0	0
4.	Homeowners multiple peril		0	0
5.	Commercial multiple peril		0	
6.	Mortgage guaranty		0	0
8.	Ocean marine		0	0
9.	Inland marine			1,064,507
10.	Financial guaranty		0	0
	Medical professional liability - occurrence		0	0
11.2	Medical professional liability - claims-made	0	0	0
12.	Earthquake		0	(411)
13.	Group accident and health	0	0	0
14.	Credit accident and health	0	0	0
15.	Other accident and health			0
16.	Workers' compensation			
17.1	Other liability - occurrence	0		
17.2	Other liability - claims-made	0		.0
17.3	Excess workers' compensation	0		.0
18.1	Products liability - occurrence			0
18.2	Products liability - claims-made	0	0	0
19.1,19.2	Private passenger auto liability			
19.3,19.4	Commercial auto liability			
21.	Auto physical damage			60,217,665
22.	Aircraft (all perils)		0	0
23.	Fidelity		0	0
24.	Surety		0	0
26.	Burglary and theft		0	(1,265)
27.	Boiler and machinery		0	(279)
28.	Credit		0	0
29.	International	0	0	
30.	Warranty	0		00
31.	Reinsurance - Nonproportional Assumed Property	XXX		XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines		XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0
35.	Totals	110,662,338	224,472,128	215,140,327
	DETAILS OF WRITE-INS			
3401.				
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	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

	2	2		2			8	9	10			
							Ũ	÷	10	11 Prior Year-End	12 Prior Year-End	13
							Q.S. Date Known			Known Case Loss	IBNR Loss and	Prior Year-End
				2019 Loss and		Q.S. Date Known	Case Loss and			and LAE Reserves	LAE Reserves	Total Loss and
												LAE Reserve
Drier Veer End												Developed
												(Savings)/ Deficiency
nd 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)
	XXX		XXX								XXX	xxx
										Col. 11, Line 7	Col. 12, Line 7	Col. 13, Line 7
											As % of Col. 2	As % of Col. 3
										Line 7	Line /	Line 7
										1.	2.	3.
												Col. 13, Line 7
												As a % of Col. 1 Line 8
n		Nown Case Loss Loss And LAE d LAE Reserves	Prior Year-End hown Case Loss d LAE Reserves Reserves Cols. 1+2)	Prior Year-End nown Case Loss d LAE Reserves Prior Year-End IBNR Loss and LAE Reserves Reserves Reserves Cols. 1+2) LAE Payments on Claims Reported as of Prior Year-End	Prior Year-End nown Case Loss d LAE Reserves Prior Year-End bown Case Loss d LAE Reserves Prior Year-End Down Case Loss d LAE Reserves Reserves Reserves Prior Year-End Claims Reported as of Prior Year-End Claims Prior Year-End Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year-End Prior Year Year-End Year-End Year-End Year-End Year Year Year-End Year Yea	Prior Year-End bown Case Loss d LAE Reserves Prior Year-End bown Case Loss d LAE Reserves Prior Year-End Down Case Loss d LAE Reserves Res	Prior Year-End Down Case Loss d LAE Reserves d LAE Reserves Claims LAE Payments on Claims Reported as of Prior Year-End Claims Reported as of Prior Year-End Claims Reported as of Prior Year-End Claims Reported as of Prior Year-End Claims Cl	Prior Year-End bown Case Loss d LAE Reserves d LAE	Prior Year-End bown Case Loss d LAE Reserves d LAE	Prior Year-End bown Case Loss d LAE Reserves d LAE Reserves cols. 1+2) Prior Year-End bown Case Loss d LAE Reserves cols. 1+2) Prior Year-End Payments colaims Prior Year-End Claims Claims Dureported as of Prior Year-End Claims Claims Dureported as of Prior Year-End Claims Payments (Cols. 4+5) Claims Payments (Cols. 4+5) Claims Payments (Cols. 4+5) Claims Prior Year End Claims Prior Year End Claims Claims Claims Prior Year End Claims Claims Prior Year End Claims Claims Claims Claims Claims Prior Year End Claims Claims Claims Claims Claims Claims Prior Year End Claims Claims Claims Claims Claims Claims Claims Claims Claims Claims Prior Year End Claims Cl	Prior Year-End nown Case Loss Prior Year-End IBNR Loss and LAE Reserves Year-End Loss and LAE Reserves LAE Payments on Claims Reported as of Prior Year-End Total 2019 Loss and LAE Payments (Cols. 1+2) LAE Payments on Claims Reported as of Prior Year-End Claims Unreported as of Prior Year-End LAE Reserves and LAE Payments (Cols. 4+5) Claims Reported and Open as of Prior Year End Claims Reported or Reopened Subsequent to Prior Year End C.S. Date IBNR Loss and LAE Reserves Total Q.S. Loss and LAE Reserves (Cols. 4+7) XXX XXX	Prior Year-End boxs and LAE Reserves d LAE Reserves d LAE Reserves LAE Payments on Claims Reported as of Prior Year-End Total 2019 Loss and LAE Reserves (Cols. 1+2) LAE Payments on Claims Reported as of Prior Year-End Total 2019 Loss and LAE Payments (Cols. 4+5) Claims Reported and Open as of Prior Year End Total 0.S. Date IBNR Loss and LAE Reserves (Cols. 7+8+9) Total 0.S. Loss and LAE Reserves (Cols. 7+8+9) (Savings)/ Deficiency (Cols. 7+8+9) Mathematication Mathematication </td

