

**ANNUAL STATEMENT**

**OF THE**

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**LIBERTY MUTUAL PERSONAL INSURANCE COMPANY**

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**of** DOVER

**STATE OF** NEW HAMPSHIRE

**TO THE**

**Insurance Department**

**OF THE**

**FOR THE YEAR ENDED**

**December 31, 2022**

**PROPERTY AND CASUALTY**

**2022**



12484202220100100

ANNUAL STATEMENT

For the Year Ended December 31, 2022
OF THE CONDITION AND AFFAIRS OF THE

Liberty Mutual Personal Insurance Company

NAIC Group Code 0111, NAIC Company Code 12484, Employer's ID Number 04-1023460, Organized under the Laws of New Hampshire, State of Domicile or Port of Entry NH, Country of Domicile United States of America, Incorporated/Organized November 9, 1920, Commenced Business November 9, 1920, Statutory Home Office 100 Liberty Way, Dover, NH, US 03820, Main Administrative Office 175 Berkeley Street, Boston, MA, US 02116, Mail Address 175 Berkeley Street, Boston, MA, US 02116, Primary Location of Books and Records 175 Berkeley Street, Boston, MA, US 02116, Internet Web Site Address www.LibertyMutualGroup.com, Statutory Statement Contact Matthew Sterling, Statutory.Compliance@LibertyMutual.com

OFFICERS

Chairman of the Board
Damon Paul Hart #

Table with 2 columns: Name, Title. Row 1: Hamid Talal Mirza, President and Chief Executive Officer. Row 2: Damon Paul Hart #, EVP, Chief Legal Officer and Secretary. Row 3: Nikos Vasilakos #, Executive Vice President and Treasurer.

VICE-PRESIDENTS

Table with 4 columns: Name, Title, Name, Title. Row 1: Paul Sanghera, Executive Vice President and Comptroller, Vlad Yakov Barbalat, EVP and Chief Investment Officer. Row 2: Christopher Locke Peirce, EVP and Chief Financial Officer.

DIRECTORS OR TRUSTEES

Table with 4 columns: Name, Name, Name, Name. Row 1: James Matthew Czapla, Matthew Paul Dolan, Alison Brooke Erbig, Michael Joseph Fallon. Row 2: Damon Paul Hart #, Hamid Talal Mirza, Elizabeth Julia Morahan, Edward Jose Pena #.

State of Massachusetts
County of Suffolk

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 rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, 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.

Signatures and titles of Hamid Talal Mirza (President and Chief Executive Officer), Damon Paul Hart # (EVP, Chief Legal Officer and Secretary), and Nikos Vasilakos # (Executive Vice President and Treasurer).

Subscribed and sworn to (or affirmed) before me this on this 17th day of January, 2023, by

Signature of Notary Public



a. Is this an original filing? [X] Yes [ ] No
b. If no: 1. State the amendment number
2. Date filed
3. Number of pages attached

## ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D)	23,369,375		23,369,375	15,673,451
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks				
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ 0 encumbrances)				
4.2 Properties held for the production of income (less \$ 0 encumbrances)				
4.3 Properties held for sale (less \$ 0 encumbrances)				
5. Cash (\$ 0, Schedule E - Part 1), cash equivalents (\$ 25,757, Schedule E - Part 2), and short-term investments (\$ 0, Schedule DA)	25,757		25,757	42,786
6. Contract loans (including \$ 0 premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)				
9. Receivables for securities				
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	23,395,132		23,395,132	15,716,237
13. Title plants less \$ 0 charged off (for Title insurers only)				
14. Investment income due and accrued	234,457		234,457	115,962
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection				
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$ 0) and contracts subject to redetermination (\$ 0)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers				
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
21. Furniture and equipment, including health care delivery assets (\$ 0)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	1,348		1,348	
24. Health care (\$ 0) and other amounts receivable				
25. Aggregate write-ins for other-than-invested assets				
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	23,630,937		23,630,937	15,832,199
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	23,630,937		23,630,937	15,832,199

DETAILS OF WRITE-IN LINES				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)				

## LIABILITIES, SURPLUS AND OTHER FUNDS

	1	2
	Current Year	Prior Year
1. Losses (Part 2A, Line 35, Column 8)		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)		
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)		
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))	23,222	22,897
7.2 Net deferred tax liability	87,000	101,000
8. Borrowed money \$ 0 and interest thereon \$ 0		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 2,052,813,880 and 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		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)		
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ 0 certified) (Schedule F, Part 3 Column 78)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	7,734,498	180,393
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ 0 and interest thereon \$ 0		
25. Aggregate write-ins for liabilities	1	2
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	7,844,721	304,292
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	7,844,721	304,292
29. Aggregate write-ins for special surplus funds		
30. Common capital stock	7,000,000	7,000,000
31. Preferred capital stock		
32. Aggregate write-ins for other-than-special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	7,100,000	7,100,000
35. Unassigned funds (surplus)	1,686,216	1,427,907
36. 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)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	15,786,216	15,527,907
38. Totals (Page 2, Line 28, Col. 3)	23,630,937	15,832,199

DETAILS OF WRITE-IN LINES		
2501. Other Liabilities	1	2
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	1	2
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		

## STATEMENT OF INCOME

	1	2
	Current Year	Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4)		
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)		
5. Aggregate write-ins for underwriting deductions		
6. Total underwriting deductions (Lines 2 through 5)		
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)		
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	318,608	145,163
10. Net realized capital gains (losses) less capital gains tax of \$ 0 (Exhibit of Capital Gains (Losses))		
11. Net investment gain (loss) (Lines 9 + 10)	318,608	145,163
<b>OTHER INCOME</b>		
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 0 amount charged off \$ 0)		
13. Finance and service charges not included in premiums		
14. Aggregate write-ins for miscellaneous income	(8,299)	(50)
15. Total other income (Lines 12 through 14)	(8,299)	(50)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	310,309	145,113
17. Dividends to policyholders		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	310,309	145,113
19. Federal and foreign income taxes incurred	66,000	49,000
20. Net income (Line 18 minus Line 19) (to Line 22)	244,309	96,113
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	15,527,907	13,408,794
22. Net income (from Line 20)	244,309	96,113
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ 0		
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax	14,000	23,000
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29. Change in surplus notes		
30. Surplus (contributed to) withdrawn from protected cells		
31. Cumulative effect of changes in accounting principles		
32. Capital changes:		
32.1 Paid in		
32.2 Transferred from surplus (Stock Dividend)		
32.3 Transferred to surplus		
33. Surplus adjustments:		
33.1 Paid in		2,000,000
33.2 Transferred to capital (Stock Dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37. Aggregate write-ins for gains and losses in surplus		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	258,309	2,119,113
39. Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 38) (Page 3, Line 37)	15,786,216	15,527,907

DETAILS OF WRITE-IN LINES		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 05 from overflow page		
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)		
1401. Other income/(expense)	(8,299)	(50)
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page		
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	(8,299)	(50)
3701.		
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page		
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		

## CASH FLOW

	1	2
<b>Cash from Operations</b>	Current Year	Prior Year
1. Premiums collected net of reinsurance		
2. Net investment income	308,957	223,457
3. Miscellaneous income	(8,299)	(50)
4. Total (Lines 1 through 3)	300,658	223,407
5. Benefit and loss related payments		
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions		
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)	65,675	(29,768)
10. Total (Lines 5 through 9)	65,675	(29,768)
11. Net cash from operations (Line 4 minus Line 10)	234,983	253,175
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	80,961	155,366
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		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	80,961	155,366
13. Cost of investments acquired (long-term only):		
13.1 Bonds	7,885,730	2,549,225
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	7,885,730	2,549,225
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(7,804,769)	(2,393,859)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		2,000,000
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	7,552,757	167,747
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	7,552,757	2,167,747
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(17,029)	27,063
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	42,786	15,723
19.2 End of year (Line 18 plus Line 19.1)	25,757	42,786

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

20.0001		
20.0002		
20.0003		

**NONE Underwriting and Investment Exhibit - Part 1**

**NONE Underwriting and Investment Exhibit - Part 1A**

## UNDERWRITING AND INVESTMENT EXHIBIT PART 1B – PREMIUMS WRITTEN

Line of Business	1	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1 + 2 + 3 - 4 - 5
	Direct Business (a)	2 From Affiliates	3 From Non- Affiliates	4 To Affiliates	5 To Non- Affiliates	
1. Fire			1	1		
2.1 Allied lines	489,185			489,185		
2.2 Multiple peril crop						
2.3 Federal Flood						
2.4 Private Crop						
2.5 Private flood						
3. Farmowners multiple peril						
4. Homeowners multiple peril	1,537,572,812		1	1,537,572,813		
5.1 Commercial multiple peril (non-liability portion)						
5.2 Commercial multiple peril (liability portion)						
6. Mortgage guaranty						
8. Ocean marine	69			69		
9. Inland marine	9,667,084			9,667,084		
10. Financial guaranty						
11.1 Medical professional liability—occurrence						
11.2 Medical professional liability—claims-made						
12. Earthquake	2,395,248			2,395,248		
13.1 Comprehensive (hospital and medical) individual						
13.2 Comprehensive (hospital and medical)group						
14. Credit accident and health (group and individual)						
15.1 Vision Only						
15.2 Dental Only						
15.3 Disability Income						
15.4 Medical supplement						
15.5 Medicaid Title XIX						
15.6 Medicaid Title XVIII						
15.7 Long-Term Care						
15.8 Federal employees health benefits plan						
15.9 Other health						
16. Workers compensation	68,634			68,634		
17.1 Other liability—occurrence	22,092			22,092		
17.2 Other liability—claims-made						
17.3 Excess workers' compensation						
18.1 Products liability—occurrence						
18.2 Products liability—claims-made						
19.1 Private passenger auto no-fault (personal injury protection)	133,233,380			133,233,380		
19.2 Other private passenger auto liability	1,274,859,750			1,274,859,750		
19.3 Commercial auto no-fault (personal injury protection)						
19.4 Other commercial auto liability						
21.1 Private passenger auto physical damage	961,309,888			961,309,888		
21.2 Commercial auto physical damage						
22. Aircraft (all perils)						
23. Fidelity						
24. Surety						
26. Burglary and theft						
27. Boiler and machinery						
28. Credit						
29. International						
30. Warranty						
31. Reinsurance-nonproportional assumed property	X X X					
32. Reinsurance-nonproportional assumed liability	X X X					
33. Reinsurance-nonproportional assumed financial lines	X X X					
34. Aggregate write-ins for other lines of business						
35. TOTALS	3,919,618,142		2	3,919,618,144		

DETAILS OF WRITE-IN LINES						
3401.						
3402.						
3403.						
3498. Sum of remaining write-ins for Line 34 from overflow page						
3499. Totals (Lines 3401 through 3403 plus 3498 (Line 34 above))						

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [ ] No [X]  
 If yes: 1. The amount of such installment premiums \$  
 2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$



## UNDERWRITING AND INVESTMENT EXHIBIT PART 2 – LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire								
2.1 Allied lines								
2.2 Multiple peril crop								
2.3 Federal flood								
2.4 Private crop								
2.5 Private flood								
3. Farmowners multiple peril								
4. Homeowners multiple peril	765,915,571		765,915,571					
5.1 Commercial multiple peril (non-liability portion)								
5.2 Commercial multiple peril (liability portion)								
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine	2,349,390		2,349,390					
10. Financial guaranty								
11.1 Medical professional liability—occurrence								
11.2 Medical professional liability—claims-made								
12. Earthquake								
13.1 Comprehensive (hospital and medical)individual								
13.2 Comprehensive (hospital and medical)group								
14. Credit accident and health (group and individual)								
15.1 Vision only								
15.2 Dental only								
15.3 Disability income								
15.4 Medicare supplement								
15.5 Medicaid Title XIX								
15.6 Medicaid Title XIXVIII								
15.7 Long Term care								
15.8 Federal Employees health benefits plan								
15.9 Other health								
16. Workers' compensation								

## UNDERWRITING AND INVESTMENT EXHIBIT PART 2 – LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
17.1 Other liability—occurrence								
17.2 Other liability—claims-made								
17.3 Excess workers' compensation								
18.1 Products liability—occurrence								
18.2 Products liability—claims-made								
19.1 Private passenger auto no-fault(personal injury protection)	84,671,451							
19.2 Other private passenger liability	535,004,171							
19.3 Commercial auto no-fault (personal injury protection)								
19.4 Other commercial auto liability								
21.1 Private passenger auto physical damage	791,520,360							
21.2 Commercial auto physical damage								
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance-nonproportional assumed property	X X X							
32. Reinsurance-nonproportional assumed liability	X X X							
33. Reinsurance-nonproportional assumed financial lines	X X X							
34. Aggregate write-ins for other lines of business								
35. TOTALS	2,179,460,943							
<b>DETAILS OF WRITE-IN LINES</b>								
3401.								
3402.								
3403.								
3498. Sum of remaining write-ins for Line 34 from overflow page								
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)								

## UNDERWRITING AND INVESTMENT EXHIBIT

### PART 2A – UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire									
2.1 Allied lines					(36,979)		(36,979)		
2.2 Multiple peril crop									
2.3 Federal flood									
2.4 Private crop									
2.5 Private flood									
3. Farmowners multiple peril									
4. Homeowners multiple peril	179,491,582		179,491,582		317,980,409		317,980,409		
5.1 Commercial multiple peril (non-liability portion)									
5.2 Commercial multiple peril (liability portion)									
6. Mortgage guaranty									
8. Ocean marine									
9. Inland marine	49,840		49,840		335,744		335,744		
10. Financial guaranty									
11.1 Medical professional liability—occurrence									
11.2 Medical professional liability—claims-made									
12. Earthquake					279,291		279,291		
13.1 Comprehensive (hospital and medical)individual								(a)	
13.2 Comprehensive (hospital and medical)group								(a)	
14. Credit accident and health (group and individual)									
15.1 Vision only								(a)	
15.2 Dental only								(a)	
15.3 Disability income								(a)	
15.4 Medicare supplement								(a)	
15.5 Medicaid Title XIX								(a)	
15.6 Medicaid Title XIVIII								(a)	
15.7 Long Term care								(a)	
15.8 Federal Employees health benefits plan								(a)	
15.9 Other health								(a)	
16. Workers' compensation								(a)	

## UNDERWRITING AND INVESTMENT EXHIBIT

### PART 2A – UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
17.1 Other liability—occurrence					(1,473)		(1,473)		
17.2 Other liability—claims-made									
17.3 Excess workers' compensation									
18.1 Products liability—occurrence									
18.2 Products liability—claims-made									
19.1 Private passenger auto no-fault(personal injury protection)	43,047,038		43,047,038		30,463,476		30,463,476		
19.2 Other private passenger liability	308,968,573		308,968,573		415,793,889		415,793,889		
19.3 Commercial auto no-fault (personal injury protection)									
19.4 Other commercial auto liability									
21.1 Private passenger auto physical damage					35,957,746		35,957,746		
21.2 Commercial auto physical damage									
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance-nonproportional assumed property	X X X				X X X				
32. Reinsurance-nonproportional assumed liability	X X X				X X X				
33. Reinsurance-nonproportional assumed financial lines	X X X				X X X				
34. Aggregate write-ins for other lines of business									
35. TOTALS	531,557,033		531,557,033		800,772,103		800,772,103		
<b>DETAILS OF WRITE-IN LINES</b>									
3401.									
3402.									
3403.									
3498. Sum of remaining write-ins for Line 34 from overflow page									
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)									

(a) Including \$ 0 for present value of life indemnity claims reported in Lines 13 and 15.

## UNDERWRITING AND INVESTMENT EXHIBIT

### PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct	139,519,203			139,519,203
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	139,519,203			139,519,203
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)				
2. Commission and brokerage:				
2.1 Direct, excluding contingent		189,712,627		189,712,627
2.2 Reinsurance assumed, excluding contingent		2		2
2.3 Reinsurance ceded, excluding contingent		189,712,629		189,712,629
2.4 Contingent—direct				
2.5 Contingent—reinsurance assumed				
2.6 Contingent—reinsurance ceded				
2.7 Policy and membership fees				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)				
3. Allowances to manager and agents				
4. Advertising			68	68
5. Boards, bureaus and associations			32	32
6. Surveys and underwriting reports			62	62
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries			11,101	11,101
8.2 Payroll taxes			2,382	2,382
9. Employee relations and welfare			5,630	5,630
10. Insurance			385	385
11. Directors' fees			3	3
12. Travel and travel items			258	258
13. Rent and rent items			3,703	3,703
14. Equipment			1,414	1,414
15. Cost or depreciation of EDP equipment and software			1,221	1,221
16. Printing and stationery			35	35
17. Postage, telephone and telegraph, exchange and express			472	472
18. Legal and auditing			231	231
19. Totals (Lines 3 to 18)			26,997	26,997
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ 0				
20.2 Insurance department licenses and fees				
20.3 Gross guaranty association assessments				
20.4 All other (excluding federal and foreign income and real estate)				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses			4,887	4,887
25. Total expenses incurred			31,884	31,884 (a)
26. Less unpaid expenses—current year				
27. Add unpaid expenses—prior year				
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			31,884	31,884

DETAILS OF WRITE-IN LINES				
2401. Other expenses			4,887	4,887
2402.				
2403.				
2498. Sum of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)			4,887	4,887

(a) Includes management fees of \$ 31,882 to affiliates and \$ 0 to non-affiliates.

## EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 206,322	223,133
1.1 Bonds exempt from U.S. tax	(a) 17,900	84,609
1.2 Other bonds (unaffiliated)	(a) 14,595	49,571
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)		
2.21 Common stocks of affiliates		
3. Mortgage loans	(c)	
4. Real estate	(d)	
5. Contract loans		
6. Cash, cash equivalents and short-term investments	(e) 17,412	17,412
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income	(24,235)	(24,235)
10. Total gross investment income	231,994	350,490
11. Investment expenses		(g) 31,882
12. Investment taxes, licenses and fees, excluding federal income taxes		(g)
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i)
15. Aggregate write-ins for deductions from investment income		
16. Total deductions (Lines 11 through 15)		31,882
17. Net investment income (Line 10 minus Line 16)		318,608

DETAILS OF WRITE-IN LINES		
0901. Miscellaneous Income/(Expense)	(24,235)	(24,235)
0902.		
0903.		
0998. Summary of remaining write-ins for Line 09 from overflow page		
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)	(24,235)	(24,235)
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

- (a) Includes \$ 16,179 accrual of discount less \$ 125,025 amortization of premium and less \$ 46,552 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.
- (e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.
- (g) Includes \$ 31,882 investment expenses and \$ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.
- (i) Includes \$ 0 depreciation on real estate and \$ 0 depreciation on other invested assets.

## EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)					
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)					
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)					

DETAILS OF WRITE-IN LINES					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 09 from overflow page					
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)					

## EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income			
4.3 Properties held for sale			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6. Contract loans			
7. Derivatives (Schedule DB)			
8. Other invested assets (Schedule BA)			
9. Receivables for securities			
10. Securities lending reinvested collateral assets (Schedule DL)			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Lines 1 to 11)			
13. Title plants (for Title insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
15.3 Accrued retrospective premiums and contracts subject to redetermination			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
16.2 Funds held by or deposited with reinsured companies			
16.3 Other amounts receivable under reinsurance contracts			
17. Amounts receivable relating to uninsured plans			
18.1 Current federal and foreign income tax recoverable and interest thereon			
18.2 Net deferred tax asset			
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software			
21. Furniture and equipment, including health care delivery assets			
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other-than-invested assets			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Lines 26 and 27)			

DETAILS OF WRITE-IN LINES			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501. ....			
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)			

## NOTES TO FINANCIAL STATEMENTS

**1. Summary of Significant Accounting Policies and Going Concern**

**A. Accounting Practices**

Effective January 1, 2006, and subject to any deviations prescribed or permitted by the State of New Hampshire, the accompanying financial statements of Liberty Mutual Personal Insurance Company (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners ("NAIC") Accounting Practices and Procedures Manual ("APP Manual").

The Company does not have any prescribed or permitted accounting practices.

NET INCOME		SSAP #	F/S Page	F/S Line #	2022	2021
(1)	Liberty Mutual Personal Insurance Company state basis (Page 4, Line 2)	X X X	X X X	X X X	244,309	96,113

(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:

Details of Depreciation of Fixed Assets		SSAP #	F/S Page	F/S Line #	2022	2021
.....						
Totals (Lines 01A0201 through 01A0225)		X X X	X X X	X X X	0	0

(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:

Details of Depreciation of Home Office Property		SSAP #	F/S Page	F/S Line #	2022	2021
.....						
Totals (Lines 01A0301 through 01A0325)		X X X	X X X	X X X	0	0

(4)	NAIC SAP (1 - 2 - 3 = 4)	X X X	X X X	X X X	244,309	96,113
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SURPLUS		SSAP #	F/S Page	F/S Line #	2022	2021
(5)	Liberty Mutual Personal Insurance Company state basis (Page 3, Line 3)	X X X	X X X	X X X	15,786,216	15,527,907

(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:

e.g., Goodwill, net, Fixed Assets, Net		SSAP #	F/S Page	F/S Line #	2022	2021
.....						
Totals (Lines 01A0601 through 01A0625)		X X X	X X X	X X X	0	0

(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:

Home Office Property		SSAP #	F/S Page	F/S Line #	2022	2021
.....						
Totals (Lines 01A0701 through 01A0725)		X X X	X X X	X X X	0	0

(8)	NAIC SAP (5 - 6 - 7 = 8)	X X X	X X X	X X X	15,786,216	15,527,907
-----	--------------------------	-------	-------	-------	------------	------------

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

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, revenues, and expenses. It also requires estimates in the disclosure of contingent assets and liabilities. Actual results could differ from these estimates.

