# ANNUAL STATEMENT OF THE EXCELSIOR INSURANCE COMPANY of \_\_\_\_\_\_ Dover STATE OF NEW HAMPSHIRE

TO THE

**Insurance Department** 

**OF THE** 

FOR THE YEAR ENDED

**December 31, 2021** 



#### **ANNUAL STATEMENT**

For the Year Ended December 31, 2021 OF THE CONDITION AND AFFAIRS OF THE

**Excelsior Insurance Company** 

NAIC Group Code	0111	0111	NAIC Company Code	11045	Employer's II	O Number	15-0302550
,	Current Period)	(Prior Period)					
Organized under the Laws of			, Sta	te of Domicile or Po	ort of Entry NH		
Country of Domicile	United States of A		4000				
Incorporated/Organized	400 Lib t - W	July 19,	1988	Comm	enced Business		9, 1988
Statutory Home Office	100 Liberty Way	(Street	and Number)	, ·		3820 Town, State, Country a	nd Zip Code)
Main Administrative Office	175 Berke	eley Street	,		, ,		,
		•		(Street and Nu	mber)		
	Boston, M		.t. Ot		617-357-9500	North - A	
Mail Address 175 Da	orleaday Chrach	(City or Town, Sta	te, Country and Zip Code)		. ,	one Number)	
Mail Address175 Be	erkeley Street	(Street and Number	or P.O. Box)			02116 Town, State, Country ai	nd Zip Code)
Primary Location of Books a	nd Records	175 Berkeley Street	treet and Number)		oston, MA, US 02116 Town, State, Country and 2		17-357-9500 e) (Telephone Number)
Internet Web Site Address _	www.LibertyN	lutualGroup.com					
Statutory Statement Contact	Matthew	Sterling			617-357-9500		
	2	0.11	(Name)		(Area Code) (Telepho	, ,	ension)
	Statutory.	Compliance@LibertyMutu (F	al.com -Mail Address)			603-430-1653 (Fax Number)	
		,–	*	EDC		(1 437 114111201)	
			OFFIC	_			
			Chairman of	the Board			
			Mark Charle	s Touhey			
		Name		-		Title	
1. Hamid Talal Mirza #					nd Chief Executive Officer		
<ol> <li>Mark Charles Touhey</li> <li>Edward Jose Pena</li> </ol>					ice President and Secretary ice President and Treasurer		
5. Edward Jose Peria				Executive v	ice President and Treasurer		
			VICE-PRES	SIDENTS			
Name			Title		Name		Title
Paul Sanghera #		Executive Vice President		Vlad Yakov Barba		EVP and Chief In	
Damon Paul Hart #		EVP and Chief Legal Offi		Christopher Locke	Peirce	EVP and Chief Fi	nancial Officer
				·			
						-	
				-			
				-			
			DIRECTORS OF	D TOLISTEES			
James Matthew Creeks #		Matthau Daul Dalan	DIRECTORS OF		:	Michael Icon	nh Fallan
James Matthew Czapla #		Matthew Paul Dolan		Alison Brooke Erb	<u> </u>	Michael Jose	
Hamid Talal Mirza #		Elizabeth Julia Morah	lan	Paul Sanghera #	<del>!</del>	. Catherine Eliz	zabeth Stevenson #
Mark Charles Touhey							
				-			
				-			
						· -	
06							
State of Massachusett	is						
County of Suffolk		SS					
County of Cullon		55					
The officers of this reporting ent	ity being duly swor	n, each depose and say t	hat they are the described off	ficers of said reporting	entity, and that on the rep	orting period stated ab-	ove, all of the herein described
assets were the absolute prope	rty of the said repo	orting entity, free and clea	r from any liens or claims the	ereon, except as here	in stated, and that this stat	tement, together with r	elated exhibits, schedules and
explanations therein contained, a	annexed or referred	to, is a full and true state	ment of all the assets and liab	pilities and of the condi	tion and affairs of the said r	reporting entity as of the	e reporting period stated above,
and of its income and deductions	s therefrom for the	period ended, and have b	een 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 regulat	ons require differences in rep	porting not related to	accounting practices and p	procedures, according	to the best of their information,
knowledge and belief, respective	ely. Furthermore, th	e scope of this attestation	by the described officers also	includes the related of	corresponding electronic filir	ng with the NAIC, when	required, that is an exact copy
(except for formatting differences	s due to electronic	filing) of the enclosed state	ement. The electronic filing ma	ay be requested by va	rious regulators in lieu of or	in addition to the enclo	osed statement.
(Sign	ature)		(Sign	ature)		(Sign	ature)
Hamid Ta	lal Mirza#		Mark Char	les Touhey		Edward .	lose Pena
	l Name)			d Name)		,	d Name)
1	l.		2	2.		;	3.
5			5 " \" B			- " \" B	
President and Chie	et Executive Officer	·	Executive Vice Pres	sident and Secretary		Executive Vice Pres	sident and Treasurer
(Ti	,		(Ti	itle)		(Ti	itle)
Subscribed and sworn to (or affir	med) before me thi	is on this					
20th day of January		, 2022, by					
					a. Is this an orig		[X]Yes []No
						State the amendment no	umber
						Date filed	
					2 1	Number of pages attach	امما