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

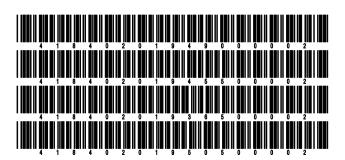
		Response
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state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

Explanations:

- 1.
- 2.
- 3
- 4.
- 4.

Bar Codes:

- 1. Trusteed Surplus Statement [Document Identifier 490]
- 2. Supplement A to Schedule T [Document Identifier 455]
- 3. Medicare Part D Coverage Supplement [Document Identifier 365]
- 4. Director and Officer Supplement [Document Identifier 505]



NONE

SCHEDULE A - VERIFICATION Real Estate

r		i de la companya de l	
		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 vit va va		
7.	Deduct current year's other than temporary impairent received zed		
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

		1	2
		X . D.	Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in test and immitment test and immitment test and a second		
9.	Total foreign exchange change in book value/rec ed in the entry cluding, and the trees the		
10.	Deduct current year's other than temporary impair ent received and a set of the set of t		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year		
2.	Cost of bonds and stocks acquired	1,711,390	
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals		
6.	Deduct consideration for bonds and stocks disposed of	1,093,869	3,879,670
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)		
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	50,343,163	49,777,258

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	g the Current Quarter for 1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value Beginning	Acquisitions During	Dispositions During	Non-Trading Activity During	Book/Adjusted Carrying Value End of	Book/Adjusted Carrying Value End of	Book/Adjusted Carrying Value End of	Book/Adjusted Carrying Value December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)		1,451,658	1,373,802	(30,395)			0	43,834,919
2. NAIC 2 (a)		0	0			5,590,871	0	
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	50,295,471	1,451,658	1,373,802	(30, 164)	50,295,471	50,343,163	0	49,777,258
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	50,295,471	1,451,658	1,373,802	(30,164)	50,295,471	50,343,163	0	49,777,258

(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

Schedule DA - Verification - Short-Term Investments

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Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards **NONE**

Schedule DB - Part B - Verification - Futures Contracts

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)

	(Cash Equivalents)		
		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	418	
2.	Cost of cash equivalents acquired	2,647,666	14,445,305
3.	Accrual of discount	1,994	6,543
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	2	(1)
6.	Deduct consideration received on disposals	2,649,657	14,451,814
7.	Deduct amortization of premium	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		418
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	423	418