**C. Accounting Policy**



## NOTES TO FINANCIAL STATEMENTS

Premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro-rata methods. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company applies the following accounting policies, where applicable:

1. Short term investments are carried at cost, adjusted where appropriate for amortization of premium or discount, or fair value as specified by the Purposes and Procedures Manual of the NAIC Investment Analysis Office (SVO Manual).
2. Bonds are carried at cost, adjusted where appropriate for amortization of premium or discount, or fair value as specified by the SVO Manual.
3. Common stocks are carried at fair value, except that investments in stocks of subsidiaries, controlled and affiliated ("SCA") companies are carried according to Note 1C(7).
4. Preferred stocks are carried at cost or fair value as specified by the SVO Manual. Preferred stocks of SCA companies are carried according to Note 1C(7).
5. Mortgage loans are carried at amortized cost, less impairments as specified by the SVO Manual.
6. Mortgage backed/asset backed securities are carried at amortized cost or fair value based on guidance in the SVO Manual. Prepayment assumptions for mortgage backed/asset backed securities are based on market expectations. The retrospective adjustment method and prospective interest method are used to value all mortgage backed/asset backed securities
7. Investments in SCA companies are carried in accordance with SSAP No. 97, Investments in Subsidiary, Controlled, and Affiliated Entities, A Replacement of SSAP No. 88, and the SVO Manual.
8. Investments in joint ventures, partnerships, and limited liability companies are carried in accordance with SSAP No. 48, Joint Ventures, Partnerships and Limited Liability Companies, and the SVO Manual.
9. Derivative Securities, refer to Note 8.
10. Investment income is anticipated as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property Casualty Contracts - Premiums. Refer to Note 30.
11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and an amount, based on past experience, for losses and loss adjustment expenses incurred but not reported. 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 liability, are continually reviewed and follow current standards of practice. Any adjustments to the liability are reflected in the period that they are determined.
12. The Company did not change its capitalization policy from the prior period.
13. The Company has no pharmaceutical rebate receivables.

### D. Going Concern

The Company is not aware of any conditions that would impact its ability to continue as a going concern.

### 2. Accounting Changes and Corrections of Errors

There were no material changes in accounting principles and/or correction of errors.

### 3. Business Combinations and Goodwill

#### A. Statutory Purchase Method

The Company did not enter into any statutory purchases during the year.

The transaction was accounted for as a statutory purchase and reflects the following:

1	2	3	4	5
Purchased entity	Acquisition date	Cost of acquired entity	Original amount of goodwill	Original amount of admitted goodwill
.....	.....	.....	.....	.....

1	6	7	8	9
Purchased entity	Admitted goodwill as of the reporting date	Amount of goodwill amortized during the reporting period	Book Value of SCA	Admitted goodwill as a of SCA BACV, gross of admitted goodwill Col. 6/Col. 8
.....	.....	.....	.....	.....

#### B. Statutory Merger

The Company did not enter into any statutory mergers during the year.

#### C. Impairment Loss

The Company did not recognize an impairment loss during the period.

#### D. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

## NOTES TO FINANCIAL STATEMENTS

	Calculation of Limited Using Prior Quarter Numbers	Current Reporting Period
(1) Capital & Surplus	15,608,191	X X X
Less:		
(2) Admitted Positive Goodwill	0	X X X
(3) Admitted EDP Equipment & Operating System Software	0	X X X
(4) Admitted Net Deferred Taxes	0	X X X
(5) Adjusted Capital and Surplus (Line 1-2-3-4)	15,608,191	X X X
(6) Limitation on amount of goodwill (adjusted capital and surplus times 10% goodwill limitation [Line	1,560,819	X X X
(7) Current period reported Admitted Goodwill	X X X	0
(8) Current Period Admitted Goodwill as a % of prior period Adjusted Capital and Surplus (Line 7/Line	X X X	0.000

#### 4. Discontinued Operations

The Company has no discontinued operations

##### A. Discontinued Operations Disposed of or Classified as Held for Sale

Not Applicable

##### B. Change in Plan of Sale of Discontinued Operation

Not Applicable

##### C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal

Not Applicable

##### D. Equity Interest Retained in the Discontinued Operation After Disposal

Not Applicable

#### 5. Investments

##### A. Mortgage Loans, including Mezzanine Real Estate Loans

(1) Not Applicable

(2) Not Applicable

(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total: 

Current Year	Prior Year
0	0

(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
<b>a. Current Year</b>							
1. Recorded Investment (All)							
(a) Current Year	0	0	0	0	0	0	0
(b) 30 - 59 Days Past Due	0	0	0	0	0	0	0
(c) 60 - 89 Days Past Due	0	0	0	0	0	0	0
(d) 90 - 179 Days Past Due	0	0	0	0	0	0	0
(e) 180 + Days Past Due	0	0	0	0	0	0	0
2. Accruing Interest 90 - 179 Days Past Due							
(a) Recorded Investment	0	0	0	0	0	0	0
(b) Interest Accrued	0	0	0	0	0	0	0
3. Accruing Interest 180 + Days Past Due							
(a) Recorded Investment	0	0	0	0	0	0	0
(b) Interest Accrued	0	0	0	0	0	0	0
4. Interest Reduced							
(a) Recorded Investment	0	0	0	0	0	0	0
(b) Number of Loans	0	0	0	0	0	0	0
(c) Percent Reduced	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
5. Participant or Co-lender in a Mortgage Loan Agreement							
(a) Recorded Investment	0	0	0	0	0	0	0
<b>b. Prior Year</b>							
1. Recorded Investment							
(a) Current Year	0	0	0	0	0	0	0
(b) 30 - 59 Days Past Due	0	0	0	0	0	0	0
(c) 60 - 89 Days Past Due	0	0	0	0	0	0	0
(d) 90 - 179 Days Past Due	0	0	0	0	0	0	0
(e) 180 + Days Past Due	0	0	0	0	0	0	0

## NOTES TO FINANCIAL STATEMENTS

2. Accruing Interest 90 - 179 Days Past Due							
(a) Recorded Investment	0	0	0	0	0	0	0
(b) Interest Accrued	0	0	0	0	0	0	0
3. Accruing Interest 180 + Days Past Due							
(a) Recorded Investment	0	0	0	0	0	0	0
(b) Interest Accrued	0	0	0	0	0	0	0
4. Interest Reduced							
(a) Recorded Investment	0	0	0	0	0	0	0
(b) Number of Loans	0	0	0	0	0	0	0
(c) Percent Reduced	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
5. Participant or Co-lender in a Mortgage Loan Agreement							
(a) Recorded Investment	0	0	0	0	0	0	0

- (5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-Lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. With Allowance for Credit Losses	0	0	0	0	0	0	0
2. No Allowance for Credit Losses	0	0	0	0	0	0	0
3. Total (1+2)	0	0	0	0	0	0	0
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan	0	0	0	0	0	0	0
b. Prior Year							
1. With Allowance for Credit Losses	0	0	0	0	0	0	0
2. No Allowance for Credit Losses	0	0	0	0	0	0	0
3. Total (1+2)	0	0	0	0	0	0	0
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan	0	0	0	0	0	0	0

- (6) Investment in Impaired Loans - Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Average Recorded Investment	0	0	0	0	0	0	0
2. Interest Income Recognized	0	0	0	0	0	0	0
3. Recorded Investments on Nonaccrual Status	0	0	0	0	0	0	0
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting	0	0	0	0	0	0	0
b. Prior Year							
1. Average Recorded Investment	0	0	0	0	0	0	0
2. Interest Income Recognized	0	0	0	0	0	0	0
3. Recorded Investments on Nonaccrual Status	0	0	0	0	0	0	0
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting	0	0	0	0	0	0	0

- (7) Allowance for Credit Losses:

	Current Year	Prior Year
a. Balance at beginning of period	0	0
b. Additions charged to operations	0	0
c. Direct write-downs charged against the allowances	0	0
d. Recoveries of amounts previously charged off	0	0
e. Balance at end of period (a + b - c - d)	0	0

- (8) Mortgage Loans Derecognized as a Result of Foreclosure:

	Current Year
a. Aggregate amount of mortgage loans derecognized	0
b. Real estate collateral recognized	0
c. Other collateral recognized	0
d. Receivables recognized from a government guarantee of the foreclosed mortgage loan	0

- (9) Not Applicable

### B. Debt Restructuring

	Current Year	Prior Year
(1) Total recorded investment in restructured loans, as of year end	0	0
(2) The realized capital losses related to these loans	0	0
(3) Total contractual commitments to extend credit to debtors owing receivables whose terms have been modified in troubled debt restructurings	0	0

- (4) Not Applicable

## NOTES TO FINANCIAL STATEMENTS

**C. Reverse Mortgages**

- (1) Not Applicable
- (2) Not Applicable
- (3) At December 31, 2022 the actuarial reserve of \$ \_\_\_\_\_ reduced the asset value of the group of reverse mortgages ..... 0
- (4) The Company recorded an unrealized loss of \$ \_\_\_\_\_ as a result of the re-estimate of the cash flows ..... 0

**D. Loan-Backed Securities**

- (1) Prepayment speed assumptions are updated monthly with data sourced from the Bloomberg data service.

	1	2	3
	Amortized Cost Basis Before Other-than-Temporary Impairment	Other-than-Temporary Impairment Recognized in Loss	Fair Value 1 - 2
OTTI recognized 1st Quarter			
a. Intent to sell	0	0	0
b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0	0
c. Total 1st Quarter (a + b)	0	0	0
OTTI recognized 2nd Quarter			
d. Intent to sell	0	0	0
e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0	0
f. Total 2nd Quarter (d + e)	0	0	0
OTTI recognized 3rd Quarter			
g. Intent to sell	0	0	0
h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0	0
i. Total 3rd Quarter (g + h)	0	0	0
OTTI recognized 4th Quarter			
j. Intent to sell	0	0	0
k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	0	0	0
l. Total 4th Quarter (j + k)	0	0	0
m. Annual Aggregate Total (c + f + i + l)	X X X	0	X X X

(3)	1	2	3	4	5	6	7
	CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-than-Temporary Impairment	Amortized Cost After Other-Than-Temporary Impairment	Fair Value at time of OTTI	Date of Financial Statement Where Reported
	Total	X X X	X X X	0	X X X	X X X	X X X

NOTE: Each CUSIP should be listed separately each time an OTTI is recognized

For Securities with amortized cost or adjusted amortized cost:

Column 2 minus Column 3 should equal Column 4

Column 2 minus Column 4 should equal Column 5

- (4) All impaired Loan Backed Securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss as of December 31, 2022:

a. The aggregate Amount of unrealized losses:	
Less than 12 months	0
12 Months or Longer	(5,064)
b. The aggregate related fair value of securities with unrealized losses:	
Less than 12 months	0
12 Months or Longer	85,385

## NOTES TO FINANCIAL STATEMENTS

- (5) The Company reviews fixed income securities for impairment on a quarterly basis. Securities are reviewed for both quantitative and qualitative considerations including, but not limited to: (a) the extent of the decline in fair value below book value, (b) the duration of the decline, (c) significant adverse changes in the financial condition or near term prospects of the investment or issuer, (d) significant change in the business climate or credit ratings of the issuer, (e) general market conditions and volatility, (f) industry factors, and (g) the past impairment of the security holding or the issuer. If the Company believes a decline in the value of a particular investment is temporary, the decline is recorded as an unrealized loss in policyholders' equity. If the decline is believed to be "other-than-temporary," and the Company believes it will not be able to collect all cash flows due on its fixed income securities, then the carrying value of the investment is written down to the expected cash flow amount and a realized loss is recorded as a credit impairment.

### E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) The company has not entered into any repurchase agreements during the year. Refer to Note 17B for the policy on requiring collateral for securities lending.
- (2) The Company has not pledged any of its assets as collateral as of December 31, 2022.
- (3) Collateral Received

#### a. Aggregate Amount Collateral Received

1. Securities Lending	Fair Value
(a) Open	0
(b) 30 Days or Less	0
(c) 31 to 60 Days	0
(d) 61 to 90 Days	0
(e) Greater Than 90 Days	0
(f) Sub-Total (a + b + c + d + e)	0
(g) Securities Received	0
(h) Total Collateral Received (f + g)	0

2. Dollar Repurchase Agreement	Fair Value
(a) Open	0
(b) 30 Days or Less	0
(c) 31 to 60 Days	0
(d) 61 to 90 Days	0
(e) Greater Than 90 Days	0
(f) Sub-Total (a + b + c + d + e)	0
(g) Securities Received	0
(h) Total Collateral Received (f + g)	0

- b. The fair value of that collateral and of the portion that it has sold or repledged
- |  |   |
|--|---|
|  | 0 |
|--|---|

- c. All collateral is received in the form of cash and/or securities equal to or in excess of 102% of the loaned value and are maintained in a separate custody account. Cash collateral is reinvested into short-term investments as outlined in the terms of the investment agreement. Per the terms of the investment agreement the Company has the right and ability to redeem any eligible securities on short notice.

- (4) Securities Lending Transactions Administered by an Affiliated Agent

Not Applicable for any LMG reporting entity

- (5) Collateral Reinvestment

#### a. Aggregate Amount Collateral Reinvested

1. Securities Lending	Amortized Cos	Fair Value
(a) Open	0	0
(b) 30 Days or Less	0	0
(c) 31 to 60 Days	0	0
(d) 61 to 90 Days	0	0
(e) 91 to 120 Days	0	0
(f) 121 to 180 Days	0	0
(g) 181 to 365 Days	0	0
(h) 1 to 2 years	0	0
(i) 2 to 3 year	0	0
(j) Greater Than 3 years	0	0
(k) Sub-Total (Sum of a through j)	0	0
(l) Securities Received	0	0
(m) Total Collateral Reinvested (k + l)	0	0

## NOTES TO FINANCIAL STATEMENTS

2. Dollar Repurchase Agreement

(a) Open	0	0
(b) 30 Days or Less	0	0
(c) 31 to 60 Days	0	0
(d) 61 to 90 Days	0	0
(e) 91 to 120 Days	0	0
(f) 121 to 180 Days	0	0
(g) 181 to 365 Days	0	0
(h) 1 to 2 years	0	0
(i) 2 to 3 year	0	0
(j) Greater Than 3 years	0	0
(k) Sub-Total (Sum of a through j)	0	0
(l) Securities Received	0	0
(m) Total Collateral Reinvested (k + l)	0	0

b. The reporting entity's sources of cash that it uses to return the cash collateral is dependent on the liquidity of the current market conditions. Under current conditions, the reporting entity could liquidate all or a portion of its cash collateral reinvestment securities in order to meet the collateral calls that could come due under a worst-case scenario.

(6) The Company has not accepted collateral that it is not permitted by contract or custom to sell or re-pledge.

(7) Collateral for securities lending transactions that extend beyond one year from the reporting date

The Company has not accepted collateral that extends beyond one year from the reporting date for securities lending transactions.

Description of Collateral	Amount
Total Collateral Extending beyond one year of reporting date	0

**F. Repurchase Agreements Transactions Accounted for as Secured Borrowing**

(1) Not Applicable

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)	NO	NO	NO	NO
b. Tri-Party (YES/NO)	NO	NO	NO	NO

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open -- No Maturity	0	0	0	0
2. Overnight	0	0	0	0
3. 2 Days to 1 Week	0	0	0	0
4. > 1 Week to 1 Month	0	0	0	0
5. > 1 Month to 3 Months	0	0	0	0
6. > 3 Months to 1 Year	0	0	0	0
7. > 1 Year	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Open -- No Maturity	0	0	0	0
2. Overnight	0	0	0	0
3. 2 Days to 1 Week	0	0	0	0
4. > 1 Week to 1 Month	0	0	0	0
5. > 1 Month to 3 Months	0	0	0	0
6. > 3 Months to 1 Year	0	0	0	0
7. > 1 Year	0	0	0	0

(4) Not Applicable

(5) Securities "Sold" Under Repo -- Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. BACV	X X X	X X X	X X X	0
2. Nonadmitted -- Subset of BACV	X X X	X X X	X X X	0
3. Fair Value	0	0	0	0

## NOTES TO FINANCIAL STATEMENTS

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. BACV	X X X	X X X	X X X	0
2. Nonadmitted – Subset of BACV	X X X	X X X	X X X	0
3. Fair Value	0	0	0	0

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation

ENDING BALANCE	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
a. Bonds - BACV	0	0	0	0	0	0	0	0
b. Bonds - FV	0	0	0	0	0	0	0	0
c. LB & SS - BACV	0	0	0	0	0	0	0	0
d. LB & SS - FV	0	0	0	0	0	0	0	0
e. Preferred Stock - BACV	0	0	0	0	0	0	0	0
f. Preferred Stock - FV	0	0	0	0	0	0	0	0
g. Common Stock	0	0	0	0	0	0	0	0
h. Mortgage Loans - BACV	0	0	0	0	0	0	0	0
i. Mortgage Loans - FV	0	0	0	0	0	0	0	0
j. Real Estate - BACV	0	0	0	0	0	0	0	0
k. Real Estate - FV	0	0	0	0	0	0	0	0
l. Derivatives - BACV	0	0	0	0	0	0	0	0
m. Derivatives - FV	0	0	0	0	0	0	0	0
n. Other Invested Assets - BACV	0	0	0	0	0	0	0	0
o. Other Invested Assets - FV	0	0	0	0	0	0	0	0
p. Total Assets - BACV (a + c + e + g + h + j + l + n)	0	0	0	0	0	0	0	0
q. Total Assets - FV (b + d + f + g + l + k + m + o)	0	0	0	0	0	0	0	0

(7) Collateral Received - Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0

(8) Cash & Non-Cash Collateral Received - Secured Borrowing by NAIC Designation

ENDING BALANCE	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
a. Cash	0	0	0	0	0	0	0	0
b. Bonds - FV	0	0	0	0	0	0	0	0
c. LB & SS - FV	0	0	0	0	0	0	0	0
d. Preferred Stock - FV	0	0	0	0	0	0	0	0
e. Common Stock	0	0	0	0	0	0	0	0
f. Mortgage Loans - FV	0	0	0	0	0	0	0	0
g. Real Estate - FV	0	0	0	0	0	0	0	0
h. Derivatives - FV	0	0	0	0	0	0	0	0
i. Other Invested Assets -FV	0	0	0	0	0	0	0	0
j. Total Collateral Assets -FV	0	0	0	0	0	0	0	0

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

	FAIR VALUE
a. Overnight and Continuous	0
b. 30 Days or Less	0
c. 31 to 90 Days	0
d. > 90 Days	0

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

	AMORTIZED COST	FAIR VALUE
a. 30 Days or Less	0	0
b. 31 to 60 Days	0	0
c. 61 to 90 Days	0	0
d. 91 to 120 Days	0	0
e. 121 to 180 Days	0	0
f. 181 to 365 Days	0	0
g. 1 to 2 Years	0	0
h. 2 to 3 Years	0	0
i. > 3 Years	0	0

## NOTES TO FINANCIAL STATEMENTS

(11) Liability to Return Collateral - Secured Borrowing (Total)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash (Collateral - All)	0	0	0	0
2. Securities Collateral (FV)	0	0	0	0
b. Ending Balance				
1. Cash (Collateral - All)	0	0	0	0
2. Securities Collateral (FV)	0	0	0	0

**G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing**

(1) Not Applicable

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)	NO	NO	NO	NO
b. Tri-Party (YES/NO)	NO	NO	NO	NO

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open - No Maturity	0	0	0	0
2. Overnight	0	0	0	0
3. 2 Days to 1 Week	0	0	0	0
4. > 1 Week to 1 Month	0	0	0	0
5. > 1 Month to 3 Months	0	0	0	0
6. > 3 Months to 1 Year	0	0	0	0
7. > 1 Year	0	0	0	0
b. Ending Balance				
1. Open -- No Maturity	0	0	0	0
2. Overnight	0	0	0	0
3. 2 Days to 1 Week	0	0	0	0
4. > 1 Week to 1 Month	0	0	0	0
5. > 1 Month to 3 Months	0	0	0	0
6. > 3 Months to 1 Year	0	0	0	0
7. > 1 Year	0	0	0	0

(4) Not Applicable

(5) Fair Value of Securities Acquired Under Repo – Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount	0	0	0	0
b. Ending Balance	0	0	0	0

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
ENDING BALANCE								
a. Bonds - FV	0	0	0	0	0	0	0	0
b. LB & SS - FV	0	0	0	0	0	0	0	0
c. Preferred Stock - FV	0	0	0	0	0	0	0	0
d. Common Stock	0	0	0	0	0	0	0	0
e. Mortgage Loans - FV	0	0	0	0	0	0	0	0
f. Real Estate - FV	0	0	0	0	0	0	0	0
g. Derivatives - FV	0	0	0	0	0	0	0	0
h. Other Invested Assets - FV	0	0	0	0	0	0	0	0
i. Total Assets - FV (Sum of a through h)	0	0	0	0	0	0	0	0

(7) Collateral Provided - Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0
3. Securities (BACV)	X X X	X X X	X X X	X X X
4. Nonadmitted Subset (BACV)	X X X	X X X	X X X	X X X



## NOTES TO FINANCIAL STATEMENTS

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0
3. Securities (BACV)	0	0	0	0
4. Nonadmitted Subset (BACV)	0	0	0	0