## **ASSETS**

	7.002.10				
			Current Year		Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)	7,620,556		7,620,556	7,568,081
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 (\$ 194,396,				
	Schedule E - Part 2), and short-term investments (\$ 0, Schedule DA)	194,396		194,396	194,884
_	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)	367,273		367,273	585,720
11.	Aggregate write-ins for invested assets	0.400.005		0.400.005	0.040.005
12.	Subtotals, cash and invested assets (Lines 1 to 11)	8,182,225		8,182,225	8,348,685
	Title plants less \$ 0 charged off (for Title insurers only)				
		35,892		35,892	40,261
15.	Premiums and considerations:	(0.4)		(0.4)	
	15.1 Uncollected premiums and agents' balances in the course of collection	(64)		(64)	
	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				
16.	redetermination (\$ 0) Reinsurance:				
10.	16.1 Amounto recoverable from reincurers				
	<ul><li>16.1 Amounts recoverable from reinsurers</li><li>16.2 Funds held by or deposited with reinsured companies</li></ul>	(2.140)		(3,140)	
	16.3 Other amounts receivable under reinsurance contracts	(3,140)		(3, 140)	
17	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
	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	2,536		2,536	2,768
24.	Health care (\$ 0) and other amounts receivable				
25.	Aggregate write-ins for other-than-invested assets				
	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	8,217,449		8,217,449	8,391,714
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
	Total (Lines 26 and 27)	8,217,449		8,217,449	8,391,714
	<del> </del>				:
	DETAILS OF WRITE-IN LINES				
4404					
1101.					
1102.					
1103.		1	İ	İ	1

DETAILS OF WRITE-IN LINES		
1101.		
1102.		
1103.		
1198. Summary of remaining write-ins for Line 11 from overflow page		
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)		
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)	1,224	
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))	16,935	85,452
7.2	Net deferred tax liability	290,000	301,000
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 \$ 3,135,751 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)		
	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
40	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	49	  49
15.	Remittances and items not allocated  Provision for science (including \$ 0 contified) (Cabadula F. Rat 3 Column 70)		
16.	Provision for reinsurance (including \$ 0 certified) (Schedule F, Part 3 Column 78)		
17. 18.	Net adjustments in assets and liabilities due to foreign exchange rates  Drafts outstanding		
10. 19.	Payable to parent, subsidiaries and affiliates		13,813
20.	Desiratives		
21.	Devolution of the control of the con		
22.	Describe for a constitue location	207 072	585,720
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$ 0 and interest thereon \$ 0		
25.	Aggregate write-ins for liabilities	C4	59
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		986,093
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)	707,559	986,093
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock	3,800,000	3,800,000
31.	Preferred capital stock		
32.	Aggregate write-ins for other-than-special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus	2,032,050	2,032,050
35.	Unassigned funds (surplus)	1,677,840	1,573,571
36.	Less treasury stock, at cost:		
	36.1 O shares common (value included in Line 30 \$ 0)		
	36.20 shares preferred (value included in Line 31 \$0)		
	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	7,509,890	7,405,621
38.	Totals (Page 2, Line 28, Col. 3)	8,217,449	8,391,714
<u> </u>	DETAILS OF WRITE-IN LINES		
0504		24	
	Other liabilities	61	59
2502.			
2503.	Common of remaining units in fact in 25 from gradient need		
2598. 2599.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	61	59
2901.			
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page	1	
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.		1	
3201. 3202.			
3202.	Summary of remaining write-ins for Line 32 from overflow page		