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

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

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

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

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SCHEDULE D - PART 3

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

		0.1011 / 11	Long-Term Bonds and Stock Acquired During the Current Quarter					
1 2	3	4	5	6	7	8	9	10
								NAIC
								Designation
								and
								Admini-
								strative
								Symbol/
				Number of			Paid for Accrued	Market
CUSIP		Date		Shares of			Interest and	Indicator
Identification Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	(a)
76222R-YC-0 Rhode Island State Taxable - G.O. 3.000% 05/01/24			Robert W. Baird		61,062		0	1FE
76222R-YD-8 Rhode Island State Taxable - G.O. 3.000% 05/01/25		04/17/2019	Robert W. Baird				0	1FE
882723-PZ-6			_ Stifel Nicolaus & Co					1FE
1799999. Subtotal - Bonds - U.S. States, Territories and Possessions					391,362	375,000	1,330	
64763F-WY-1 New Orleans LA Taxable - G.O. 3.070% 12/01/24		06/04/2019	FTN Financial					1FE
2499999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Posse	ssions				102,625	100,000	43	XXX
052414-RX-9 Austin TX Electric Utility Taxable - Revenue Bonds 3.087% 11/15/31		05/23/2019	_ JP Morgan				0	1FE
47770V-AY-6 Jobs OH Beverage Sys. Taxable - Revenue Bonds 3.985% 01/01/29		04/03/2019	Citigroup					1FE
574297-DZ-7		05/08/2019	Raymond James Morgan Keegan				0	1FE
3199999. Subtotal - Bonds - U.S. Special Revenues					308, 322	300,000	1,560	
437076-BY-7 Home Depot Inc. Senior Notes 2.950% 06/15/29		06/03/2019	_ Morgan Stanley				0	1FE
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					49,713	50,000	0	XXX
8399997. Total - Bonds - Part 3					852,022	825,000	2,933	
8399998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total - Bonds					852,022	825,000	2,933	
8999997. Total - Preferred Stocks - Part 3					0	XXX	0	XXX
8999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks					0	XXX	0	XXX
9799997. Total - Common Stocks - Part 3					0	XXX	0	XXX
9799998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX
9799999. Total - Common Stocks					0	XXX	0	XXX
9899999. Total - Preferred and Common Stocks					0	XXX	0	XXX
9999999 - Totals					852,022	XXX	2,933	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

SCHEDULE D - PART 4

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

												0									
1	2	3	4	5	6	7	8	9	10	C	nange In Boo	k/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
											. –										Desig-
													Total	Total							nation
												0									and
												Current	Change in	Foreign					D 1		
												Year's	Book/	Exchange	Book/				Bond		Admini-
									Prior Year		Current	Other Thar		Change in	Adjusted	Foreign			Interest/	Stated	strative
									Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Stock	Con-	Symbol
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairmen	t Value	/Adjusted	Value at	Gain	Gain	Total Gain	Dividends	tractual	/Market
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Indicator
ification	Description	eian		of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)		nized	13)	Value	Date	Disposal	Disposal	Disposal	DuringYear	Date	(a)
		o.g.i		Paydown	Otoolt					(20010000)	81	111200		Value		0	0	0	U		1FE
3128PY-YP-3	Freddie Mac FGJ18818 2.500% 04/01/27			Pavdown		3,305	3,305	3,377		0	(49)	0		0	3,305	0	0	0		_04/01/2027 _	1FE
	Freddie Mac FGG60037 3.000% 10/01/43			Paydown			6,110	5,940	5,940	0		0		0		0	0	0		.10/01/2043 .	1FE
	Freddie Mac FHR2113QG 6.000% 01/15/29			Paydown				4,027		0		0		0		0	0	0			1FE
	Freddie Mac FHR2635EB 3.750% 04/15/33		06/01/2019	Pavdown		1.761	1.761	1.808	1,780	0	(19)	0	(19)	0	1.761	0	0	0	28	.04/15/2033	1FF
	Louisiana State Hsg Corp. Taxable - Revenue																				
54627D-BU-4	Bonds 2.350% 09/01/34		.06/01/2019	Pavdown			.14.409	13.579		0		0		0		0	0	0	141	.09/01/2034 .	1FE
	Louisiana State Hsg Corp. Taxable - Revenue			,																	
54627D-BV-2	Bonds 3.050% 12/01/38			Paydown			4,750	4,750			0	0		0		0	0	0		.12/01/2038 .	1FE
	Louisiana State Hsg Corp. Taxable - Revenue			.,		· · · ·	, .	, .							, .						
54627D-BW-0	Bonds 2.100% 12/01/38			Paydown						0	0	0	0	0		0	0	0		12/01/2038 .	1FE
	Louisiana State Hsg Corp. Taxable - Revenue																				
54627D-BX-8	Bonds 2.875% 11/01/38		06/01/2019	Paydown		16,418				0	0	0	0	0	16,418	0	0	0		. 11/01/2038 .	1FE
3199999. 5	Subtotal - Bonds - U.S. Special Reven	ues				74,930	74.930	74,251	74.289	0	640	0	640	0	74.930	0	0	0	936	XXX	XXX
	Advantage Capital Senior Notes 0.000%			Redemption 100.0000		,	,•••		,			-		-		_					
00839#-AD-5										0		0		0		0	3,449		0	.05/15/2021 .	1
	Home Depot Inc. Senior Notes 2.125%														,						
437076-BN-1	09/15/26			Bank of America						0		0		0		0	2,693			_09/15/2026 _	1FE
	Huntington National Bank Senior Notes																				
446438-RM-7	2.400% 04/01/20		06/04/2019	Citigroup				249,685	249,920	0		0		0		0	(320)	(320)		_04/01/2020 _	1FE
	Mead Johnson Nutrition Senior Notes 4.900%																				
582839-AE-6			04/16/2019	WFS						0		0		0		0	1,611	1,611		.11/01/2019 .	. 1FE
	Principal Life Global Fund II Notes 2.375%																				
74256L-AN-9			04/03/2019	WFS						0	20	0		0		0	(250)	(250)	2,692	_09/11/2019 _	1FE
	Stonehenge Capital Fund NC VI Notes 8.000%			Redemption 100.0000																	
86202*-AE-5			06/15/2019				13,499	13,499	13,499	0	0	0	0	0	13,499	0	0	0		10/15/2021 _	. 1
3899999. 5	Subtotal - Bonds - Industrial and Misce	ellane	ous (Unaffili	ated)		706,144	707,424	691,583	697,900	0	1,062	0	1,062	0	698,961	0	7,183	7,183	11,593	XXX	XXX
8399997.1	Total - Bonds - Part 4					781,074	782,354	765,834	772, 189	0	1,702	0	1,702	0	773,891	0	7,183	7,183	12,529	XXX	XXX
8399998	Fotal - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Fotal - Bonds					781.074	782.354	765.834	772.189		1.702	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.702	0	773.891	0	7,183	7,183	12.529	XXX	XXX
						/81,0/4			112, 189	0	1,702	U	1	0		-	7,183	7, 183	12,529		
	otal - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. 1	Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799997. 1	Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Total - Common Stocks						XXX	0			0				0	0		0		XXX	XXX
						0		-	-	0	0	0	0	-	*	Ů	0	•	0		
	Total - Preferred and Common Stocks					0	XXX	0	•	0	0	0	0	-	0	0	0	0	0	XXX	XXX
9999999 -	Totals					781,074	XXX	765,834	772,189	0	1,702	0	1,702	0	773,891	0	7,183	7,183	12,529	XXX	XXX
	common stock bearing the NAIC mark			1 1 1 1	1.1		0														