## (8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

	AMORTIZED COST	FAIR VALUE
a. Overnight and Continuous	0	0
b. 30 Days or Less	0	0
c. 31 to 90 Days	0	0
d. > 90 Days	0	0

## (9) Recognized Receivable for Return of Collateral – Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0

## (10) Recognized Liability to Return Collateral – Secured Borrowing (Total)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Repo Securities Sold/Acquired with Cash Collateral	0	0	0	0
2. Repo Securities Sold/Acquired with Securities Collateral (FV)	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Repo Securities Sold/Acquired with Cash Collateral	0	0	0	0
2. Repo Securities Sold/Acquired with Securities Collateral (FV)	0	0	0	0

## H. Repurchase Agreements Transactions Accounted for as a Sale

(1) Not Applicable

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)	NO	NO	NO	NO
b. Tri-Party (YES/NO)	NO	NO	NO	NO

(3) Original (Flow) &amp; Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open - No Maturity	0	0	0	0
2. Overnight	0	0	0	0
3. 2 Days to 1 Week	0	0	0	0
4. > 1 Week to 1 Month	0	0	0	0
5. > 1 Month to 3 Months	0	0	0	0
6. > 3 Months to 1 Year	0	0	0	0
7. > 1 Year	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Open - No Maturity	0	0	0	0
2. Overnight	0	0	0	0
3. 2 Days to 1 Week	0	0	0	0
4. > 1 Week to 1 Month	0	0	0	0
5. > 1 Month to 3 Months	0	0	0	0
6. > 3 Months to 1 Year	0	0	0	0
7. > 1 Year	0	0	0	0

(4) Not Applicable

(5) Securities "Sold" Under Repo - Sale

## NOTES TO FINANCIAL STATEMENTS

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. BACV	X X X	X X X	X X X	0
2. Nonadmitted - Subset of BACV	X X X	X X X	X X X	0
3. Fair Value	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. BACV	X X X	X X X	X X X	0
2. Nonadmitted - Subset of BACV	X X X	X X X	X X X	0
3. Fair Value	0	0	0	0

(6) Securities Sold Under Repo - Sale by NAIC Designation

ENDING BALANCE	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
a. Bonds - BACV	0	0	0	0	0	0	0	0
b. Bonds - FV	0	0	0	0	0	0	0	0
c. LB & SS - BACV	0	0	0	0	0	0	0	0
d. LB & SS - FV	0	0	0	0	0	0	0	0
e. Preferred Stock - BACV	0	0	0	0	0	0	0	0
f. Preferred Stock - FV	0	0	0	0	0	0	0	0
g. Common Stock	0	0	0	0	0	0	0	0
h. Mortgage Loans - BACV	0	0	0	0	0	0	0	0
i. Mortgage Loans - FV	0	0	0	0	0	0	0	0
j. Real Estate - BACV	0	0	0	0	0	0	0	0
k. Real Estate - FV	0	0	0	0	0	0	0	0
l. Derivatives - BACV	0	0	0	0	0	0	0	0
m. Derivatives - FV	0	0	0	0	0	0	0	0
n. Other Invested Assets - BACV	0	0	0	0	0	0	0	0
o. Other Invested Assets - FV	0	0	0	0	0	0	0	0
p. Total Assets - BACV (a + c + e + g + h + j + l + n)	0	0	0	0	0	0	0	0
q. Total Assets - FV (b + d + f + g + i + k + m + o)	0	0	0	0	0	0	0	0

(7) Proceeds Received - Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0
3. Nonadmitted	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0
3. Nonadmitted	0	0	0	0

(8) Cash & Non-Cash Collateral Received - Secured Borrowing by NAIC Designation

ENDING BALANCE	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
a. Bonds - FV	0	0	0	0	0	0	0	0
b. LB & SS - FV	0	0	0	0	0	0	0	0
c. Preferred Stock - FV	0	0	0	0	0	0	0	0
d. Common Stock	0	0	0	0	0	0	0	0
e. Mortgage Loans - FV	0	0	0	0	0	0	0	0
f. Real Estate - FV	0	0	0	0	0	0	0	0
g. Derivatives - FV	0	0	0	0	0	0	0	0
h. Other Invested Assets - FV	0	0	0	0	0	0	0	0
i. Total Collateral Assets - FV (Sum of a through h)	0	0	0	0	0	0	0	0

(9) Recognized Forward Resale Commitment

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Cash (Collateral - All)	0	0	0	0
b. Securities Collateral (FV)	0	0	0	0

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

(1) Not Applicable

(2) Type of Repo Trades Used

## NOTES TO FINANCIAL STATEMENTS

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)	NO	NO	NO	NO
b. Tri-Party (YES/NO)	NO	NO	NO	NO

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open - No Maturity	0	0	0	0
2. Overnight	0	0	0	0
3. 2 Days to 1 Week	0	0	0	0
4. > 1 Week to 1 Month	0	0	0	0
5. > 1 Month to 3 Months	0	0	0	0
6. > 3 Months to 1 Year	0	0	0	0
7. > 1 Year	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Open - No Maturity	0	0	0	0
2. Overnight	0	0	0	0
3. 2 Days to 1 Week	0	0	0	0
4. > 1 Week to 1 Month	0	0	0	0
5. > 1 Month to 3 Months	0	0	0	0
6. > 3 Months to 1 Year	0	0	0	0
7. > 1 Year	0	0	0	0

(4) Not Applicable

(5) Securities Acquired Under Repo - Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. BACV	X X X	X X X	X X X	0
2. Nonadmitted - Subset of BACV	X X X	X X X	X X X	0
3. Fair Value	0	0	0	0

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. BACV	X X X	X X X	X X X	0
2. Nonadmitted - Subset of BACV	X X X	X X X	X X X	0
3. Fair Value	0	0	0	0

(6) Securities Acquired Under Repo – Sale by NAIC Designation

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NONADMITTED
ENDING BALANCE								
a. Bonds - BACV	0	0	0	0	0	0	0	0
b. Bonds - FV	0	0	0	0	0	0	0	0
c. LB & SS - BACV	0	0	0	0	0	0	0	0
d. LB & SS - FV	0	0	0	0	0	0	0	0
e. Preferred Stock - BACV	0	0	0	0	0	0	0	0
f. Preferred Stock - FV	0	0	0	0	0	0	0	0
g. Common Stock	0	0	0	0	0	0	0	0
h. Mortgage Loans - BACV	0	0	0	0	0	0	0	0
i. Mortgage Loans - FV	0	0	0	0	0	0	0	0
j. Real Estate - BACV	0	0	0	0	0	0	0	0
k. Real Estate - FV	0	0	0	0	0	0	0	0
l. Derivatives - BACV	0	0	0	0	0	0	0	0
m. Derivatives - FV	0	0	0	0	0	0	0	0
n. Other Invested Assets - BACV	0	0	0	0	0	0	0	0
o. Other Invested Assets - FV	0	0	0	0	0	0	0	0
p. Total Assets - BACV (a + c + e + g + h + j + l + n)	0	0	0	0	0	0	0	0
q. Total Assets - FV (b + d + f + g + i + k + m + o)	0	0	0	0	0	0	0	0

(7) Proceeds Provided - Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0
3. Securities (BACV)	X X X	X X X	X X X	X X X
4. Nonadmitted Subset (BACV)	X X X	X X X	X X X	X X X

## NOTES TO FINANCIAL STATEMENTS

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Cash	0	0	0	0
2. Securities (FV)	0	0	0	0
3. Securities (BACV)	0	0	0	0
4. Nonadmitted Subset (BACV)	0	0	0	0

(8) Recognized Forward Resale Commitment

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount	0	0	0	0
b. Ending Balance	0	0	0	0

J. Real Estate

Not Applicable

K. The Company does not hold investments in low-income housing tax credits.

L. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						
	Calendar Year					6	7
	1	2	3	4	5		
Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A 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	0	0	0	0	0	0	0
b. Collateral held under security lending agreements	0	0	0	0	0	0	0
c. Subject to repurchase agreements	0	0	0	0	0	0	0
d. Subject to reverse repurchase agreements	0	0	0	0	0	0	0
e. Subject to dollar repurchase agreements	0	0	0	0	0	0	0
f. Subject to dollar reverse repurchase agreements	0	0	0	0	0	0	0
g. Placed under option contracts	0	0	0	0	0	0	0
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	0	0	0	0	0	0	0
i. FHLB capital stock	0	0	0	0	0	0	0
j. On deposit with states	5,538,252	0	0	0	5,538,252	5,316,906	221,346
k. On deposit with other regulatory bodies	0	0	0	0	0	0	0
l. Pledged as collateral to FHLB (including assets backing funding agreements)	0	0	0	0	0	0	0
m. Pledged as collateral not captured in other categories	0	0	0	0	0	0	0
n. Other restricted Assets	0	0	0	0	0	0	0
<b>o. Total Restricted Assets (Sum of a through n)</b>	<b>5,538,252</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5,538,252</b>	<b>5,316,906</b>	<b>221,346</b>

(a) Subset of Column 1

(b) Subset of Column 3

## NOTES TO FINANCIAL STATEMENTS

	Current Year			
	8	9	Percentage	
	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	10	11
			Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
Restricted Asset Category				
a. Subject to contractual obligation for which liability is not shown	0	0	0.000	0.000
b. Collateral held under security lending agreements	0	0	0.000	0.000
c. Subject to repurchase agreements	0	0	0.000	0.000
d. Subject to reverse repurchase agreements	0	0	0.000	0.000
e. Subject to dollar repurchase agreements	0	0	0.000	0.000
f. Subject to dollar reverse repurchase agreements	0	0	0.000	0.000
g. Placed under option contracts	0	0	0.000	0.000
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	0	0	0.000	0.000
i. FHLB capital stock	0	0	0.000	0.000
j. On deposit with states	0	5,538,252	23.436	23.436
k. On deposit with other regulatory bodies	0	0	0.000	0.000
l. Pledged as collateral to FHLB (including assets backing funding agreements)	0	0	0.000	0.000
m. Pledged as collateral not captured in other categories	0	0	0.000	0.000
n. Other restricted Assets	0	0	0.000	0.000
<b>o. Total Restricted Assets (Sum of a through n)</b>	<b>0</b>	<b>5,538,252</b>	<b>23.436</b>	<b>23.436</b>

(a) Column 5 divided by Assets Page, Column 1, Line 28

(b) Column 9 divided by Assets Page, Column 1, Line 28

(2) Details of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, are Reported in Aggregate)

	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6	7
	1	2	3	4	5		
	Description of Assets	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year
.....							
<b>Total (c)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	8	Percentage	
	Total Current Year Admitted Restricted	9	10
		Gross] (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
Description of Assets			
.....			
<b>Total (c)</b>	<b>0</b>	<b>0.000</b>	<b>0.000</b>

(a) Subset of column 1

(b) Subset of column 3

(c) Total Line for Column 1 through 7 should equal 5L(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)m Columns 9 through 11 respectively

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

	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6	7
	1	2	3	4	5		
	Description of Assets	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year
.....							
<b>Total (c)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## NOTES TO FINANCIAL STATEMENTS

Description of Assets	8 Total Current Year Admitted Restricted	Percentage	
		9 Gross] (Admitted & Nonadmitted) Restricted to Total Assets	10 Admitted Restricted to Total Admitted Assets
Total (c)	0	0.000	0.000

(a) Subset of column 1

(b) Subset of column 3

(c) Total Line for Column 1 through 7 should equal 5L(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)m Columns 9 through 11 respectively

(4) Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statement.

Collateral Assets	1 Book/Adjusted Carrying Value (BACV)	2 Fair Value	3 % of BACV to Total Assets (Admitted and Nonadmitted*)	4 % of BACV to Total Admitted Assets**
<b>General Account:</b>				
a. Cash, Cash Equivalents and Short-Term Investments	0	0	0.000	0.000
b. Schedule D, Part 1	0	0	0.000	0.000
c. Schedule D, Part 2, Section 1	0	0	0.000	0.000
d. Schedule D, Part 2, Section 2	0	0	0.000	0.000
e. Schedule B	0	0	0.000	0.000
f. Schedule A	0	0	0.000	0.000
g. Schedule BA, Part 1	0	0	0.000	0.000
h. Schedule DL, Part 1	0	0	0.000	0.000
i. Other	0	0	0.000	0.000
<b>j. Total Collateral Assets (a+b+c+d+e+f+g+h+i)</b>	<b>0</b>	<b>0</b>	<b>0.000</b>	<b>0.000</b>
<b>Separate Account:</b>				
k. Cash, Cash Equivalents and Short-Term Investments	0	0	0.000	0.000
l. Schedule D, Part 1	0	0	0.000	0.000
m. Schedule D, Part 2, Section 1	0	0	0.000	0.000
n. Schedule D, Part 2, Section 2	0	0	0.000	0.000
o. Schedule B	0	0	0.000	0.000
p. Schedule A	0	0	0.000	0.000
q. Schedule BA, Part 1	0	0	0.000	0.000
r. Schedule DL, Part 1	0	0	0.000	0.000
s. Other	0	0	0.000	0.000
<b>t. Total Collateral Assets (k+l+m+n+o+p+q+r+s)</b>	<b>0</b>	<b>0</b>	<b>0.000</b>	<b>0.000</b>

\* j = Column 1 divided by Asset Page, Line 26 (Column 1)  
t = Column 1 divided by Asset Page, Line 27 (Column 1)

\*\* j = Column 1 divided by Asset Page, Line 26 (Column 3)  
t = Column 1 divided by Asset Page, Line 27 (Column 3)

1 Amount	2 % of Liability to Total Liabilities*
u. Recognized Obligation to Return Collateral Assets (General Account)	0.000
v. Recognized Obligation to Return Collateral Asset (Separate Account)	0.000

\* u = Column 1 divided by Liability Page, Line 26 (Column 1)  
v = Column 1 divided by Liability Page, Line 27 (Column 1)

**M. Working Capital Finance Investments**

Not Applicable

**N. Offsetting and Netting of Assets and Liabilities**

Not Applicable

**O. 5GI Securities**

Not Applicable

**P. Short Sales**

Not Applicable

**Q. Prepayment Penalty and Acceleration Fees**

Not Applicable

**R. Reporting Entity's Share of Cash Pool by Asset type.**

Not Applicable

**6. Joint Ventures, Partnerships and Limited Liability Companies**

## NOTES TO FINANCIAL STATEMENTS

A. Detail for Those Greater than 10% of Admitted Assets

Not Applicable

B. Writedowns for Impairments of Joint Ventures, Partnerships, & LLCs

Not Applicable

**7. Investment Income**

A. The Company does not admit investment income due and accrued if amounts are over 90 days past due.

B. No amounts were excluded as of December 31, 2022.

**8. Derivative Instruments**

**A. Derivatives under SSAP No. 86—Derivatives**

(1) The Company's investment activities do not include derivatives. However, the Company may acquire derivatives as additions to bond, common stock, or preferred stock investments. These derivatives are ancillary to the overall investment and are immaterial to the underlying investment portfolio.

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

(5) Not Applicable

(6) Not Applicable

(7) Not Applicable

(8)

a.

Fiscal Year	Derivative Premium Payments Due
Year Ending December 31	
1. 2022	\$ 0
2. 2023	\$ 0
3. 2024	\$ 0
4. 2025	\$ 0
5. Thereafter	\$ 0
6. Total Future Settled Premiums	\$ 0

b.

	Undiscounted Future Premium Commitments	Derivative Fair Value With Premium Commitments (Reported on DB)	Derivative Fair Value Excluding Impact of Future Settled Premiums
1. Prior Year	\$ 0	\$ 0	\$ 0
2. Current Year	\$ 0	\$ 0	\$ 0

**B. Derivatives under SSAP No. 108—Derivative Hedging Variable Annuity Guarantees**

(1) Discussion of hedged item/hedging instruments and hedging strategy:

NOT APPLICABLE

## NOTES TO FINANCIAL STATEMENTS

(2) Recognition of gains/losses and deferred assets and liabilities

a. Scheduled Amortization

Amortization Year	Deferred Assets	Deferred Liabilities
1. 2020	\$ 0	\$ 0
2. 2021	\$ 0	\$ 0
3. 2022	\$ 0	\$ 0
4. 2023	\$ 0	\$ 0
5. 2024	\$ 0	\$ 0
6. 2025	\$ 0	\$ 0
7. 2026	\$ 0	\$ 0
8. 2027	\$ 0	\$ 0
9. 2028	\$ 0	\$ 0
10. 2029	\$ 0	\$ 0
11. Total	\$ 0	\$ 0

b. Total Deferred Balance \* \$

\* Should agree to Column 18 of Schedule DB, Part E

c. Reconciliation of Amortization:

1. Prior Year Total Deferred Balance	\$ <input type="text" value="0"/>
2. Current Year Amortization	\$ <input type="text" value="0"/>
3. Current Year Deferred Recognition	\$ <input type="text" value="0"/>
4. Ending Deferred Balance [1-(2+3)]	\$ <input type="text" value="0"/>

d. Open Derivative Removed from SSAP No. 108 and Captured in Scope of SSAP No. 86

1. Total Derivative Fair Value Change	\$ <input type="text" value="0"/>
2. Change in Fair Value Reflected as a Natural Offset to VM21 Liability under SSAP No. 108	\$ <input type="text" value="0"/>
3. Change in Fair Value Reflected as a Deferred Asset / Liability Under SSAP No. 108	\$ <input type="text" value="0"/>
4. Other Changes	\$ <input type="text" value="0"/>
5. Unrealized Gain / Loss Recognized for Derivative Under SSAP No. 86 [1-(sum of 2 through 4)]	\$ <input type="text" value="0"/>

e. Open Derivative Removed from SSAP No. 86 and Captured in Scope of SSAP No. 108

1. Total Derivative Fair Value Change	\$ <input type="text" value="0"/>
2. Unrealized Gain / Loss Recognized Prior to the Reclassification to SSAP No. 108	\$ <input type="text" value="0"/>
3. Other Changes	\$ <input type="text" value="0"/>
4. Fair Value Change Available for Application under SSAP No. 108 [1-(2+3)]	\$ <input type="text" value="0"/>

(3) Hedging Strategies Identified as No Longer Highly Effective

b. Details of Hedging Strategies Identified as No Longer Highly Effective

Unique Identifier	Date Domiciliary State Notified	Amortization (# of years) 5 or Less	Recognized Deferred Assets	Recognized Deferred Liabilities

c. Amortization

Amortization Year	Recognized Deferred Assets	Recognized Deferred Liabilities	Accelerated Amortization	Original Amortization
1. 2020	\$ 0	\$ 0	\$ 0	\$ 0
2. 2021	\$ 0	\$ 0	\$ 0	\$ 0
3. 2022	\$ 0	\$ 0	\$ 0	\$ 0
4. 2023	\$ 0	\$ 0	\$ 0	\$ 0
5. 2024	\$ 0	\$ 0	\$ 0	\$ 0

6. Total Adjusted Amortization \$



## NOTES TO FINANCIAL STATEMENTS

(4) Hedging Strategies Terminated

b. Details of Hedging Strategies Terminated

Unique Identifier	Date Domiciliary State Notified	Amortization (# of years) 5 or Less	Recognized Deferred Assets	Recognized Deferred Liabilities

c. Amortization

Amortization Year	Recognized Deferred Assets	Recognized Deferred Liabilities	Accelerated Amortization	Original Amortization
1. 2020	\$ 0	\$ 0	\$ 0	\$ 0
2. 2021	\$ 0	\$ 0	\$ 0	\$ 0
3. 2022	\$ 0	\$ 0	\$ 0	\$ 0
4. 2023	\$ 0	\$ 0	\$ 0	\$ 0
5. 2024	\$ 0	\$ 0	\$ 0	\$ 0

6. Total Adjusted Amortization \$ 0

9. Income Taxes

A. The components of the net deferred tax asset/(liability) at Dec. 31 are as follows:

(1)	12/31/2022			12/31/2021		
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	(Col 1 + 2) Total	Ordinary	Capital	(Col 4 + 5) Total
a. Gross Deferred Tax Assets	\$ 0	0	0	0	0	0
b. Statutory Valuation Allowance Adjustments	\$ 0	0	0	0	0	0
c. Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 0	0	0	0	0	0
d. Deferred Tax Assets Nonadmitted	\$ 0	0	0	0	0	0
e. Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 0	0	0	0	0	0
f. Deferred Tax Liabilities	\$ 11,000	76,000	87,000	8,000	93,000	101,000
g. Net Admitted Deferred Tax Assets / (Net Deferred Tax Liability) (1e - 1f)	\$ (11,000)	(76,000)	(87,000)	(8,000)	(93,000)	(101,000)

(1)	Change		
	(7)	(8)	(9)
	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7 + 8) Total
a. Gross Deferred Tax Assets	\$ 0	0	0
b. Statutory Valuation Allowance Adjustments	\$ 0	0	0
c. Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 0	0	0
d. Deferred Tax Assets Nonadmitted	\$ 0	0	0
e. Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 0	0	0
f. Deferred Tax Liabilities	\$ 3,000	(17,000)	(14,000)
g. Net Admitted Deferred Tax Assets / (Net Deferred Tax Liability) (1e - 1f)	\$ (3,000)	17,000	14,000

## NOTES TO FINANCIAL STATEMENTS

	12/31/2022			12/31/2021		
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	(Col 1 + 2) Total	Ordinary	Capital	(Col 4 + 5) Total
Admission Calculation Components SSAP No. 101						
a. Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$ 0	0	0	0	0	0
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)	\$ 0	0	0	0	0	0
1. Adjusted Gross Deferred Tax Assets to be Realized Following the Balance Sheet Date.	\$ 0	0	0	0	0	0
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	\$ X X X	X X X	2,358,183	X X X	X X X	2,327,011
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.	\$ 0	0	0	0	0	0
d. Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total ( 2(a) + 2(b) + 2(c) )	\$ 0	0	0	0	0	0

	Change		
	(1)	(2)	(3)
	(Col 1 - 4) Ordinary	(Col 2 - 5) Capital	(Col 7 + 8) Total
Admission Calculation Components SSAP No. 101			
a. Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$ 0	0	0
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)	\$ 0	0	0
1. Adjusted Gross Deferred Tax Assets to be Realized Following the Balance Sheet Date.	\$ 0	0	0
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	\$ X X X	X X X	31,172
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.	\$ 0	0	0
d. Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total ( 2(a) + 2(b) + 2(c) )	\$ 0	0	0

	2022	2021
a. Ratio Percentage Used to Determine Recover Period And Threshold Limitation Amount.	7167.200%	11399.000%
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 15,786,216.000	15,527,907.000

	12/31/2022		12/31/2021		Change	
	(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.						
1. Adjusted Gross DTAs Amount From Note 9A1(c)	\$ 0	0	0	0	0	0
2. 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)	\$ 0	0	0	0	0	0
4. Percentage of Net Admitted 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

b. Does the Company's Tax-planning Strategies include the use of reinsurance? NO

**B. Regarding deferred tax liabilities that are not recognized:**

The Company does not have any DTLs described in SSAP No. 101 Income Taxes, a Replacement of SSAP No. 10R and SSAP No. 10, paragraph 23.