## **STATEMENT OF INCOME**

		1	2
		Current Year	Prior Year
	UNDERWRITING INCOME		
1.	Premiums earned (Part 1, Line 35, Column 4)  DEDUCTIONS:		
2	1		
3.	Losses incurred (Part 2, Line 35, Column /) 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)		
	INVESTMENT INCOME		
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	132,484	161,117
10.	Net realized capital gains (losses) less capital gains tax of \$ (45) (Exhibit of Capital Gains (Losses))	(170)	
11.	Net investment gain (loss) (Lines 9 + 10)	132,314	161,117
	OTHER INCOME		
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		231
	Total other income (Lines 12 through 14)		231
16.	Net income before dividends to policyholders, after capital gains tax and before all other	420.244	101 010
17	federal and foreign income taxes (Lines 8 + 11 + 15)  Dividends to policyholders		161,348
	Net income, after dividends to policyholders, after capital gains tax and before		
10.	all other federal and foreign income taxes (Line 16 minus Line 17)	132,314	161,348
19.	Federal and foreign income taxes incurred	39,045	112,000
20.	Net income (Line 18 minus Line 19) (to Line 22)	93,269	49,348
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	7,405,621	7,276,273
22.	Net income (from Line 20)	93,269	49,348
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	11,000	80,000
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		
28. 29.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)  Change in surplus notes		
30.	Surplus (contributed to) withdrawn from protected cells		
31.	Cumulative effect of changes in accounting principles		
	Capital changes:		
	32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend)		
22	32.3 Transferred to surplus		
33.	Surplus adjustments:		
	33.1 Paid in 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)		129,348
39.	Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 38) (Page 3, Line 37)	7,509,890	7,405,621
		T	

	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)		231
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)		231
3701.			
3702.			
3703.			
3798.	Summary of remaining write-ins for Line 37 from overflow page	1	
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		

## **CASH FLOW**

		1	2
	Cash from Operations	Current Year	Prior Year
1.	Premiums collected net of reinsurance	64	
2.	Net investment income	<b>,</b>	152,445
3.			231
4.			152,676
5.	Benefit and loss related payments	(1,224)	
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	l	
7.	, , , , , , , , , , , , , , , , , , , ,		
8.			
9.			27,115
10.		106,293	27,115
11.	Net cash from operations (Line 4 minus Line 10)	23,769	125,561
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	1,730,350	1,000,000
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets	585,720	3,421,447
	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)	2,316,070	4,421,447
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	1,773,044	1,255,237
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		2,950,40
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)	2,140,317	4,205,638
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)	175,753	215,809
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	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)	(200,010)	(514,441
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5		
	plus Line 16.6)	(200,010)	(514,441
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.		(488)	(173,071
19.			
	19.1 Beginning of year	194,884	367,95
			194,884