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....0

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

> Schedule DL - Part 2 - Reinvested Collateral Assets Owned

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STATEMENT AS OF JUNE 30, 2019 OF THE ALLMERICA FINANCIAL BENEFIT INSURANCE COMPANY SCHEDULE E - PART 1 - CASH

		Month	End Depository	Balances				
1	2	3	4	5		ance at End of Eac uring Current Quarte		9
		Rate of	Amount of Interest Received During Current	Amount of Interest Accrued at Current	6	7	8	
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
Bank of New York Mellon New York, NY		0.000	0	0				XXX
0199998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	xxx	xxx	0	0	0	0	0	xxx
0199999. Totals - Open Depositories	XXX	XXX	0	0	85.900	99,684	106,561	XXX
0299998. Deposits in 0 depositories that do not exceed the allowable limit in any one depository (See					- , -	,		
instructions) - Suspended Depositories	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	85,900	99,684	106,561	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
0599999. Total - Cash	XXX	XXX	0	0	85,900	99,684	106,561	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0599999. Total - U.S. Government Bonds						0	0	0
1099999. Total - All Other Government Bonds						0	0	0
1799999. Total - U.S. States, Territories and Possessions Bonds						0	0	0
2499999. Total - U.S. Political Subdivisions Bonds 3199999. Total - U.S. Special Revenues Bonds						÷	0	0
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						0	0	0
4899999. Total - Hybrid Securities						0	0	0
5599999. Total - Parent, Subsidiaries and Affiliates Bonds						0	0	0
6099999. Subtotal - SVO Identified Funds						0	0	0
6599999. Subtotal - Bank Loans						0	0	0
7799999. Total - Issuer Obligations						0	0	0
7899999. Total - Residential Mortgage-Backed Securities						0	0	0
7999999. Total - Commercial Mortgage-Backed Securities						0	0	0
8099999. Total - Other Loan-Backed and Structured Securities						0	0	0
8199999. Total - SVO Identified Funds						0	0	0
8299999. Total - Bank Loans						0	0	0
8399999. Total Bonds						0	0	0
09658L-79-4 BMO Funds Gov Money Market Fund Class 1				0.000			0	5
8699999. Subtotal - All Other Money Market Mutual Funds						423	0	5
8899999 - Total Cash Equivalents								