**C. Current income taxes incurred consist of the following major components:**

(1)	(2)	(3)
12/31/2022	12/31/2021	(Col 1 - 2) Change

## NOTES TO FINANCIAL STATEMENTS

(1) Current Income Tax			
a. Federal	\$ 66,000	49,000	17,000
b. Foreign	\$ 0	0	0
c. Subtotal	\$ 66,000	49,000	17,000
d. Federal Income Tax on net capital gains	\$ 0	0	0
e. Utilization of capital loss carry-forwards	\$ 0	0	0
f. Other	\$ 0	0	0
g. Federal and foreign income taxes incurred	\$ 66,000	49,000	17,000

## (2) Deferred Tax Assets:

## a. Ordinary

1. Discounting of unpaid losses	\$ 0	0	0
2. Unearned premium reserve	\$ 0	0	0
3. Policyholder reserves	\$ 0	0	0
4. Investments	\$ 0	0	0
5. Deferred acquisition costs	\$ 0	0	0
6. Policyholder dividends accrual	\$ 0	0	0
7. Fixed assets	\$ 0	0	0
8. Compensation and benefits accrual	\$ 0	0	0
9. Pension accrual	\$ 0	0	0
10. Receivables - nonadmitted	\$ 0	0	0
11. Net operating loss carry-forward	\$ 0	0	0
12. Tax credit carry-forward	\$ 0	0	0
13. Other (including items <5% of total ordinary tax assets)	\$ 0	0	0
99. Subtotal	\$ 0	0	0

b. Statutory valuation allowance adjustment	\$ 0	0	0
c. Nonadmitted	\$ 0	0	0
d. Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 0	0	0

## e. Capital:

1. Investments	\$ 0	0	0
2. Net capital loss carry-forward	\$ 0	0	0
3. Real estate	\$ 0	0	0
4. Other (including items <5% of total capital tax assets)	\$ 0	0	0
99. Subtotal	\$ 0	0	0

f. Statutory valuation allowance adjustment	\$ 0	0	0
g. Nonadmitted	\$ 0	0	0
h. Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ 0	0	0
i. Admitted deferred tax assets (2d + 2h)	\$ 0	0	0

## (3) Deferred Tax Liabilities:

## a. Ordinary

1. Investments	\$ 11,000	8,000	3,000
2. Fixed assets	\$ 0	0	0
3. Deferred and uncollected premium	\$ 0	0	0
4. Policyholder reserves	\$ 0	0	0
5. Other (including items <5% of total ordinary tax liabilities)	\$ 0	0	0
99. Subtotal	\$ 11,000	8,000	3,000

## b. Capital:

1. Investments	\$ 76,000	93,000	(17,000)
2. Real Estate	\$ 0	0	0
3. Other (including items <5% of total capital tax liabilities)	\$ 0	0	0
99. Subtotal	\$ 76,000	93,000	(17,000)

c. Deferred tax liabilities (3a99 + 3b99)	\$ 87,000	101,000	(14,000)
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(4) Net deferred tax assets/liabilities (2i - 3c)	\$ (87,000)	(101,000)	14,000
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D. Effective tax rates differ from the current statutory rate of 21% principally due to the effects of tax exempt income, accretion of market discount, deferred intercompany transactions.

E. Details Below to be mentioned

## NOTES TO FINANCIAL STATEMENTS

- (1) The Company has no net operating loss or tax credit carry-forwards available to offset future net income subject to Federal income tax.
- (2) The amount of Federal income taxes incurred and available for recoupment in the event of future losses is \$65,000 from the current year and \$54,000 from the preceding year.
- (3) The Company does not have deposits admitted under Section 6603 of the Internal Revenue Code.

F. The method of federal income tax allocation is subject to a written agreement. Allocation is based upon separate return calculations with credit applied for losses as appropriate. The Company has the enforceable right to recoup prior year payments in the event of future losses.

The Company's Federal income tax return is consolidated with the following entities:

Andover, Inc.	Liberty RE (Bermuda) Limited
America First Insurance Company	Liberty Sponsored Insurance (Vermont), Inc.
America First Lloyd's Insurance Company	Liberty Surplus Insurance Corporation
American Compensation Insurance Company	LIH-RE of America Corporation
American Economy Insurance Company	LIU Specialty Insurance Agency Inc.
American Fire and Casualty Company	LM General Insurance Company
American States Insurance Company	LM Insurance Corporation
American States Insurance Company of Texas	LM Property and Casualty Insurance Company
American States Lloyds Insurance Company	LMCRT-FRE-01 IC
American States Preferred Insurance Company	LMHC Massachusetts Holdings Inc.
Berkeley Management Corporation	Managed Care Associates Inc.
Bloomington Compensation Insurance Company	Meridian Security Insurance Company
Colorado Casualty Insurance Company	Mid-American Fire & Casualty Company
Consolidated Insurance Company	Milbank Insurance Company
Diversified Settlements, Inc.	Nationale Borg Reinsurance N.V.
Eagle Development Corporation	North Pacific Insurance Company
Emerald City Insurance Agency, Inc.	Ocasco Budget, Inc.
Employers Insurance Company of Wausau	OCI Printing, Inc.
Excelsior Insurance Company	Ohio Casualty Corporation
Excess Risk Reinsurance Inc.	Ohio Security Insurance Company
Facilitators, Inc.	Open Seas Solutions, Inc.
F.B. Beattie & Co., Inc.	Oregon Automobile Insurance Company
First National Insurance Company of America	Peerless Indemnity Insurance Company
First State Agency Inc.	Peerless Insurance Company
General America Corporation	Plaza Insurance Company
General America Corporation of Texas	Pymatuning, Inc.
General Insurance Company of America	Rianoc Research Corporation
Golden Eagle Insurance Corporation	Rockhill Holding Company
Gulf States AIF, Inc.	Rockhill Insurance Company
Hawkeye-Security Insurance Company	RTW, Inc.
Indiana Insurance Company	SAFECARE Company, Inc.
Insurance Company of Illinois	Safeco Corporation
Ironshore Holdings (US) Inc.	Safeco General Agency, Inc.
Ironshore Indemnity Inc.	Safeco Insurance Company of America
Liberty Specialty Markets Bermuda Limited	Safeco Insurance Company of Illinois
Ironshore Management Inc.	Safeco Insurance Company of Indiana
Ironshore Services Inc.	Safeco Insurance Company of Oregon
Ironshore Specialty Insurance Company	Safeco Lloyds Insurance Company
Ironshore Surety Holdings Inc.	Safeco National Insurance Company
LEXCO Limited	Safeco Properties, Inc.
Liberty-USA Corporation	Safeco Surplus Lines Insurance Company
Liberty Energy Canada, Inc.	San Diego Insurance Company
Liberty Financial Services, Inc.	SCIT, Inc.
Liberty Insurance Corporation	State Auto Financial Corporation
Liberty Insurance Holdings, Inc.	State Auto Holdings, Inc.
Liberty Insurance Underwriters Inc.	State Auto Insurance Company of Ohio
Liberty International Holdings Inc.	State Auto Insurance Company of Wisconsin
Liberty Life Holdings Inc.	State Auto Labs Corp.
Liberty Lloyds of Texas Insurance Company	State Auto Property & Casualty Insurance Company
Liberty Management Services, Inc.	State Automobile Mutual Insurance Company
Liberty Mexico Holdings Inc.	Stateco Financial Services, Inc.
Liberty Mutual Agency Corporation	The First Liberty Insurance Corporation
Liberty Mutual Credit Risk Transfer PCC Inc.	The Midwestern Indemnity Company
Liberty Mutual Fire Insurance Company	The National Corporation
Liberty Mutual Group Asset Management Inc.	The Netherlands Insurance Company
Liberty Mutual Group Inc.	The Ohio Casualty Insurance Company
Liberty Mutual Holding Company Inc.	Wausau Business Insurance Company
Liberty Mutual Insurance Company	Wausau General Insurance Company
Liberty Mutual Personal Insurance Company	Wausau Underwriters Insurance Company
Liberty Mutual Technology Group, Inc.	West American Insurance Company
Liberty Northwest Insurance Corporation	Winmar Company, Inc.

## NOTES TO FINANCIAL STATEMENTS

Liberty Personal Insurance Company	Workgrid Software, Inc
------------------------------------	------------------------

G. The Company does not expect the Federal and Foreign income tax loss contingencies, as determined in accordance with SSAP No. 5R, Liabilities, Contingencies and Impairments of Assets, with the modifications provided in SSAP No. 101, Income Taxes – A Replacement of SSAP No. 10R and SSAP No. 10, to significantly increase within twelve months of the reporting date.

H. Not applicable.

### I. Alternative Minimum Tax Credit

	<u>Amount</u>	
(1) Gross AMT Credit Recognized as:		
a. Current year recoverable	\$	0
b. Deferred tax asset (DTA)	\$	0
(2) Beginning Balance of AMT Credit Carryforward	\$	0
(3) Amounts Recovered	\$	0
(4) Adjustments	\$	0
(5) Ending Balance of AMT Credit Carryforward (5=2-3-4)	\$	0
(6) Reduction for Sequestration	\$	0
(7) Nonadmitted by Reporting Entity	\$	0
(8) Reporting Entity Ending Balance (8=5-6-7)	\$	0

On August 16, 2022, the U.S. enacted the Inflation Reduction Act (the "IRA"). For tax years beginning after December 31, 2022, the IRA imposes a new corporate alternative minimum tax (the "CAMT") on applicable corporations with average adjusted financial statement income in excess of \$1 billion for the three prior tax years. Based on the guidance currently available, Liberty Mutual Holding Company Inc. and subsidiaries, the controlled group of corporations which the Company is a member of, expects to be an applicable corporation subject to the CAMT in 2023. Therefore, the controlled group will perform the necessary CAMT calculations in order to determine whether or not it will have a CAMT liability for the tax year 2023. The 2022 financial statements do not include an estimated impact of the CAMT, because a reasonable estimate cannot be made.

### 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. All the outstanding shares of capital stock of the Company are held by Liberty Mutual Group Inc. ("LMGI"), a Massachusetts company. The ultimate parent of LMGI is Liberty Mutual Holding Company Inc. ("LMHC"), a Massachusetts company.

B. There are no transactions between the Company and its affiliates are listed on Schedule Y Part 2.

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

D. Not Applicable

At December 31, 2022, the Company reported a net \$(7,733,150) due from affiliates. In general, the terms of the intercompany arrangements require settlement at least quarterly.

E. Refer to Note 26 for information regarding the Inter-Company Reinsurance Agreement.

The Company is a party to a management services agreement (the "Agreement") with Liberty Mutual Insurance Company ("LMIC"). Under the Agreement, LMIC may provide the Company with office space, supplies, equipment, telephone and wire services, the use of computers and similar machines and services of personnel employed by LMIC and LMGI. Services provided include, but are not limited to, risk underwriting, claims processing, claims adjustments, policyholder services, contract management and administration. LMIC is reimbursed for the cost of all services which it provides under the Agreement.

The Company is a party to an investment management agreement with Liberty Mutual Group Asset Management Inc. ("LMGAM"). Under the agreement, LMGAM provides services to the Company.

The Company is a party to an Agency Agreement with Comparison Insurance Agency, LLC ("CIA") whereby CIA is appointed a property-casualty insurance agent of the Company and provides usual and customary services of an insurance agent on all insurance contracts placed by CIA with the Company.

The Company is a party to an Agency Agreement with Helmsman Insurance Agency LLC ("HIA") whereby HIA is appointed a property-casualty insurance agent of the Company and provides usual and customary services of an insurance agent on all insurance contracts placed by HIA with the Company.

The Company is a party to a Federal Tax Sharing Agreement between LMHC and affiliates (Refer to Note 9F).

F. The Company has not made any guarantees or initiated any undertakings, written or otherwise, for the benefit of affiliates or other related parties

G. The Company is a member of a holding company structure as illustrated in Schedule Y Part 1.

H. The Company does not own shares of any upstream intermediate or ultimate parent, either directly or indirectly via a downstream subsidiary, controlled or affiliated company

I. The Company does not own investments in subsidiary, controlled or affiliated companies.

J. The Company did not recognize any impairment write down for its SCA companies during the statement period

## NOTES TO FINANCIAL STATEMENTS

K. The Company does not use CARVM in calculating its investment in its foreign subsidiaries.

L. The Company does not hold any investments in downstream non-insurance holding companies.

**M. All SCA Investments**

Not Applicable

**N. Investment in Insurance SCAs**

Not Applicable

**O. SCA or SSAP No. 48 Entity Loss Tracking**

Not Applicable

**11. Debt**

**A. Debt (Including Capital Notes)**

The Company has no debt, including capital notes.

**B. FHLB (Federal Home Loan Bank) Agreements**

(1) Not Applicable

(2) FHLB Capital Stock

a. Aggregate Totals

1. Current Year

	(1) Total 2+3	(2) General Account	(3) Protected Cell Accounts
(a) Membership Stock - Class A	\$ 0	0	0
(b) Membership Stock - Class B	\$ 0	0	0
(c) Activity Stock	\$ 0	0	0
(d) Excess Stock	\$ 0	0	0
(e) Aggregate Total (a + b + c + d)	\$ 0	0	0
(f) Actual or est. Borrowing Capacity as Determined by the Insurer	\$ 0	X X X	X X X

2. Prior Year-end

	(1) Total 2+3	(2) General Account	(3) Protected Cell Accounts
(a) Membership Stock - Class A	\$ 0	0	0
(b) Membership Stock - Class B	\$ 0	0	0
(c) Activity Stock	\$ 0	0	0
(d) Excess Stock	\$ 0	0	0
(e) Aggregate Total (a + b + c + d)	\$ 0	0	0
(f) Actual or est. Borrowing Capacity as Determined by the Insurer	\$ 0	X X X	X X X

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

	1 Current Year Total (2 + 3 + 4 + 5 + 6)	2 Not Eligible for Redemption	Eligible for Redemption			
			3 Less Than 6 Months	4 6 Months to Less Than 1 Year	5 1 to Less Than 3 Years	6 3 to 5 Years
1. Class A	\$ 0	0	0	0	0	0
2. Class B	\$ 0	0	0	0	0	0

(3) Collateral Pledged to FHLB

a. Amount Pledged as of Reporting Date

	1 Fair Value	2 Carrying Value	3 Aggregate Total Borrowing
1. Current Year Total General and Protected Cell (Lines 2 + 3)	\$ 0	0	0
2. Current Year General Account (Total Pledged)	\$ 0	0	0
3. Current Year Protected Cell (Total Pledged)	\$ 0	0	0
4. Prior Year-end Total General and Protected Cell (Total Pledged)	\$ 0	0	0

## NOTES TO FINANCIAL STATEMENTS

b. Maximum Amount Pledged During Reporting Period

	1	2	3
	Fair Value	Carrying Value	Amount Borrowed at Time of Max. Collateral
1. Current Year Total General and Protected Cell (Lines 2 + 3)	\$ 0	0	0
2. Current Year General Account (Maximum Pledged)	\$ 0	0	0
3. Current Year Protected Cell (Maximum Pledged)	\$ 0	0	0
4. Prior Year-end Total General and Protected Cell (Maximum Pledged)	\$ 0	0	0

(4) Borrowing From FHLB

a. Amount as of the Reporting Date

1. Current Year

	1	2	3	4
	Total 2+3	General Account	Protected Cell Account	Funding Agreements Reserves Established
(a) Debt	\$ 0	0	0	X X X
(b) Funding Agreements	\$ 0	0	0	0
(c) Other	\$ 0	0	0	X X X
(d) Aggregate Total (a + b + c)	\$ 0	0	0	0

2. Prior Year-end

	1	2	3	4
	Total 2+3	General Account	Protected Cell Account	Funding Agreements Reserves Established
(a) Debt	\$ 0	0	0	X X X
(b) Funding Agreements	\$ 0	0	0	0
(c) Other	\$ 0	0	0	X X X
(d) Aggregate Total (a + b + c)	\$ 0	0	0	0

b. Maximum Amount during Reporting Period (Current Year)

	1	2	3
	Total 2+3	General Account	Protected Cell Accounts
1. Debt	\$ 0	0	0
2. Funding Agreements	\$ 0	0	0
3. Other	\$ 0	0	0
4. Aggregate Total (1 + 2 + 3)	\$ 0	0	0

c. FHLB- Prepayment Obligations

	Does the company have prepayment obligations under the following arrangements (YES/NO)?
1. Debt	
2. Funding Agreements	
3. Other	

c.

There were no outstanding borrowings as of December 31, 2022.

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

A. Defined Benefit Plans

The Company does not have any direct employees and therefore, does not have any direct obligations for a defined benefit plan, deferred compensation arrangements, compensated absences or other postretirement benefit plans. Services for the operation of the Company are provided under provisions of the management services agreements, as described in Note 10F.

Overfunded		Underfunded	
2022	2021	2022	2021

## NOTES TO FINANCIAL STATEMENTS

(1) Change in benefit obligation:					
a. Pension Benefits					
1. Benefit obligation at beginning of year	\$	0	0	0	0
2. Service cost	\$	0	0	0	0
3. Interest cost	\$	0	0	0	0
4. Contribution by plan participants	\$	0	0	0	0
5. Actuarial gain (loss)	\$	0	0	0	0
6. Foreign currency exchange rate changes	\$	0	0	0	0
7. Benefits paid	\$	0	0	0	0
8. Plan amendments	\$	0	0	0	0
9. Business combinations, etc.	\$	0	0	0	0
10. Benefit obligation at end of year	\$	0	0	0	0
b. Postretirement Benefits					
1. Benefit obligation at beginning of year	\$	0	0	0	0
2. Service cost	\$	0	0	0	0
3. Interest cost	\$	0	0	0	0
4. Contribution by plan participants	\$	0	0	0	0
5. Actuarial gain (loss)	\$	0	0	0	0
6. Foreign currency exchange rate changes	\$	0	0	0	0
7. Benefits paid	\$	0	0	0	0
8. Plan amendments	\$	0	0	0	0
9. Business combinations, etc.	\$	0	0	0	0
10. Benefit obligation at end of year	\$	0	0	0	0
c. Special or Contractual Benefits Per SSAP No. 11					
1. Benefit obligation at beginning of year	\$	0	0	0	0
2. Service cost	\$	0	0	0	0
3. Interest cost	\$	0	0	0	0
4. Contribution by plan participants	\$	0	0	0	0
5. Actuarial gain (loss)	\$	0	0	0	0
6. Foreign currency exchange rate changes	\$	0	0	0	0
7. Benefits paid	\$	0	0	0	0
8. Plan amendments	\$	0	0	0	0
9. Business combinations, etc.	\$	0	0	0	0
10. Benefit obligation at end of year	\$	0	0	0	0

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2022	2021	2022	2021	2022	2021
(2) Change in plan assets:						
a. Fair value of plan assets beginning of year	\$	0	0	0	0	0
b. Actual return on plan assets	\$	0	0	0	0	0
c. Foreign currency exchange rate changes	\$	0	0	0	0	0
d. Reporting Entity contribution	\$	0	0	0	0	0
e. Plan participants contributions	\$	0	0	0	0	0
f. Benefits paid	\$	0	0	0	0	0
g. Business combinations, etc.	\$	0	0	0	0	0
h. Fair value of plan assets end of year	\$	0	0	0	0	0

(3) Funded status:					
a. Components:					
1. Prepaid benefit costs	\$	0	0	0	0
2. Overfunded plan assets	\$	0	0	0	0
3. Accrued benefit costs	\$	0	0	0	0
4. Liability for pension benefits	\$	0	0	0	0
b. Assets and liabilities recognized					
1. Assets (nonadmitted)	\$	0	0	0	0
2. Liabilities recognized	\$	0	0	0	0
c. Unrecognized liabilities	\$	0	0	0	0



## NOTES TO FINANCIAL STATEMENTS

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2022	2021	2022	2021	2022	2021
(4) Components of net periodic benefit cost:						
a. Service cost	\$ 0	0	0	0	0	0
b. Interest cost	\$ 0	0	0	0	0	0
c. Expected return on plan assets	\$ 0	0	0	0	0	0
d. Transition asset or obligation	\$ 0	0	0	0	0	0
e. Gains and losses	\$ 0	0	0	0	0	0
f. Prior Service cost or credit	\$ 0	0	0	0	0	0
g. Gain or loss recognized due to a settlement or curtailment	\$ 0	0	0	0	0	0
h. Total net periodic benefit cost	\$ 0	0	0	0	0	0
i. ERP P&L Charge	\$ 0	0	0	0	0	0
j. Total net periodic benefit cost	\$ 0	0	0	0	0	0

	Pension Benefits		Postretirement Benefits	
	2022	2021	2022	2021
(5) Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost:				
a. Items not yet recognized as a components of net period cost - prior year	\$ 0	0	0	0
b. Net transition asset or obligation recognized	\$ 0	0	0	0
c. Net prior service cost or credit arising during the period	\$ 0	0	0	0
d. Net prior service cost of credit recognized	\$ 0	0	0	0
e. Net gain and loss arising during the period	\$ 0	0	0	0
f. Net gain and loss recognized	\$ 0	0	0	0
g. Items not yet recognized as a component of net periodic cost - current year	\$ 0	0	0	0

	Pension Benefits		Postretirement Benefits	
	2022	2021	2022	2021
(6) Amounts in unassigned funds (surplus) expected to be recognized in the next fiscal year as components of net periodic benefit cost:				
a. Net transition asset or obligation	\$ 0	0	0	0
b. Net prior service cost or credit	\$ 0	0	0	0
c. Net recognized gains and losses	\$ 0	0	0	0

(7) Weighted-average assumptions used to determine net periodic benefit costs as of Dec. 31:		
a. Weighted average discount rate	0.000	0.000
b. Expected long-term rate of return on plan assets	0.000	0.000
c. Rate of compensation increase	0.000	0.000
d. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)	0.000	0.000

Weighted-average assumptions used to determine projected benefit obligations as of Dec. 31:

e. Weighted average discount rate	0.000	0.000
f. Rate of compensation increase	0.000	0.000
g. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)	0.000	0.000

(8) Not Applicable

(9) Not Applicable

(10) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated:

2023	\$ 0
2024	\$ 0
2025	\$ 0
2026	\$ 0
2027	\$ 0
2028 thru 2032	\$ 0

**B.**

(1) Information about Plan Assets

Not Applicable

**C.**

(1) Fair Value Measurements at December 31, 2022

Not Applicable

**D. Narrative description of expected long term rate of return assumption**

Not Applicable

**E. Defined Contribution Plan**

Not Applicable

**F. Multiemployer Plans**

Not Applicable

## NOTES TO FINANCIAL STATEMENTS

**G. Consolidated/Holding Company Plans**

Not Applicable

**H. Postemployment benefits and Compensated Absences**

Not Applicable

**I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-**

Not Applicable

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

**A.** The Company has 70,000 shares authorized, issued and outstanding as of December 31, 2022. All shares have a stated par value of \$100.