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

	1	Reinsurand	e Assumed	Reinsurar	6	
		2	3	4	5	Net Premiums
	Direct		From		То	Written
	Business	From	Non-	То	Non-	Cols. 1 + 2 + 3 -
Line of Business	(a)	Affiliates	Affiliates	Affiliates	Affiliates	4 - 5
1. Fire	41,866		6,960	48,826		
			2 624			
Allied lines     Farmowners multiple peril	27,446			30,070		
Homeowners multiple peril	5,804,170			5,804,170		
Commercial multiple peril	(2,976)					
				(2,976)		
Mortgage guaranty     Ocean marine						
	2.010			2.010		
9. Inland marine	2,019			2,019		
10. Financial guaranty						
11.1 Medical professional liabilityoccurrence						
11.2 Medical professional liabilityclaims-made						
12. Earthquake	5,530			5,530		
13. Group accident and health						
14. Credit accident and health						
(group and individual)						
15. Other accident and health						
16. Workers' compensation	(59,114)		1,122			
17.1 Other liability—occurrence	120,622			120,622		
17.2 Other liability—claims-made						
17.3 Excess workers' compensation						
18.1 Products liability—occurrence						
18.2 Products liability—claims-made						
19.1,19.2 Private passenger auto liability						
19.3,19.4 Commercial auto liability	(8,810)		1,475	(7,335)		
21. Auto physical damage	(3,475)		183	(3,292)		
22. Aircraft (all perils)						
23. Fidelity						
24. Surety						
26. Burglary and theft			22	22		
27. Boiler and machinery						
28. Credit						
29. International						
30. Warranty						
31. Reinsurance-nonproportional						
assumed property	xxx					*
32. Reinsurance-nonproportional						
assumed liability	x x x					
33. Reinsurance-nonproportional						
assumed financial lines	XXX					
34. Aggregate write-ins for other lines						
of business						
35. TOTALS	5,927,278		12,386	5,939,664		
JJ. IUIALO	3,321,210		12,300	J,333,004		

DETAILS OF WRITE-IN LINES				
3401.				
3402.				
3403.	.			
3498. Sum of remaining write-ins for				
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 \$

<sup>2.</sup> 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

		Losses Paid Le	ss Salvage		5	6	7	8
Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4  Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire	1,919	3,080	4,999					
2. Allied lines	5,792	(99)	5,693		1			
Farmowners multiple peril								
Homeowners multiple peril	2,384,591	2	2,384,593					
Commercial multiple peril	24,693,153		24,693,153		1			
Mortgage guaranty					[		.	
Ocean marine					[		.	
9. Inland marine	(66,691)		(66,691)		II.		.	
10. Financial guaranty					l		.	
11.1 Medical professional liability—occurrence					1		.	
11.2 Medical professional liability—claims-made					l			
12. Earthquake					l			
13. Group accident and health					1			
14. Credit accident and health (group and individual)					1			
15. Other accident and health					1		.	
16. Workers' compensation	8,754,920	(507,517)	8,247,403		1		.	
17.1 Other liability—occurrence	2,061,864	(223,693)	1,838,171		l			
17.2 Other liability—claims-made					1			
17.3 Excess workers' compensation					1		.	
18.1 Products liability—occurrence		(1,315,176)	(1,315,176)		1		.	
18.2 Products liability—claims-made					1		.	
19.1,19.2 Private passenger auto liability					l		.	
19.3,19.4 Commercial auto liability	3,393,638	4,617	3,398,255		l		.	
21. Auto physical damage	79,403	496	79,899		l		.	
22. Aircraft (all perils)					1		.	
23. Fidelity					1		.	
24. Surety					1		.	
26. Burglary and theft					1		.	
27. Boiler and machinery					1		.	
28. Credit					1		.	
29. International					1		. [	
30. Warranty					1		.	
31. Reinsurance-nonproportional assumed property	XXX				1		.	
32. Reinsurance-nonproportional assumed liability	XXX				1			
33. Reinsurance-nonproportional assumed financial lines	XXX				1			
34. Aggregate write-ins for other lines of business								
35. TOTALS	41,308,589	(2,038,290)	39,270,299					
	•		•				,	
DETAILS OF WRITE-IN LINES								
							I	I

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)				
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)				