**B.** Preferred Stock

Not applicable.

**C.** There are no dividend restrictions.

**D.** The Company did not pay any dividend to its parent in 2022.

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**E.** The maximum amount of dividends that can be paid by New Hampshire-domiciled insurance companies to shareholders without prior approval of the Insurance Commissioner is less than 10% of surplus or net income. The maximum dividend payout which may be made without prior approval in 2023 is \$ 244,309.

**F.** The Company does not have restricted unassigned surplus.

**G.** The Company had no advances to surplus.

**H.** The Company does not hold stock for special purposes.

**I.** The Company does not hold special surplus funds.

**J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses:**

\$ 0

Not Applicable

**K. The company issued the following surplus debentures or similar obligations:**

Not Applicable

**L. The impact of any restatement due to prior quasi-reorganizations is as follows:**

Not Applicable

**M.** Not Applicable

**14. Liabilities, Contingencies and Assessments**

**A.** Contingent Commitments

Refer to Note 10E

( Total SSAP No. 97 - Investments in Subsidiary Partnerships and Limited Liability Companies \$ 0

## NOTES TO FINANCIAL STATEMENTS

(2)

1  Nature and circumstances of guarantee and key attributes, including date and duration of agreement	2  Liability recognition of guarantee. (Include amount recognized at inception. If no initial recognition, document exception allowed under SSAP No. 5R)	3  Ultimate financial statement impact if action under the guarantee is required	4  Maximum potential amount of future payments (undiscounted) the guarantor could be required to make under the guarantee. If unable to develop an estimate, this should be specifically noted. (a)	5  Current status of payment or performance risk of guarantee. Also provide additional discussion as warranted
Total	0	X X X	0	X X X

(a) Pursuant to the terms of the guarantee, the Company would be required to perform in the event of default by the Company, but would also be permitted to take control of the real estate.

(3)

a. Aggregate Maximum Potential of Future Payments of All Guarantees  
(undiscounted) the guarantor could be required to make under guarantees.  
(Should equal total of Column 4 for (2) above.)

\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0
\$	0

b. Current Liability Recognized in F/S:

- 1. Noncontingent Liabilities
- 2. Contingent Liabilities

c. Ultimate Financial Statement Impact if action under the guarantee is required.

- 1. Investments in SCA
- 2. Joint Venture
- 3. Dividends to Stockholders (capital contribution)
- 4. Expense
- 5. Other
- 6. Total (Should equal (3)a.)

**B. Assessments**

(1) The Company is subject to guaranty fund and other assessments by the states in which it writes business. Guaranty fund assessments and premium-based assessments are presumed probable when the premium on which the assessments are expected to be based are written. In the case of loss-based assessments, the event that obligates the entity is an entity incurring the losses on which the assessments are expected to be based.

The Company has no net guaranty fund or other assessment liabilities to report. Refer to Note 26.

(2)

a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end \$ 0

b. Decreases current year:

c. Increases current year:

d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$ 0

(3)

a. Discount Rate Applied 0.000

Name of the Insolvency	Guaranty Fund Assessment		Related Assets	
	Undiscounted	Discounted	Undiscounted	Discounted

## NOTES TO FINANCIAL STATEMENTS

c. Number of Jurisdictions, Ranges of Years Used to Discount and Weighted Average Number of Years on the Discountin Period for Payables and Recoverables by Insolvency:

Name of the Insolvency	Payables			Recoverables		
	Number of Jurisdicti	Range of Years	Weighted Average Number of Years	Number of Jurisdictions	Range of Year	Weighted Avera Number of Years
.....	.....	.....	.....	.....	.....	.....

**C. Gain Contingencies**

Not Applicable

**D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits**

Claims related ECO and bad faith losses paid during the reporting period \$ 829,027

Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period: (a) 0-25 claims (b) 26-50 claims (c) 51-100 claims (d) 101-500 claims (e) More than 500 claims

Answer (A, B, C, D, or E): B

Indicate whether claim count information is disclosed (f) per claim or (g) per claimant  
 Answer (F or G): F

**E. Product Warranties**

Not Applicable

**F. Joint and Several Liabilities**

The Company is not a participant in any joint and several liabilities.

**G. All Other Contingencies**

Lawsuits arise against the Company in the normal course of business. Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the financial position of the Company.  
 As disclosed in Note 9 F, the Company is a member of a controlled group for federal income tax purposes, and that group includes LMGI. LMGI is the plan sponsor of the Liberty Mutual Retirement Benefit Plan, a qualified plan under federal law. Pursuant to federal law, if LMGI has not made the minimum required contributions with respect to the Liberty Mutual Retirement Benefit Plan, the Company, jointly and severally with all other members of the controlled group, would be contingently liable to make such contributions

**15. Leases.**

**A. Lessee Leasing Arrangements**

The Company has no net lease obligations. Refer to Note 26.

(1)

- a. Not applicable
- b. Not applicable
- c. Not applicable

(2)

- a. At December 31, 2023, the minimum aggregate rental commitments are as follows:  
 (Dollars in thousands) Operating Leases

Year Ending December 31 Operating Leases	
2023 (as seen in Notes text)	\$ <span style="border: 1px solid black; padding: 2px;">0</span>
2024 (as seen in Notes text)	\$ <span style="border: 1px solid black; padding: 2px;">0</span>
2025 (as seen in Notes text)	\$ <span style="border: 1px solid black; padding: 2px;">0</span>
2026 (as seen in Notes text)	\$ <span style="border: 1px solid black; padding: 2px;">0</span>
2027 (as seen in Notes text)	\$ <span style="border: 1px solid black; padding: 2px;">0</span>
2028 & thereafter	\$ <span style="border: 1px solid black; padding: 2px;">0</span>
Total	\$ <span style="border: 1px solid black; padding: 2px;">0</span>

(3) Not Applicable

**B. Lessor Leases**

(1) Operating Leases

## NOTES TO FINANCIAL STATEMENTS

a. Leasing is not a significant part of the Company's business activities.

c. Future minimum lease payment receivables under noncancelable leasing arrangements as of December 31, 2022 are as follows: Operating Leases

Year Ending December 31	
2023 (as seen in Notes text)	\$ 0
2024 (as seen in Notes text)	\$ 0
2025 (as seen in Notes text)	\$ 0
2026 (as seen in Notes text)	\$ 0
2027 (as seen in Notes text)	\$ 0
2028 & thereafter	\$ 0
Total	\$ 0

(2) Leveraged Leases

b. The Company's investment in leveraged leases relates to equipment... 2022                      2021  
 Dec. 31, 2022 were as shown below: (In thousands) (years as seen in Notes text)

	2022	2021
Income from leveraged leases before income tax including investment tax credit	\$ 0	0
Less current income tax	\$ 0	0
Net income from leverage leases	\$ 0	0

c. The components of the investment in leveraged leases at Dec. 31, 2022 and Dec. 31, 2021 were as shown below: (In thousands) 2022                      2021  
(years as seen in Notes text)

	2022	2021
Lease contracts receivable (net principal & interest non-recourse financing)	\$ 0	0
Estimated residual value of leased assets	\$ 0	0
Unearned and deferred income	\$ 0	0
Investment in leveraged leases	\$ 0	0
Deferred income taxes related to leveraged leases	\$ 0	0
Net investment in leveraged leases	\$ 0	0

**16. Information About Financial Instruments With Off-Balance Sheet Risk And Financial Instruments With Concentrations of Credit Risk**

The Company is not exposed to financial instruments with off-balance sheet risk or concentration of credit risk.

(1) The table below summarizes the face amount of the Company's financial instruments with off-balance-sheet risk.

	<u>ASSETS</u>		<u>LIABILITIES</u>	
	2022	2021	2022	2021
	(years as seen in Notes text)		(years as seen in Notes text)	
a. Swaps	\$ 0	0	0	0
b. Futures	\$ 0	0	0	0
c. Options	\$ 0	0	0	0
d. Totals	\$ 0	0	0	0

See Schedule DB of the Company's annual statement for additional detail.

(2) Not Applicable.

(3) Not Applicable.

(4) Not Applicable.

**17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**

**A. Transfers of Receivables Reported as Sales**

(1) Not Applicable

(2) Not Applicable

**B. Transfers and Servicing of Financial Assets**

(1) Not Applicable

## NOTES TO FINANCIAL STATEMENTS

1 Identification of Transaction	2 BACV at Time of Transfer	3 Original Reporting Schedule of the Transferred Assets	4 Amount Derecognized from Sale Transaction	5 Amount that Continues to be recognized in the Statement of Financial position (Col.2 minus 4)	6 BACV of acquired interest in transferred assets	7 Reporting Schedule of Acquired Interests	8 Percentage of interests of a reporting entity's transferred asset acquired by Affiliated entities

**C. Wash Sales:**

- (1) Not Applicable
- (2) Details by NAIC designation 3 or below of securities sold during the year ended, December 31, 2022 and reacquired within 30 days of the sale date are:

Description	NAIC Designation*	Number of Transactions	Book Value of Securities Sold	Cost of Securities Repurchased	Gain (Loss)

\* The NAIC Designation Column should indicate 3 through 6 or "U" for Unrated

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

Not Applicable

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

The Company has no direct premiums written or produced through managing general agents or third party administrators.

**20. Fair Value Measurements**

**A. Inputs Used for Assets and Liabilities Measured at Fair Value**

Pursuant to the guidance in SSAP No. 100, Fair Value Measurements, the Company carries no assets or liabilities on its balance sheet measured at fair value.

- (1) Fair Value Measurements at Reporting Date

(1) Description	(2) (Level 1)	(3) (Level 2)	(4) (Level 3)	(6) Net Asset Value	(7) Total
<b>a. Assets at fair Value</b>					
<b>b. Liabilities at fair value</b>					

- (2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Beginning Balance at 01/01/2022				Total gains and (losses) included in Net income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2022
Assets:										
Total	0	0	0	0	0	0	0	0	0	0

## NOTES TO FINANCIAL STATEMENTS

	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Beginning Balance at 01/01/2022				Total gains and (losses) included in Net income	Total gains and (losses) included in Surplus					Ending Balance at 12/31/2022
Transfers in to Level 3 (a)			Transfers out of Level 3 (b)			Purchases	Issuances	Sales	Settlements	
Total	0	0	0	0	0	0	0	0	0	0

**B. Other Fair Value Disclosures**  
Not Applicable

**C. Aggregate Fair Value of All Financial Instruments**

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
01 Cash, Cash Equivalents & Short Term	\$ 25,757	25,757	0	0	0	25,757	0
02 Bonds	\$ 21,846,988	23,369,375	11,129,875	10,717,113	0	0	0
03 Preferred Stock	\$ 0	0	0	0	0	0	0
04 Common Stock	\$ 0	0	0	0	0	0	0
05 Securities Lending	\$ 0	0	0	0	0	0	0
06 Mortgage Loans	\$ 0	0	0	0	0	0	0
07 Surplus Notes	\$ 0	0	0	0	0	0	0
09 Net Derivatives	\$ 0	0	0	0	0	0	0
Total	\$ 21,872,745	23,395,132	11,129,875	10,717,113	0	25,757	0

**D. Reasons Not Practical to Estimate Fair Value**

Not Applicable

**E. Instruments Measures at Net Asset Value (NAV)**

The Company elected to use NAV for all money market mutual funds in lieu of fair value as NAV is more readily available. These funds are backed by high quality, very liquid short-term instruments and the probability is remote that the funds would be sold for a value other than NAV.

**21. Other items**

**A. Unusual or Infrequent Items**

The Company has no unusual or infrequent items to report.

**B. Troubled Debt Restructuring**

Not Applicable

**C. Other Disclosures**

1. Interrogatory 6.1

The Company cedes 100% of its business to Liberty Mutual Insurance Company, the lead company in the Liberty Mutual Pool. Liberty Mutual Insurance Company purchases external catastrophe reinsurance coverage.

Interrogatory 6.2

As a member of the Liberty Intercompany Pool, the Pool employs industry recognized catastrophe modeling software to estimate the Probable Maximum Loss. For property exposures, we utilize RMS's RiskLink v15.0 and AIR's Touchstone v3.1 software. For workers' compensation, Liberty Mutual utilizes RiskLink v15.0 from RMS.

Interrogatory 6.3

The Company cedes 100% of its business to Liberty Mutual Insurance Company, the lead company in the Liberty Mutual Pool. Liberty Mutual Insurance Company purchases external catastrophe reinsurance coverage.

2. Florida Special Disability Trust Fund

Not applicable.

**D. Business Interruption Insurance Recoveries**

Not Applicable

**E. State Transferable and Non-transferable Tax Credits**

(1) Description of State Transferrable Tax Credits

The Company does not hold state transferable and/or non-transferable tax credits.

## NOTES TO FINANCIAL STATEMENTS

(1) Description of State Transferable Tax Credits	State	Carrying Value	Unused Amount
.....	.....	.....	.....

(2) Method of Estimating Utilization of Remaining Transferable and Non-transferable State Tax Credits

(3) Impairment Loss

	Total Admitted	Total Non-Admitted
a. Transferable .....	0	0
b. Non-transferable .....	0	0

**F. Subprime-Mortgage-Related Risk Exposure**

Not Applicable

**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

**22. Events Subsequent**

The Company evaluated subsequent events through February 23, 2023, the date the annual statement was available to be issued.

There were no events subsequent to December 31, 2022 that would require disclosure.

The Company did not receive any assessments under the Affordable Care Act.

**23. Reinsurance**

**A. Unsecured Reinsurance Recoverables**

Excluding amounts arising pursuant to the Intercompany Reinsurance Agreements, there are no unsecured reinsurance recoverables with an individual reinsurer which exceed 3% of policyholder's surplus.

.....	.....	.....	.....
-------	-------	-------	-------

**B. Reinsurance Recoverable in Dispute**

Not Applicable

**C. REINSURANCE ASSUMED AND CEDED**

(1) Report the maximum amount of return commission which would have been due reinsurers....

	Assumed		Ceded		Net	
	Premium Reserve (1)	Commission Equity (2)	Premium Reserve (3)	Commission Equity (4)	Premium Reserve (5)	Commission Equity (6)
a. Affiliates .....	\$ 0	0	2,052,813,880	0	(2,052,813,880)	0
b. All Other .....	\$ 1	0	0	0	1	0
c. TOTAL .....	\$ 1	0	2,052,813,880	0	(2,052,813,879)	0
d. Direct Unearned Premium Reserve .....	\$ 2,052,813,879					

Line (c) of Column 3 must Equal page 3, Line 9, first inside amt.

(2) Additional or return commission ... on any form of profit sharing arrangements

The Company has no contingent commissions, sliding scale, or other profit sharing commissions for direct, assumed or ceded business.

REINSURANCE

	Direct	Assumed	Ceded	Net
a. Contingent Commission .....	\$ 0	0	0	0
b. Sliding Scale Adjustments .....	\$ 0	0	0	0
c. Other Profit Commission Arrangements .....	\$ 0	0	0	0
d. TOTAL .....	\$ 0	0	0	0

(3) Reinsurance

	<u>Ultimate</u>	<u>Fair Value</u>	<u>Initial</u>	<u>Maturity</u>
<u>Protected Cell Name</u>	<u>Covered Exposure</u>	<u>Exposure Amt</u>	<u>of Assets 12/31</u>	<u>Contract Date</u>
.....	.....	.....	.....	.....
Totals Lines 23C0301 through 23C0305		0	0	



## NOTES TO FINANCIAL STATEMENTS

### D. UNCOLLECTIBLE REINSURANCE

The Company did not write off any uncollectible balances in the current year.

(1) The company has written off in the current year reinsurance balances due (from the companies listed below) in the amount of 0 which is reflected as:

a.	Losses incurred	\$	0
b.	Loss adjustment expenses incurred	\$	0
c.	Premiums earned	\$	0
d.	Other	\$	0

e.

Company	Amount

### E. COMMUTATION OF CEDED REINSURANCE

The Company did not commute any reinsurance treaties in the current year.

The company has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

(1)	Losses Incurred	\$	0
(2)	Loss adjustment expenses incurred	\$	0
(3)	Premiums Earned	\$	0
(4)	Other	\$	0

(5)

Company	Amount

### F. RETROACTIVE REINSURANCE

The Company does not have any retroactive reinsurance agreements.

(1)

		Reported Company	
As:		Assumed	Ceded
a. Reserves Transferred:			
1.	Initial Reserves	\$	0
2.	Adjustments - Prior Year(s)	\$	0
3.	Adjustments - Current Year	\$	0
4.	Current Total	\$	0
b. Consideration Paid or Received:			
1.	Initial Consideration	\$	0
2.	Adjustments - Prior Year(s)	\$	0
3.	Adjustments - Current Year	\$	0
4.	Current Total	\$	0
c. Paid Losses Reimbursed or Recovered:			
1.	Prior Year(s)	\$	0
2.	Current Year	\$	0
3.	Current Total	\$	0
d. Special Surplus from Retroactive Reinsurance:			
1.	Initial Surplus Gain or Loss	\$	0
2.	Adjustments - Prior Year(s)	\$	0
3.	Adjustments - Current Year	\$	0
4.	Current Year Restricted Surplus	\$	0
5.	Cumulative Total Transferred to Unassigned Funds	\$	0
e. All cedents and reinsurers involved in all transactions included in summary totals above:			

## NOTES TO FINANCIAL STATEMENTS

Column 1: Cedents and Reinsurers Company Name	Assumed Amt	Ceded Amt
.....	.....	.....
Total*	\$ 0	0

\* Total amounts must agree with totals in a. 4 above. Include the NAIC Company Code or Alien Insurer Identification Number for each insurer listed.

f.

1. Total Paid Loss/LAE amounts recoverable (for authorized, una and certified reinsurers), and for amounts recoverable the colle (for authorized, unauthorized and certified reinsurers) as respects amounts recoverable from unauthorized reinsurers:

Authorized Reinsurers Total: Company Name	Total Paid/Loss/L Recoverable	Amount over 90 days overdue
.....	.....	.....
Total	\$ 0	0

2. Total Paid Loss/LAE amounts recoverable (for authorized, una and certified reinsurers), and for amounts recoverable the colle (for authorized, unauthorized and certified reinsurers) as respects amounts recoverable from unauthorized reinsurers:

Unauthorized Reinsurers Total: Company Name	Total Paid/Loss/L Recoverable	Amt over 90 Days Overdue	Collateral Held
.....	.....	.....	.....
Total	\$ 0	0	0

3. Total Paid Loss/LAE amounts recoverable (for authorized, una and certified reinsurers), and for amounts recoverable the colle (for authorized, unauthorized and certified reinsurers) as respects amounts recoverable from unauthorized reinsurers:

Certified Reinsurers Total: Company Name	Total Paid/Loss/L Recoverable	Amt over 90 Days Overdue	Collateral Held
.....	.....	.....	.....
Total	\$ 0	0	0

4. Total Paid Loss/LAE amounts recoverable (for authorized, una and certified reinsurers), and for amounts recoverable the colle (for authorized, unauthorized and certified reinsurers) as respects amounts recoverable from unauthorized reinsurers:

.....	Total Paid/Loss/L	Amt over 90
.....	.....	.....
Total	\$ 0	0

**G. Reinsurance Accounted for as a Deposit**

The Company has not entered into any reinsurance agreements that have been accounted for as deposits as of December 31, 2022.

**H. Disclosures for the Transfer of Property and Casualty Run-off Agreements**

The Company has not entered into any agreements which have been approved by their domiciliary regulator and have qualified pursuant to SSAP No. 62R, Property and Casualty Reinsurance to receive P&C Run-off Accounting Treatment.

**I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation**

- (1) Reporting Entity Ceding to Certified Reinsurer Whose Rating Was Downgraded or Status Subject to Revocation

a.

Name of Certified Reinsurer	Relationship to Reporting Entity	Date of Action	Jurisdiction of Action	Collateral Percentage Requirement		Net Obligation Subject to Collateral	Collateral Required (but not Received)
				Before	After		
.....	.....	.....	.....	.....	.....	.....	.....

- b. The Company does not transact business with Certified Reinsurers.

- (2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation

a.

Date of Action	Jurisdiction of Action	Collateral Percentage Requirement		Net Obligation Subject to Collateral	Collateral Required (but not Received)
		Before	After		
.....	.....	.....	.....	.....	.....

## NOTES TO FINANCIAL STATEMENTS

b. The Company is not a Certified Reinsurer.

**J. Reinsurance Agreements Qualifying for Reinsurer Aggregation**

(1) The Counterparty reporting party does not apply to the Company.

(2) The amount of unexhausted limit as of the reporting date.

	Amount of Unexhausted Limit
Name of Reinsurer	

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination**

A. The Company does not have net accrued retrospective premiums. Refer to Note 26.

B. The Company does not have net accrued retrospective premiums. Refer to Note 26.

C. The Company does not have net accrued retrospective premiums. Refer to Note 26.

**D. Medical loss ratio rebates required pursuant to the Public Health Service Act.**

Not Applicable

E.

(1) For Ten Percent (10%) Method of Determining Non-admitted Retrospective Premi

Not Applicable

**F. Risk-Sharing Provisions of the Affordable Care Act (ACA)**

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

NO

The Company did not receive any assessments under the Affordable Care Act.

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year.

a. Permanent ACA Risk Adjustment Program

Assets

AMOUNT

1. Premium adjustments receivable due to ACA Risk Adjustment Liabilities \$

Liabilities

2. Risk adjustment user fees payable for ACA Risk Adjustment \$

3. Premium adjustments payable due to ACA Risk Adjustment Operations (Revenue & Expense) \$

Operations (Revenue & Expense)

4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment \$

5. Reported in expenses as ACA risk adjustment user fees (incurred/paid) \$

b. Transitional ACA Reinsurance Program

Assets

1. Amounts recoverable for claims paid due to ACA Reinsurance \$

2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability) \$

3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance \$

Liabilities

4. Liabilities for contributions payable due to ACA Reinsurance -not reported as ceded premium \$

5. Ceded reinsurance premiums payable due to ACA Reinsurance \$

## NOTES TO FINANCIAL STATEMENTS

6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	\$ <span style="border: 1px solid black; padding: 2px 10px;">0</span>
Operations (Revenue & Expense)	
7. Ceded reinsurance premiums due to ACA Reinsurance	\$ <span style="border: 1px solid black; padding: 2px 10px;">0</span>
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	\$ <span style="border: 1px solid black; padding: 2px 10px;">0</span>
9. ACA Reinsurance contributions- not reported as ceded premium	\$ <span style="border: 1px solid black; padding: 2px 10px;">0</span>
c. Temporary ACA Risk Corridors Program	
Assets	
1. Accrued retrospective premium due to ACA Risk Corridors	\$ <span style="border: 1px solid black; padding: 2px 10px;">0</span>
Liabilities	
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	\$ <span style="border: 1px solid black; padding: 2px 10px;">0</span>
Operations (Revenue & Expense)	
3. Effect of ACA Risk Corridors on net premium income (paid/received)	\$ <span style="border: 1px solid black; padding: 2px 10px;">0</span>
4. Effect of ACA risk Corridors on change in reserves for rate credits	\$ <span style="border: 1px solid black; padding: 2px 10px;">0</span>

Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reason for adjustments to prior year balance.

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Unsettled of the Reporting Date		
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)	
					5	6	7	8	9	10	
	1	2	3	4	5	6	7	8	9	10	
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable	0	0	0	0	0	0	0	0	A	0	0
2. Premium adjustments (payable)	0	0	0	0	0	0	0	0	B	0	0
3. Subtotal ACA Permanent Risk Adjustment Program	0	0	0	0	0	0	0	0		0	0
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid	0	0	0	0	0	0	0	0	C	0	0
2. Amts recoverable for claims unpaid (contra liability)	0	0	0	0	0	0	0	0	D	0	0
3. Amounts receivable relating to uninsured plans	0	0	0	0	0	0	0	0	E	0	0
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	0	0	0	0	0	0	0	0	F	0	0
5. Ceded reinsurance premiums payable	0	0	0	0	0	0	0	0	G	0	0
6. Liability for amounts held under uninsured plans	0	0	0	0	0	0	0	0	H	0	0
7. Subtotal ACA Transitional Reinsurance Program	0	0	0	0	0	0	0	0		0	0
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium	0	0	0	0	0	0	0	0	I	0	0
2. Reserve for rate credits or policy exp. rating refunds	0	0	0	0	0	0	0	0	J	0	0
3. Subtotal ACA Risk Corridors Program	0	0	0	0	0	0	0	0		0	0
d. Total for ACA Risk Sharing Provisions	0	0	0	0	0	0	0	0		0	0

Explanations of Adjustments

- A Not Applicable
  
- B Not Applicable
  
- C Not Applicable
  
- D Not Applicable

## NOTES TO FINANCIAL STATEMENTS

E Not Applicable

F Not Applicable

G Not Applicable

H Not Applicable

I Not Applicable

J Not Applicable

(4 Roll-Forward of Risk Corridors Asset and Liability Balances by Progra

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date			
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	R	Cumulative Balance from Prior Year (Cols. 1 - 3 + 7)	Cumulative Balance from Prior Year (Cols. 2 - 4 + 8)	
					5	6	7	8	E	9	10	
Risk Corridors Program Year	1 Receivable	2 (Payable)	3 Receivable	4 (Payable)	5 Receivable	6 (Payable)	7 Receivable	8 (Payable)	F	Receivable	(Payable)	
a. 2019												
1. Accrued retrospective premium	0	0	0	0	0	0	0	0	0	A	0	0
2. Reserve for rate credits or policy exp. rating refunds	0	0	0	0	0	0	0	0	0	B	0	0
b. 2020												
1. Accrued retrospective premium	0	0	0	0	0	0	0	0	0	C	0	0
2. Reserve for rate credits or policy exp. rating refunds	0	0	0	0	0	0	0	0	0	D	0	0
c. 2021												
1. Accrued retrospective premium	0	0	0	0	0	0	0	0	0	E	0	0
2. Reserve for rate credits or policy exp. rating refunds	0	0	0	0	0	0	0	0	0	F	0	0
d. Total for Risk Corridors	0	0	0	0	0	0	0	0	0		0	0

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Column 1 through 10 respectively)

Explanations of Adjustments

A Not Applicable

B Not Applicable

C Not Applicable

D Not Applicable

E Not Applicable

F Not Applicable

## NOTES TO FINANCIAL STATEMENTS

(5) ACA Risk Corridors Receivable as of Reporting Date

	1	2	3	4	5	6
Risk Corridors Program Year	Estimated Amount to be Filed or Final Amount Filed with CMS	Non-Accrued Amounts for Impairment or Other Reasons	Amounts received from CMS	Asset Balance (Gross of Non-admissions) (1 - 2 - 3)	Non-admitted Amount	Net Admitted Asset (4 - 5)
a. 2019	\$ 0	0	0	0	0	0
b. 2020	\$ 0	0	0	0	0	0
c. 2021	\$ 0	0	0	0	0	0
d. Total (a + b + c)	\$ 0	0	0	0	0	0

24E(5)d (Column 4) should equal 24E(3)c1 (Column 9)

24E(5)d (Column 6) should equal 24E(2)c1

### 25. Changes in Incurred Losses and Loss Adjustment Expenses

A. The Company has no net exposure to changes in incurred losses and loss adjustment expenses. Refer to Note 26.

### 26. Intercompany Pooling Arrangements

The Company is a member of the Liberty Mutual Second Amended and Restated Intercompany Reinsurance Agreement consisting of the following affiliated companies:

		NAIC Company Number	Pooling Companies	Line of Business
Lead Company:	Liberty Mutual Insurance Company ("LMIC")	23043	50.00%	All Lines
Affiliated	Peerless Insurance Company ("PIC")	24198	20.00%	All Lines
Pool Companies:	Employers Insurance Company of Wausau ("EICOW")	21458	8.00%	All Lines
	Liberty Mutual Fire Insurance Company ("LMFIC")	23035	8.00%	All Lines
	The Ohio Casualty Insurance Company ("OCIC")	24074	8.00%	All Lines
	Safeco Insurance Company of America ("SICOA")	24740	6.00%	All Lines
	American Compensation Insurance Company ("ACI")	45934	0.00%	All Lines
	American Economy Insurance Company ("AEIC")	19690	0.00%	All Lines
	America First Insurance Company ("AFIC")	12696	0.00%	All Lines
	America Fire and Casualty Company ("AFCIC")	24066	0.00%	All Lines
	America First Lloyd's Insurance Company ("AFLIC")	11526	0.00%	All Lines
	American States Insurance Company ("ASIC")	19704	0.00%	All Lines
	American States Insurance Company of Texas ("ASICT")	19712	0.00%	All Lines
	American States Lloyd's Insurance Company ("ASLCO")	31933	0.00%	All Lines
	American States Preferred Insurance Company ("ASPCO")	37214	0.00%	All Lines
	Bloomington Compensation Insurance Company ("BCI")	12311	0.00%	All Lines
	Colorado Casualty Insurance Company ("CCIC")	41785	0.00%	All Lines
	Consolidated Insurance Company ("CIC")	22640	0.00%	All Lines
	Excelsior Insurance Company ("EIC")	11045	0.00%	All Lines
	First National Insurance Company of America ("FNICA")	24724	0.00%	All Lines
	The First Liberty Insurance Corporation ("FST")	33588	0.00%	All Lines
	General Insurance Company of America ("GICA")	24732	0.00%	All Lines
	Golden Eagle Insurance Corporation ("GEIC")	10836	0.00%	All Lines
	Hawkeye-Security Insurance Company ("HSIC")	36919	0.00%	All Lines
	Insurance Company of Illinois ("ICIL")	26700	0.00%	All Lines
	Indiana Insurance Company ("IIC")	22659	0.00%	All Lines
	Ironshore Indemnity Inc. ("III")	23647	0.00%	All Lines
	Ironshore Specialty Insurance Company ("ISIC")	25445	0.00%	All Lines
	Liberty Insurance Corporation ("LIC")	42404	0.00%	All Lines
	Liberty Insurance Underwriters, Inc. ("LIU")	19917	0.00%	All Lines
	Liberty County Mutual Insurance Company ("LCMIC")	19544	0.00%	All Lines
	LM General Insurance Company ("LMGIC")	36447	0.00%	All Lines
	Liberty Lloyd's of Texas Insurance Company ("LLOT")	11041	0.00%	All Lines
	LM Insurance Corporation ("LMC")	33600	0.00%	All Lines
	Liberty Mutual Mid-Atlantic Insurance Company ("LMAIC")	14486	0.00%	All Lines
	Liberty Mutual Personal Insurance Company ("LMPICO")	12484	0.00%	All Lines
	Liberty Northwest Insurance Corporation ("LNW")	41939	0.00%	All Lines
	Liberty Personal Insurance Company ("LPIC")	11746	0.00%	All Lines
	Liberty Surplus Insurance Corporation ("LSI")	10725	0.00%	All Lines
	Meridian Security Insurance Company ("MSI")	23353	0.00%	All Lines
	Mid-American Fire & Casualty Company ("MAFCC")	23507	0.00%	All Lines
	Milbank Insurance Company ("MBK")	41653	0.00%	All Lines
	Montgomery Mutual Insurance Company ("MMIC")	14613	0.00%	All Lines
	The Midwestern Indemnity Company ("MWIC")	23515	0.00%	All Lines

## NOTES TO FINANCIAL STATEMENTS

	National Insurance Association ("NIA")	27944	0.00%	All Lines
	The Netherlands Insurance Company ("NIC")	24171	0.00%	All Lines
	North Pacific Insurance Company ("NPIC")	23892	0.00%	All Lines
	Ohio Security Insurance Company ("OSIC")	24082	0.00%	All Lines
	Oregon Automobile Insurance Company ("Oaic")	23922	0.00%	All Lines
	Patrons Mutual Insurance Company of Connecticut ("PMI")	14923	0.00%	All Lines
	Peerless Indemnity Insurance Company ("PIC")	18333	0.00%	All Lines
	Plaza Insurance Company ("PIC")	30945	0.00%	All Lines
	Rockhill Insurance Company ("RIC")	28053	0.00%	All Lines
	Safeco Insurance Company of Illinois ("SICIL")	39012	0.00%	All Lines
	Safeco Insurance Company of Indiana ("SICIN")	11215	0.00%	All Lines
	Safeco Insurance Company of Oregon ("SICOR")	11071	0.00%	All Lines
	Safeco Lloyds Insurance Company ("SLICO")	11070	0.00%	All Lines
	Safeco National Insurance Company ("SNIC")	24759	0.00%	All Lines
	Safeco Surplus Lines Insurance Company ("SSLIC")	11100	0.00%	All Lines
	State Automobile Mutual Insurance Company ("SAM")	25135	0.00%	All Lines
	State Auto Insurance Company of Ohio ("SOH")	11017	0.00%	All Lines
	State Auto Property & Casualty Insurance Company ("SPC")	25127	0.00%	All Lines
	State Auto Insurance Company of Wisconsin ("SWI")	31755	0.00%	All Lines
	Wausau Business Insurance Company ("WBIC")	26069	0.00%	All Lines
	Wausau General Insurance Company ("WGIC")	26425	0.00%	All Lines
	Wausau Underwriters Insurance Company ("WUIC")	26042	0.00%	All Lines
	West American Insurance Company ("WAIC")	44393	0.00%	All Lines
100% Quota Share Affiliated Com	LM Property and Casualty Insurance Company ("LMPAC")	32352	0.00%	All Lines

Under the terms of the Reinsurance Agreements, the sequence of transactions is as follows:

- A. Except for WBIC, WGIC and WUIC, each Affiliated Pool Company cedes its underwriting activity to the Lead Company. WBIC, WGIC and WUIC cede 100% of its direct underwriting activity to EICOW.
- B. After recording the assumed affiliate transactions noted above, the Lead Company records 100% of its external assumed and ceded reinsurance activity.
- C. The Lead Company's remaining underwriting activity, after processing all internal and external reinsurance, is retroceded to the pool members in accordance with each company's pool participation percentage, as noted above.
- D. There were no members that are parties to reinsurance agreements with non-affiliated reinsurers covering business subject to the pooling agreement and have a contractual right of direct recovery from the non-affiliated reinsurer per the terms of such reinsurance agreements.
- E. There were no discrepancies between entries regarding pooled business on the assumed and ceded reinsurance schedules of the Lead Company and corresponding entries on the assumed and ceded reinsurance schedules of other pooled participants.
- F. The write-off of uncollectible reinsurance is pooled and the provision for reinsurance is recognized by the entity placing the outbound external reinsurance.
- G. The Company has no material amounts due (to)/from affiliated entities participating in the Liberty Mutual Second Amended and Restated Intercompany Reinsurance Agreement as of December 31, 2022.

Affiliate	Amount

### 27. Structured Settlements

- A. The Company has no net exposure to contingent liabilities from the purchase of annuities. Refer to Note 26.

	Loss Reserves Eliminated by Annuities	Unrecorded Loss Contingencies
Disclose the amount of reserves no longer carried	\$ 0	0

- B. Not applicable.

Life Insurance Company and Location	Licensed in Company's State of Domicile	Statement Value (ie: Present Value) of Annuities

### 28. Health Care Receivables

Not Applicable

### 29. Participating Policies

## NOTES TO FINANCIAL STATEMENTS

Not Applicable

**30. Premium Deficiency Reserves**

- (1)
1. Liability carried for premium deficiency reserves ..... \$ 0
2. Date of the most recent evaluation of this liability ..... 12/31/2022
3. Was anticipated investment income utilized in the calculation? ..... Yes  No  ..... YES

**31. High Deductible**

Not Applicable

**A. Reserve Credit Recorded on Unpaid Claims and Amount Billed and Recoverable on Paid Claims for High Deductibles**

Not Applicable

**B. Unsecured High Deductible Recoverables for Individual Obligors Part of a Group Under the Same Management or Control Which**

Not Applicable

**32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**

The Company has no net loss and loss adjustment expense reserves. Refer to Note 26.

**A. TABULAR DISCOUNT**

	Tabular Discount Included in	
	Schedule P, Part 1*	
	1	2
	CASE	IBNR
Schedule P Lines of Business:		
1. HOME OWNERS / FARMOWNERS	\$ 0	0
2. PRIVATE PASSENGER AUTO LIABILITY/MEDICAL	\$ 0	0
3. COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL	\$ 0	0
4. WORKERS' COMPENSATION	\$ 0	0
5. COMMERCIAL MULTIPLE PERIL	\$ 0	0
6. MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE	\$ 0	0
7. MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE	\$ 0	0
8. SPECIAL LIABILITY	\$ 0	0
9. OTHER LIABILITY - OCCURRENCE	\$ 0	0
10. OTHER LIABILITY - CLAIMS-MADE	\$ 0	0
11. SPECIAL PROPERTY	\$ 0	0
12. AUTO PHYSICAL DAMAGE	\$ 0	0
13. FIDELITY, SURETY	\$ 0	0
14. OTHER (INCLUDING CREDIT, A&H)	\$ 0	0
15. INTERNATIONAL	\$ 0	0
16. REINSURANCE NONPROPORTIONAL ASSUMED PROPERTY	\$ 0	0
17. REINSURANCE NONPROPORTIONAL ASSUMED LIABILITY	\$ 0	0
18. REINSURANCE NONPROPORTIONAL ASSUMED FINANCIAL LINES	\$ 0	0
19. PRODUCTS LIABILITY - OCCURRENCE	\$ 0	0
20. PRODUCTS LIABILITY - CLAIMS-MADE	\$ 0	0
21. FINANCIAL GUARANTY/MORTGAGE GUARANTY	\$ 0	0
22. WARRANTY	\$ 0	0
23. TOTAL	\$ 0	0

\* Must exclude medical loss reserves and all loss adjustment expense reserves.

Not Applicable

**B. NON-TABULAR DISCOUNT**

	1	2	3	4
	CASE	IBNR	Defense & Cost Containment Expense	Adjusting & Other Expenses
Schedule P Lines of Business:				
1. HOME OWNERS / FARMOWNERS	\$ 0	0	0	0
2. PRIVATE PASSENGER AUTO LIABILITY/MEDICAL	\$ 0	0	0	0
3. COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL	\$ 0	0	0	0
4. WORKERS' COMPENSATION	\$ 0	0	0	0
5. COMMERCIAL MULTIPLE PERIL	\$ 0	0	0	0
6. MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE	\$ 0	0	0	0
7. MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE	\$ 0	0	0	0
8. SPECIAL LIABILITY	\$ 0	0	0	0
9. OTHER LIABILITY - OCCURRENCE	\$ 0	0	0	0



## NOTES TO FINANCIAL STATEMENTS

10. OTHER LIABILITY - CLAIMS-MADE	\$	0	0	0	0
11. SPECIAL PROPERTY	\$	0	0	0	0
12. AUTO PHYSICAL DAMAGE	\$	0	0	0	0
13. FIDELITY, SURETY	\$	0	0	0	0
14. OTHER (INCLUDING CREDIT, A&H)	\$	0	0	0	0
15. INTERNATIONAL	\$	0	0	0	0
16. REINSURANCE NONPROPORTIONAL ASSUMED PROPERTY	\$	0	0	0	0
17. REINSURANCE NONPROPORTIONAL ASSUMED LIABILITY	\$	0	0	0	0
18. REINSURANCE NONPROPORTIONAL ASSUMED FINANCIAL LINES	\$	0	0	0	0
19. PRODUCTS LIABILITY - OCCURRENCE	\$	0	0	0	0
20. PRODUCTS LIABILITY - CLAIMS-MADE	\$	0	0	0	0
21. FINANCIAL GUARANTY/MORTGAGE GUARANTY	\$	0	0	0	0
22. WARRANTY	\$	0	0	0	0
23. TOTAL	\$	0	0	0	0

Columns in the table above should include medical loss reserves and all loss adjustment expense reserves, whether reported as tabular or nontabular in Schedule P.

Not Applicable

### 33. Asbestos/Environmental Reserves

**A. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to asbestos losses?**

The Company has no net exposure to asbestos and environmental claims. Refer to Note 26.

(1) Direct:	2018	2019	2020	2021	2022
a. Beginning reserves:	\$ 0	0	0	0	0
b. Incurred losses and loss adjustment expense	\$ 0	0	0	0	0
c. Calendar year payments for losses & loss adj expenses	\$ 0	0	0	0	0
d. Ending reserves	\$ 0	0	0	0	0

(2) Assumed Reinsurance:	2018	2019	2020	2021	2022
a. Beginning reserves:	\$ 0	0	0	0	0
b. Incurred losses and loss adjustment expense	\$ 0	0	0	0	0
c. Calendar year payments for losses & loss adj expenses	\$ 0	0	0	0	0
d. Ending reserves	\$ 0	0	0	0	0

(3) Net of Ceded Reinsurance:	2018	2019	2020	2021	2022
a. Beginning reserves:	\$ 0	0	0	0	0
b. Incurred losses and loss adjustment expense	\$ 0	0	0	0	0
c. Calendar year payments for losses & loss adj expenses	\$ 0	0	0	0	0
d. Ending reserves	\$ 0	0	0	0	0

**B. State the amount of the ending reserves for Bulk + IBNR included in A (Loss & LAE):**

Not Applicable

**C. State the amount of the ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR):**

Not Applicable

**D. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to environmental losses?**

Not Applicable

**E. State the amt. of the ending res. for Bulk + IBNR included in D (Loss & LAE):**

Not Applicable

**F. State the amt. of the ending res. for loss adj. exp. included in D (Case, Bulk + IBNR):**

Not Applicable

### 34. Subscriber Savings Accounts

Not applicable

### 35. Multiple Peril Crop Insurance

Not Applicable

### 36. Financial Guaranty Insurance

**A.** Not Applicable

## NOTES TO FINANCIAL STATEMENTS

(1) Installment contracts:

Financial guarantee insurance contracts where premiums are received as installed payments over the period of the contract, rather than at inception:

b. Schedule of premiums (undiscounted) expected to be collected under all installment contracts:

1.

1st Quarter 2023	\$	0
2nd Quarter 2023	\$	0
3rd Quarter 2023	\$	0
4th Quarter 2023	\$	0
Year 2024	\$	0
Year 2025	\$	0
Year 2026	\$	0
Year 2027	\$	0

2.

2028 through 2032	\$	0
2033 through 2037	\$	0
2038 through 2042	\$	0

c. Roll forward of the expected future premiums (undiscounted), including:

1. Expected future premiums - Beginning of Year	\$	0
2. Less - Premium payments received for existing installment contracts	\$	0
3. Add - Expected premium payments for new installment contracts	\$	0
4. Adjustments to the expected future premium payments	\$	0
5. Expected future premiums - End of Year	\$	0

(2) Non-installment contracts:

b. Schedule of the future expected earned premium revenue on non-installment contracts as of the latest date of the statement of financial position:

1.

1st Quarter 2023	\$	0
2nd Quarter 2023	\$	0
3rd Quarter 2023	\$	0
4th Quarter 2023	\$	0
Year 2024	\$	0
Year 2025	\$	0
Year 2026	\$	0
Year 2027	\$	0

2.

2028 through 2032	\$	0
2033 through 2037	\$	0
2038 through 2042	\$	0

(3) Claim liability:

b. Significant components of the change in the claim liability for the period:

Components	\$	
1. Accretion of the discount	\$	0
2. Change in timing	\$	0
3. New reserves for defaults of insured contracts	\$	0
4. Change in deficiency reserves	\$	0
5. Change in incurred but not reported claims	\$	0
6. Total	\$	0

(4) Description of the insurance enterprise's risk management activities used to track and monitor deteriorating insured financial obligations:

a. Description of each grouping or category used to track and monitor deteriorating insured financial obligations

**B. Schedule of insured financial obligations at the end of the period:**

Not Applicable

# GENERAL INTERROGATORIES

## PART 1 – COMMON INTERROGATORIES

### GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes  No
- If yes, complete Schedule Y, Parts 1, 1A, 2 and 3
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes  No  N/A
- 1.3 State Regulating? New Hampshire
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes  No
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 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
- 2.2 If yes, date of change: \_\_\_\_\_
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2018
- 3.2 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. 12/31/2018
- 3.3 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). 06/19/2020
- 3.4 By what department or departments?  
 Massachusetts Division of Insurance  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments? Yes  No  N/A
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes  No  N/A
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.11 sales of new business? Yes  No
- 4.12 renewals? Yes  No
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.21 sales of new business? Yes  No
- 4.22 renewals? Yes  No
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes  No
- If yes, complete and file the merger history data file with the NAIC.

## GENERAL INTERROGATORIES

5.2 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 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....	.....	.....
.....	.....	.....

6.1 Has the 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]

6.2 If yes, give full information:  
 .....  
 .....  
 .....

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [ ] No [X]

7.2 If yes,  
 7.21 State the percentage of foreign control. \_\_\_\_\_ %  
 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
.....	.....
.....	.....

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [ ] No [X]

8.2 If response to 8.1 is yes, please identify the name of the DIHC.  
 .....  
 .....  
 .....

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [ ] No [X]

8.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? Yes [ ] No [X]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [ ] No [X] N/A [ ]

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
 Ernst & Young, LLP  
 200 Clarendon Street  
 Boston, MA 02116  
 .....

## GENERAL INTERROGATORIES

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [ ] No [X]

10.2 If response to 10.1 is yes, provide information related to this exemption:  
 .....  
 .....  
 .....

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [ ] No [X]

10.4 If response to 10.3 is yes, provide information related to this exemption:  
 .....  
 .....  
 .....

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [ ] N/A [ ]

10.6 If the response to 10.5 is no or n/a, please explain.  
 .....  
 .....  
 .....

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
 Stephanie Neyenhouse FCAS, MAAA  
 175 Berkeley Street, Boston, MA 02116  
 Vice President and Chief Actuary, Liberty Mutual Group Inc.  
 .....

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [ ] No [X]

12.11 Name of real estate holding company	
12.12 Number of parcels involved	
12.13 Total book/adjusted carrying value	\$

12.2 If yes, provide explanation:  
 .....  
 .....  
 .....

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?  
 .....  
 .....  
 .....

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [ ] No [X]

13.3 Have there been any changes made to any of the trust indentures during the year? Yes [ ] No [X]

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [ ] No [ ] N/A [X]

## GENERAL INTERROGATORIES

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- 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.

Yes  No

14.11 If the response to 14.1 is no, please explain:  
 N/A

14.2 Has the code of ethics for senior managers been amended? Yes  No

14.21 If the response to 14.2 is yes, provide information related to amendment(s).  
 To modernize and provide greater clarity, in October 2022, we launched a revamped Code of Business Ethics & Conduct containing interactive elements, real-life examples, and new sections covering Competitor Information and Anti-Money Laundering.

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes  No

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes  No

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

## BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes  No

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes  No

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes  No

## FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes  No

## GENERAL INTERROGATORIES

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers	\$ _____
20.12 To stockholders not officers	\$ _____
20.13 Trustees, supreme or grand (Fraternal only)	\$ _____

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers	\$ _____
20.22 To stockholders not officers	\$ _____
20.23 Trustees, supreme or grand (Fraternal only)	\$ _____

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [ ] No [ X ]

21.2 If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others	\$ _____
21.22 Borrowed from others	\$ _____
21.23 Leased from others	\$ _____
21.24 Other	\$ _____

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [ ] No [ X ]

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment	\$ _____
22.22 Amount paid as expenses	\$ _____
22.23 Other amounts paid	\$ _____

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [ X ] No [ ]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ \_\_\_\_\_

24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [ ] No [ X ]

24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

1 Name of Third Party	2 Is the Third-Party Agent a Related Party (Yes/No)
.....	.....
.....	.....

## INVESTMENT

25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03) Yes [ X ] No [ ]

25.02 If no, give full and complete information, relating thereto:  
 .....  
 .....  
 .....

25.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

The Company participates in a Securities Lending Program to generate additional income, whereby certain fixed income and mortgage backed securities are loaned for a period of time from the Company's portfolio to qualifying third parties, via a lending agent. The company does not participate in term loans; therefore, the company does not have contractual collateral transactions that extend beyond one year from the reporting date. Borrowers of these securities provide collateral equal to or in excess of 102% of the market value of the loaned securities. Acceptable collateral may be in the form of cash or U.S. Government securities, such as Treasuries and Agency Bonds. The market value of the loaned securities is monitored and additional collateral is obtained if the market value of the collateral falls below 102% of the market value of the loaned securities. Additionally, the lending agent indemnifies the Company against borrower defaults. Cash collateral is carried as an asset with an offsetting liability on the balance sheet, as the collateral is unrestricted and the Company can exercise discretion as to how the collateral is invested. The loaned securities remain a recorded asset of the Company.

## GENERAL INTERROGATORIES

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk Based Capital Instructions. \$ \_\_\_\_\_

25.05 For the reporting entity's securities lending program report amount of collateral for other programs. \$ \_\_\_\_\_

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes  No  N/A

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes  No  N/A

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes  No  N/A

25.09 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ \_\_\_\_\_

25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ \_\_\_\_\_

25.093 Total payable for securities lending reported on the liability page \$ \_\_\_\_\_

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes  No

26.2 If yes, state the amount thereof at December 31 of the current year:

	26.21 Subject to repurchase agreements	\$ _____
	26.22 Subject to reverse repurchase agreements	\$ _____
	26.23 Subject to dollar repurchase agreements	\$ _____
	26.24 Subject to reverse dollar repurchase agreements	\$ _____
	26.25 Placed under option agreements	\$ _____
	26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$ _____
	26.27 FHLB Capital Stock	\$ _____
	26.28 On deposit with states	\$ <u>5,538,252</u>
	26.29 On deposit with other regulatory bodies	\$ _____
	26.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$ _____
	26.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$ _____
	26.32 Other	\$ _____

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....	.....	.....
.....	.....	.....

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes  No



## GENERAL INTERROGATORIES

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ] N/A [X]  
 If no, attach a description with this statement.

LINES 27.3 through 27.5 : FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [ ] No [ ]

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41	Special accounting provision of SSAP No. 108	Yes [ ] No [ ]
27.42	Permitted accounting practice	Yes [ ] No [ ]
27.43	Other accounting guidance	Yes [ ] No [ ]

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [ ] No [ ]

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [ ] No [X]

28.2 If yes, state the amount thereof at December 31 of the current year. \$ \_\_\_\_\_

29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No [ ]

29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
.....	.....
.....	.....

29.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
.....	.....	.....
.....	.....	.....

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year? Yes [ ] No [X]

29.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....	.....	.....	.....
.....	.....	.....	.....

## GENERAL INTERROGATORIES

29.05 Investment management - Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["... that have access to the investment accounts"; "...handle securities"]

1 Name Firm or Individual	2 Affiliation
Liberty Mutual Group Asset Management Inc. ....	A .....
.....	.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [ ] No [X]

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [ ] No [X]

29.06 For those firms or individuals listed in the table 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Name Firm or Individual	2 Central Registration Depository Number	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
Liberty Mutual Group Asset Management Inc. ....	N/A .....	N/A .....	N/A .....	DS .....
.....	.....	.....	.....	.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D – Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [ ] No [X]

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
.....	.....	.....
.....	.....	.....
30.2999 TOTAL		

30.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
.....	.....	.....	.....
.....	.....	.....	.....

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds .....	23,369,376	21,846,988	(1,522,388)
31.2 Preferred stocks .....			
31.3 Totals .....	23,369,376	21,846,988	(1,522,388)

## GENERAL INTERROGATORIES

31.4 Describe the sources or methods utilized in determining the fair values:

The primary source for reported fair values is our pricing vendor, Interactive Data Corporation, followed by backfill from Reuters, Bloomberg, Barclays, Merrill Lynch, and Markit for Term Loan securities. Lastly, management determines fair value based on quoted market prices of similar financial instruments or by using industry recognized valuation techniques.

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [ ] No [X]

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [ ] No [ ]

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

.....  
 .....  
 .....  
 .....

33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No [ ]

33.2 If no, list exceptions:

.....  
 .....  
 .....

34 By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [ ] No [X]

35 By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown 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]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [ ] No [X]

37. By rolling/renewing short-term or cash-equivalent investments with continued reporting on Schedule DA, part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [ ] No [X] N/A [ ]

38.1 Does the reporting entity directly hold cryptocurrencies? Yes [ ] No [X]

38.2 If the response to 38.1 is yes, on what schedule are they reported? \_\_\_\_\_

## GENERAL INTERROGATORIES

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes [ ] No [X]

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars? Yes [ ] No [X]

39.21 Held directly Yes [ ] No [X]

39.22 Immediately converted to U.S. dollars Yes [ ] No [X]

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1	2	3
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums
.....	.....	.....
.....	.....	.....

40.1 Amount of payments to trade associations, service organizations and statistical or Rating Bureaus, if any? \$ \_\_\_\_\_

40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
.....	\$ .....
.....	\$ .....
.....	\$ .....

41.1 Amount of payments for legal expenses, if any? \$ \_\_\_\_\_

41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid
.....	\$ .....
.....	\$ .....
.....	\$ .....

42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ \_\_\_\_\_

42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	2
Name	Amount Paid
.....	\$ .....
.....	\$ .....
.....	\$ .....

# GENERAL INTERROGATORIES

## PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [ ] No [X]

1.2 If yes, indicate premium earned on U.S. business only. \$ \_\_\_\_\_

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$ \_\_\_\_\_

1.31 Reason for excluding

.....

.....

.....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$ \_\_\_\_\_

1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$ \_\_\_\_\_

1.6 Individual policies:

Most current three years:

1.61 Total premium earned \$ \_\_\_\_\_

1.62 Total incurred claims \$ \_\_\_\_\_

1.63 Number of covered lives \_\_\_\_\_

All years prior to most current three years:

1.64 Total premium earned \$ \_\_\_\_\_

1.65 Total incurred claims \$ \_\_\_\_\_

1.66 Number of covered lives \_\_\_\_\_

1.7 Group policies:

Most current three years:

1.71 Total premium earned \$ \_\_\_\_\_

1.72 Total incurred claims \$ \_\_\_\_\_

1.73 Number of covered lives \_\_\_\_\_

All years prior to most current three years:

1.74 Total premium earned \$ \_\_\_\_\_

1.75 Total incurred claims \$ \_\_\_\_\_

1.76 Number of covered lives \_\_\_\_\_

2. Health Test:

	1		2	
	Current Year		Prior Year	
2.1 Premium Numerator	\$ _____		\$ _____	
2.2 Premium Denominator	\$ _____		\$ _____	
2.3 Premium Ratio (2.1 / 2.2)				
2.4 Reserve Numerator	\$ _____		\$ _____	
2.5 Reserve Denominator	\$ _____		\$ _____	
2.6 Reserve Ratio (2.4 / 2.5)				

3.1 Did the reporting entity issue participating policies during the calendar year? Yes [ ] No [X]

3.2 If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year

3.21 Participating policies \$ \_\_\_\_\_

3.22 Non-participating policies \$ 3,919,618,143

4. For Mutual reporting entities and Reciprocal Exchanges only:

4.1 Does the reporting entity issue assessable policies? Yes [ ] No [X]

4.2 Does the reporting entity issue non-assessable policies? Yes [ ] No [X]

4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? \_\_\_\_\_ %

4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. \$ \_\_\_\_\_

5. For Reciprocal Exchanges Only:

5.1 Does the exchange appoint local agents? Yes [ ] No [ ]

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation Yes [ ] No [ ] N/A [ ]

5.22 As a direct expense of the exchange Yes [ ] No [ ] N/A [ ]

5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?

.....

.....

.....

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [ ] No [ ]

5.5 If yes, give full information

.....

.....

.....

6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:  
see Note 21C1

.....

.....

.....

## GENERAL INTERROGATORIES

### PART 2 – PROPERTY & CASUALTY INTERROGATORIES

- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:  
see Note 21C1  
.....  
.....
- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  
see Note 21C1  
.....  
.....
- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [ ] No [X]
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss  
The Company cedes 100% of its business to Liberty Mutual Insurance Company, the lead company in the Liberty Mutual Pool. Liberty Mutual Insurance Company purchases external catastrophe reinsurance coverage.  
.....  
.....
- 7.1 Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)? Yes [ ] No [X]
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions. \_\_\_\_\_
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [ ] No [ ]
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [ ] No [X]
- 8.2 If yes, give full information  
.....  
.....
- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;  
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;  
(c) Aggregate stop loss reinsurance coverage;  
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;  
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or  
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [ ] No [X]
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:  
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or  
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [ ] No [X]
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 37 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [ ] No [X]
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:  
(a) The entity does not utilize reinsurance; or, Yes [ ] No [X]  
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [ ] No [X]  
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes [X] No [ ]

## GENERAL INTERROGATORIES

### PART 2 – PROPERTY & CASUALTY INTERROGATORIES

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [ ] No [ ] N/A [X]
- 11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force: Yes [ ] No [X]
- 11.2 If yes, give full information  
 .....  
 .....
- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
- |   |  |    |  |
|---|--|----|--|
| 12.11 Unpaid losses   |  | \$ |  |
| 12.12 Unpaid underwriting expenses (including loss adjustment expenses) |  | \$ |  |
- 12.2 Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds? \$ \_\_\_\_\_
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [ ] No [X] N/A [ ]
- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
- |            |  |  |  |   |
|------------|--|--|--|---|
| 12.41 From |  |  |  | % |
| 12.42 To   |  |  |  | % |
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [ ] No [X]
- 12.6 If yes, state the amount thereof at December 31 of current year:
- |                                  |  |    |  |
|----------------------------------|--|----|--|
| 12.61 Letters of Credit          |  | \$ |  |
| 12.62 Collateral and other funds |  | \$ |  |
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ \_\_\_\_\_
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [ ] No [X]
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. \_\_\_\_\_
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [X] No [ ]
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:  
 Premiums and recoverables were allocated pursuant to allocation agreements, including the intercompany pooling agreement.  
 .....  
 .....
- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [ ] No [X]
- 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [X] No [ ]
- 14.5 If the answer to 14.4 is no, please explain:  
 N/A  
 .....  
 .....
- 15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [ ] No [X]
- 15.2 If yes, give full information  
 .....  
 .....
- 16.1 Does the reporting entity write any warranty business? Yes [ ] No [X]  
 If yes, disclose the following information for each of the following types of warranty coverage:
- |                  |    | 1                         | 2                       | 3                         | 4                          | 5                        |
|------------------|----|---------------------------|-------------------------|---------------------------|----------------------------|--------------------------|
|                  |    | Direct Losses<br>Incurred | Direct Losses<br>Unpaid | Direct Written<br>Premium | Direct Premium<br>Unearned | Direct Premium<br>Earned |
| 16.11 Home       | \$ |                           |                         |                           |                            |                          |
| 16.12 Products   | \$ |                           |                         |                           |                            |                          |
| 16.13 Automobile | \$ |                           |                         |                           |                            |                          |
| 16.14 Other*     | \$ |                           |                         |                           |                            |                          |

\* Disclose type of coverage: \_\_\_\_\_

## GENERAL INTERROGATORIES

### PART 2 – PROPERTY & CASUALTY INTERROGATORIES

- 17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [ ] No [X]
- Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:
- |   |          |
|---|----------|
| 17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3<br>exempt from the statutory provision for unauthorized reinsurance | \$ _____ |
| 17.12 Unfunded portion of Interrogatory 17.11   | \$ _____ |
| 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11   | \$ _____ |
| 17.14 Case reserves portion of Interrogatory 17.11  | \$ _____ |
| 17.15 Incurred but not reported portion of Interrogatory 17.11  | \$ _____ |
| 17.16 Unearned premium portion of Interrogatory 17.11   | \$ _____ |
| 17.17 Contingent commission portion of Interrogatory 17.11  | \$ _____ |
- 18.1 Do you act as a custodian for health savings accounts? Yes [ ] No [X]
- 18.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ \_\_\_\_\_
- 18.3 Do you act as an administrator for health savings accounts? Yes [ ] No [X]
- 18.4 If yes, please provide the balance of the funds administered as of the reporting date. \$ \_\_\_\_\_
19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No [ ]
- 19.1 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 [ ] N/A [X]



**FIVE – YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

	1	2	3	4	5
	2022	2021	2020	2019	2018
<b>Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11, 16, 17, 18, & 19)	1,408,183,856	1,087,106,838	450,375,703	30,400,824	
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	973,861,406	709,885,928	313,137,695	23,517,422	150,639
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	1,537,572,882	1,337,406,969	1,167,561,318	306,307,123	5,472,511
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	3,919,618,144	3,134,399,735	1,931,074,716	360,225,369	5,623,150
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11, 16, 17, 18, & 19)					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)					
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8)					
14. Net investment gain (loss) (Line 11)	318,608	145,163	292,623	235,314	220,111
15. Total other income (Line 15)	(8,299)	(50)		(50)	
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	66,000	49,000	(28,150)	13,209	44,000
18. Net income (Line 20)	244,309	96,113	320,773	222,055	176,111
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	23,630,937	15,832,199	13,545,441	13,227,757	13,001,417
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)					
20.2 Deferred and not yet due (Line 15.2)					
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	7,844,721	304,292	136,647	63,735	18,450
22. Losses (Page 3, Line 1)					
23. Loss adjustment expenses (Page 3, Line 3)					
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)	7,000,000	7,000,000	7,000,000	7,000,000	7,000,000
26. Surplus as regards policyholders (Page 3, Line 37)	15,786,216	15,527,907	13,408,794	13,164,023	12,982,967
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11)	234,983	253,175	249,306	206,397	163,611
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital	15,786,216	15,527,907	13,408,796	13,164,023	12,982,967
29. Authorized control level risk-based capital	220,256	136,222	47,952	30,866	17,560
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b> (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1)	99.9	99.7	99.9	94.6	99.5
31. Stocks (Lines 2.1 & 2.2)					
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	0.1	0.3	0.1	5.4	0.5
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
49. Total investment in parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

## FIVE – YEAR HISTORICAL DATA (Continued)

	1	2	3	4	5
	2022	2021	2020	2019	2018
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24)					
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	258,309	2,119,113	244,773	181,055	174,111
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11, 16, 17, 18, & 19)	619,675,622	260,656,639	46,120,099	372,438	
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	793,869,750	422,104,568	96,611,292	2,113,574	58,628
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	765,915,571	684,877,848	307,161,504	13,322,311	868,011
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	2,179,460,943	1,367,639,055	449,892,895	15,808,323	926,639
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11, 16, 17, 18, & 19)					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)					
<b>Operating Percentages (Page 4)</b> (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)					
68. Loss expenses incurred (Line 3)					
69. Other underwriting expenses incurred (Line 4)					
70. Net underwriting gain (loss) (Line 8)					
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)					
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)					
<b>One Year Loss Development (\$000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)					
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)					
<b>Two Year Loss Development (\$000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12)					
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?  
If no, please explain:

Yes [ ] No [ ]

.....  
 .....  
 .....

**NONE**    **Schedule P - Part 1 - Summary**

**NONE**    **Schedule P - Part 2, 3, 4 - Summary**

## SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN Allocated By States and Territories

States, Etc.	1	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9
		Active Status (a)	2						
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges Not Included in Premiums	Direct Premium Written for Federal Purchasing Groups (Included in Col. 2)
1. Alabama	AL	L	58,887,234	46,775,639		23,974,385	28,186,853	13,507,228	245,801
2. Alaska	AK	N							
3. Arizona	AZ	L	249,166,715	217,310,948		136,910,804	166,595,226	82,763,746	564,818
4. Arkansas	AR	L	12,235,206	12,998,359		8,334,823	10,546,423	3,432,905	264,746
5. California	CA	N				21,102	19,888		
6. Colorado	CO	L	249,498,568	211,581,393		128,520,629	166,676,323	89,573,094	1,294,405
7. Connecticut	CT	L	159,640,872	151,854,449		81,241,013	108,295,785	63,245,806	1,238,499
8. Delaware	DE	L	48,829,130	43,098,228		20,643,067	27,823,218	10,492,292	257,362
9. District of Columbia	DC	L	1,888,476	655,036		232,265	402,801	170,519	5,249
10. Florida	FL	L	284,323,625	239,030,339		165,787,227	240,171,002	102,474,489	181,461
11. Georgia	GA	L	72,837,619	57,686,647		35,448,097	53,731,333	21,577,198	392,157
12. Hawaii	HI	N							
13. Idaho	ID	L				95	95		
14. Illinois	IL	L	228,299,621	226,534,789		165,435,373	195,922,168	82,057,920	2,620,345
15. Indiana	IN	L	49,851,895	43,702,187		28,608,749	35,200,276	13,650,328	469,249
16. Iowa	IA	L	6,011,338	4,811,573		2,294,150	3,586,527	1,621,643	89,550
17. Kansas	KS	L	7,095,605	3,193,671		1,205,191	2,297,639	1,092,448	54,562
18. Kentucky	KY	L	174,443,481	172,453,413		114,779,448	126,888,189	77,812,275	1,789,953
19. Louisiana	LA	N				8,000	17,000	9,000	
20. Maine	ME	L	60,414,841	52,737,947		26,834,054	33,559,561	15,943,267	154,852
21. Maryland	MD	L	169,244,547	149,645,683		97,392,682	131,410,344	57,027,598	383,313
22. Massachusetts	MA	L	147,819,114	157,630,906		120,474,639	133,838,392	48,793,939	2,015,852
23. Michigan	MI	L	217,426,834	215,170,095		106,940,111	135,879,784	88,196,569	1,495,426
24. Minnesota	MN	L	121,708,320	110,958,450		96,166,009	134,088,555	56,545,457	857,177
25. Mississippi	MS	L	16,758,277	12,150,311		6,575,406	10,269,618	3,716,784	116,317
26. Missouri	MO	L	82,886,479	87,016,447		49,187,336	70,190,469	42,107,732	723,997
27. Montana	MT	N							
28. Nebraska	NE	L	2,306,591	1,021,005		687,055	844,961	157,906	14,006
29. Nevada	NV	L	14,236,409	8,276,468		2,896,911	6,743,323	4,005,490	79,901
30. New Hampshire	NH	L	61,894,681	56,267,163		26,325,979	34,622,014	17,304,527	451,378
31. New Jersey	NJ	N				3,763	3,763		
32. New Mexico	NM	L	18,545,956	14,697,150		7,298,242	11,272,009	6,937,737	207,980
33. New York	NY	N				50,748	67,749	17,001	
34. North Carolina	NC	L				737	737		
35. North Dakota	ND	N				1,486	1,486		
36. Ohio	OH	L	249,344,081	232,721,131		147,141,560	181,865,283	81,784,639	2,590,130
37. Oklahoma	OK	L	65,407,245	62,734,072		29,496,823	32,953,037	21,725,236	301,494
38. Oregon	OR	L	32,837,607	22,348,639		12,102,005	17,205,480	6,978,517	268,702
39. Pennsylvania	PA	L	436,363,141	404,095,827		228,836,655	273,039,403	121,071,566	3,724,591
40. Rhode Island	RI	L	20,937,615	18,169,085		10,074,142	17,250,527	8,290,521	182,710
41. South Carolina	SC	L	54,282,752	53,630,632		32,690,721	42,383,505	18,553,299	598,297
42. South Dakota	SD	N							
43. Tennessee	TN	L	176,567,652	160,633,001		104,069,151	126,881,256	57,364,611	1,204,225
44. Texas	TX	L	201,178,198	167,984,583		84,020,383	107,818,698	60,147,865	462,968
45. Utah	UT	L	67,923,221	61,386,460		32,782,843	45,985,458	26,904,355	684,054
46. Vermont	VT	L	2,516,016	1,194,555		1,066,835	1,313,501	246,669	22,389
47. Virginia	VA	L	79,696,401	63,506,122		37,166,226	52,294,273	22,228,253	951,451
48. Washington	WA	N							
49. West Virginia	WV	L	16,312,779	10,385,947		5,725,029	8,470,558	2,798,702	135,371
50. Wisconsin	WI	N				9,001	9,001		
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate Other Alien	OT	X X X							
59. Totals	(a)	39	3,919,618,142	3,556,048,350		2,179,460,950	2,776,623,491	1,332,329,131	27,094,738

DETAILS OF WRITE-INS									
58001.		X X X							
58002.		X X X							
58003.		X X X							
58998.	Summary of remaining write-ins for Line 58 from overflow page	X X X							
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	X X X							

**Explanation of basis of allocation of premiums by states, etc.**

(a) Active Status Counts

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG	39
2. R - Registered - Non-domiciled RRGs	_____
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state	_____
4. Q - Qualified - Qualified or accredited reinsurer	_____
5. D - Domestic Surplus Lines Insurer (DSL) - Reporting entities authorized to write surplus lines in the state of domicile	_____
6. N - None of the above - Not allowed to write business in the state (other than their state of domicile - See DSLI)	18

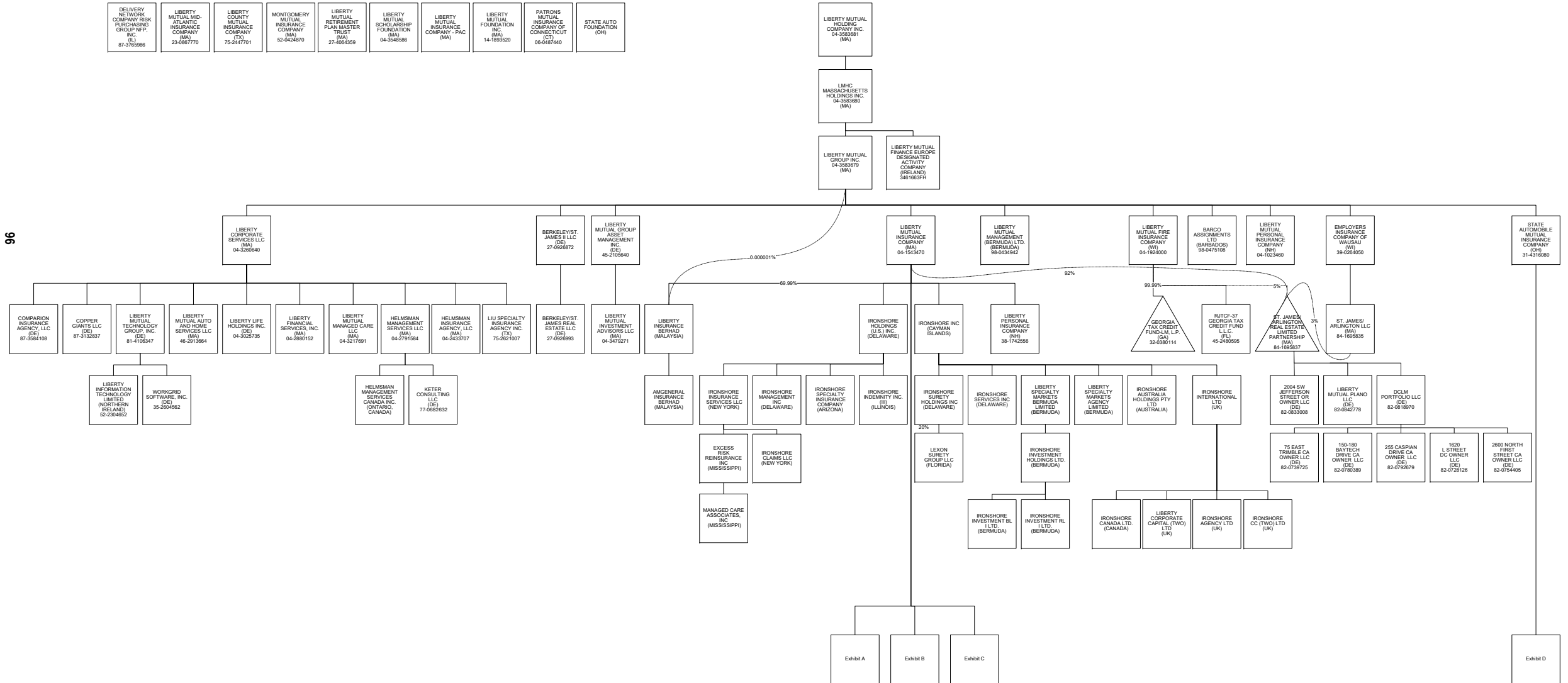
**Explanation of basis of allocation of premiums by states, etc.**

*Location of coverage - Fire, Allied Lines, Homeowners Multi Peril, Commercial Multi Peril, Earthquake, Boiler and Machinery	*Location of Court or Obligor - Surety
*States employee's main work place - Worker's Compensation	*Address of Assured - Other Accident and Health
*Location of Principal place of garaging of each individual car - Auto Liability, Auto Physical Damage	*Location of Properties covered - Burglary and Theft
*Principal Location of business or location of coverage - Liability other than Auto, Fidelity, Warranty	*Principal Location of Assured - Ocean Marine, Credit
*Point of origin of shipment or principal location of assured - Inland Marine	*Primary residence of Assured- Aircraft (all perils)
*State in which employees regularly work - Group Accident and Health	

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

## PART 1 - ORGANIZATIONAL CHART

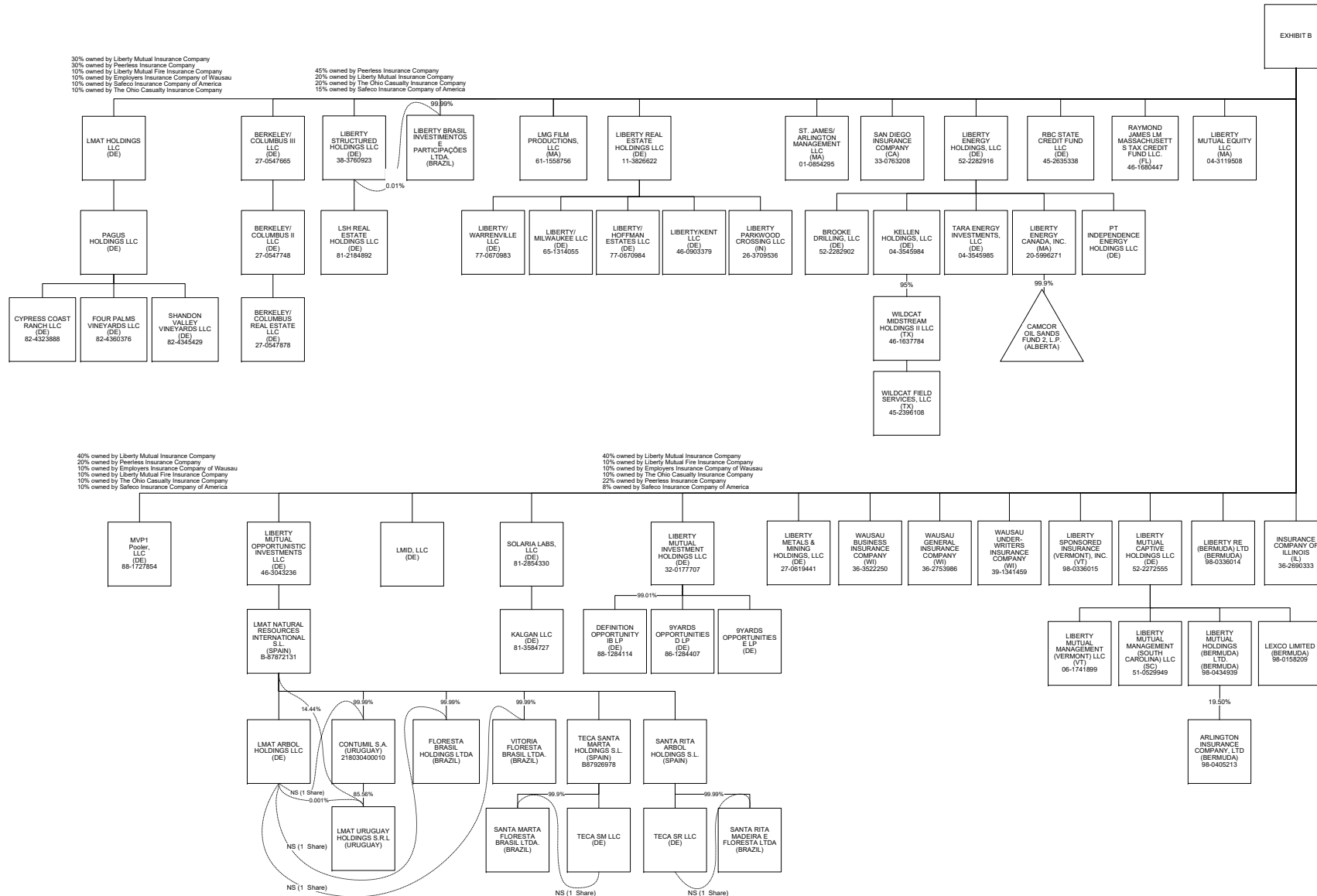
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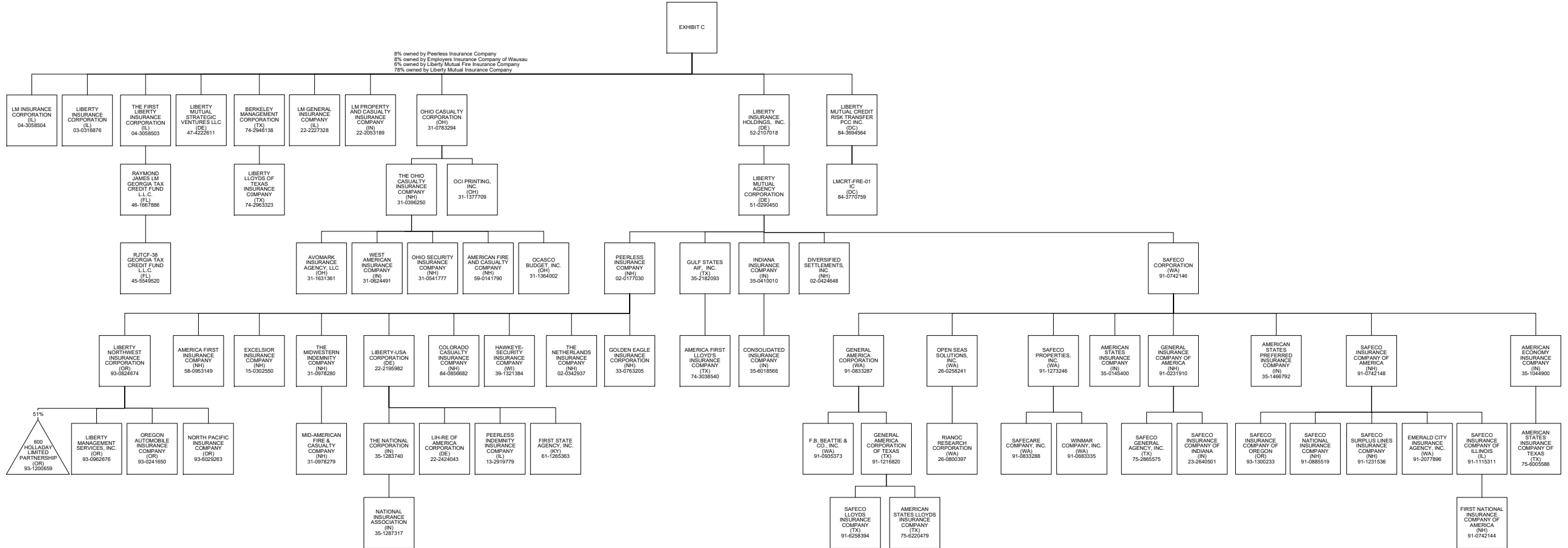
# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART



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

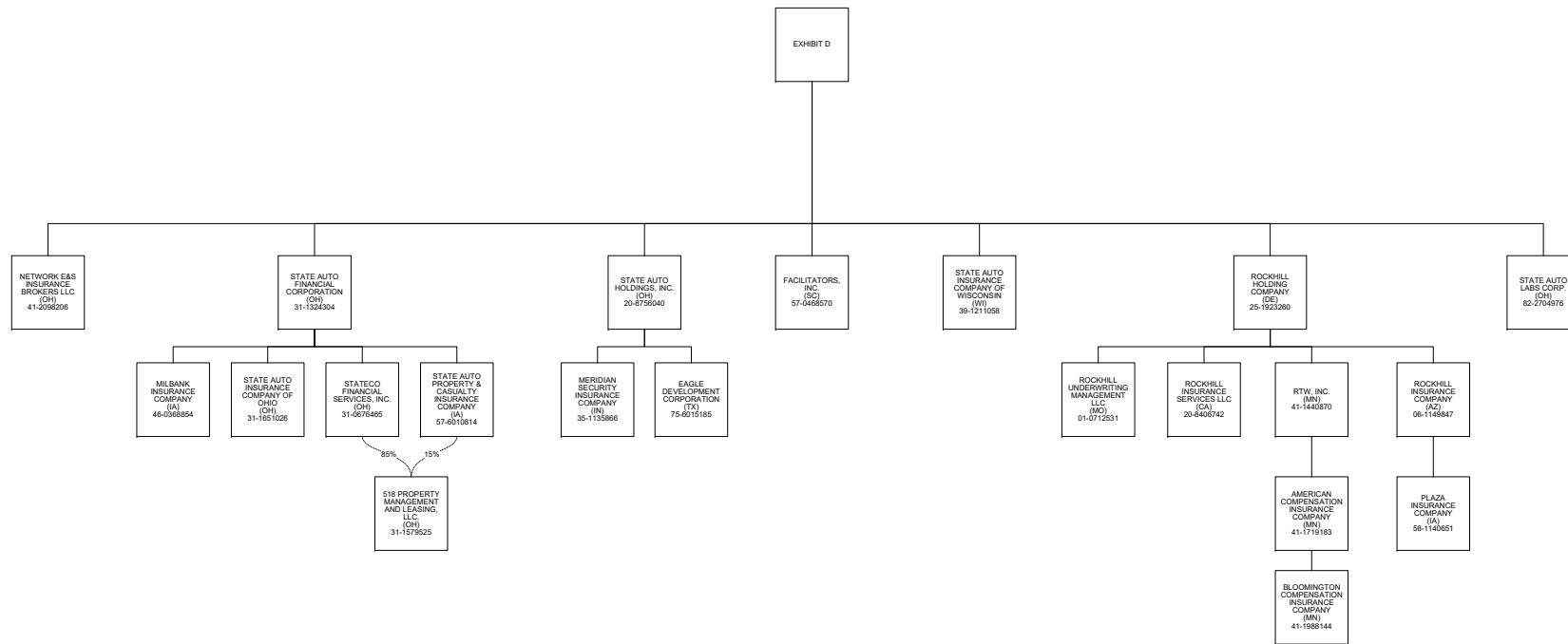
## PART 1 - ORGANIZATIONAL CHART





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

## PART 1 - ORGANIZATIONAL CHART



**OVERFLOW PAGE FOR WRITE-INS**

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