# UNDERWRITING AND INVESTMENT EXHIBIT PART 2A – UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reported	Losses			Incurred But Not Reported		8	9
	1	2	3	4	5	6	7		
Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1. Fire	28,499	157	28,656		10,380	183	10,563		
2. Allied lines	8,196	418	8,614		(162,696)	555	(162,141)	)	
Farmowners multiple peril	2,066,077		2,066,077		580,915		580,915		
4. Homeowners multiple peril	19,812,487		19,812,487		21,518,872		21,518,872		
Commercial multiple peril     Mortgage guaranty	19,812,487		19,812,487		21,518,872		21,510,612		
8. Ocean marine									
9. Inland marine	6,118		6 1 1 8		(126,280)		(126,280)		
10. Financial guaranty					(120,200)			'	
11.1 Medical professional liablity—occurrence									
11.2 Medical professional liablity—claims-made									
12. Earthquake					527		527		
13. Group accident and health								(a)	
14. Credit accident and health (group and individual)									
15. Other accident and health								(a)	
16. Workers' compensation	72,808,292	384,567	73,192,859		52,680,227	115,274	52,795,501		
17.1 Other liability—occurrence	9,363,771	166,432	9,530,203		12,913,401	57,261	12,970,662		
17.2 Other liability—claims-made					(22,613)		(22,613)	)	
17.3 Excess workers' compensation			654,859		23,668		683,984		
18.1 Products liability—occurrence		654,859	654,859		23,008	660,316	683,984		
18.2 Products liability—claims-made									
19.1,19.2 Private passenger auto liability 19.3,19.4 Commercial auto liability	4,654,399	108	4,654,507		9,457,813	2,696	9,460,509		
21. Auto physical damage	1,871		1.864		2,617	(73)	2,544		
22. Aircraft (all perils)					2,017				
23. Fidelity					23,838		23,838		
24. Surety					77777				
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International					1				
30. Warranty									
31. Reinsurance-nonproportional assumed property	XXX				XXX				
32. Reinsurance-nonproportional assumed liability	XXX				XXX				
Reinsurance-nonproportional assumed financial lines     Aggregate write-ins for other lines of business	XXX				XXX				
34. Aggregate write-ins for other lines of business 35. TOTALS	108,749,710	1,206,534	109,956,244		96,900,669	836,212	97,736,881		
JU. TUTALO	100,143,110	1,200,034	109,900,244		30,300,009	030,212	31,130,001	-	
DETAILS OF WRITE-IN LINES			T						
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	,								
	7							L .	

(a) Including \$ ......0 for present value of life indemnity claims.

# UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		·			1
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1.	Claim adjustment services:				,
	1.1 Direct	4,229,618			4,229,618
	1.2 Reinsurance assumed	1,823			1,823
	1.3 Reinsurance ceded	4,231,441			4,231,441
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)				
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent		1,151,585		1,151,585
	2.2 Reinsurance assumed, excluding contingent		6,159		6,159
	2.3 Reinsurance ceded, excluding contingent		1,157,744		1,157,744
	2.4 Contingent—direct		(4,902)		(4,902)
	2.5 Contingent—reinsurance assumed				
	2.6 Contingent—reinsurance ceded		(4,902)		(4,902
	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			18	18
5.	Boards, bureaus and associations			16	16
6.	Surveys and underwriting reports			8	
7.	Audit of assureds' records				
8.	Salary and related items:				
	8.1 Salaries			5,719	5,719
	8.2 Payroll taxes			1,097	1,097
9.	Employee relations and welfare			2,278	2,278
	Insurance			79	79
11.	Directors' fees				2
12.	Travel and travel items			57	57
13.	Rent and rent items			1,485	1,485
14.	Equipment			1,104	1,104
15.	Cost or depreciation of EDP equipment and software			708	708
	Printing and stationery			24	24
17.	Postage, telephone and telegraph, exchange and express			121	121
18.	Legal and auditing			98	98
19.	Totals (Lines 3 to 18)			12,814	12,814
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				
	Aggregate write-ins for miscellaneous expenses			2,134	2,134
25.	Total expenses incurred			14,948	(a) 14,948
26.	Less unpaid expenses—current year				
	Add unpaid expenses—prior year				
	Amounts receivable relating to uninsured plans, prior year				
	Amounts receivable relating to uninsured plans, current year				
	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)			14,948	14,948

DETAILS OF WRITE-IN LINES			
2401. Other expenses	 	2,134	2,134
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)		2,134	2,134

(a) Includes management fees of \$ 14,947 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) 150,382	145,219
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a) 662	1,456
1.3	Bonds of affiliates	(a)	l
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)		
2.21	Common stocks of affiliates		l
3.	Mortgage loans	(c)	
4.	Real estate	(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 47	47
7.	Derivative instruments	(f)	l
8.	Other invested assets		
9.	Aggregate write-ins for investment income	710	710
10.	Total gross investment income	151,801	147,432
11.	Investment expenses		(g) 14,947
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		1
16.	Total deductions (Lines 11 through 15)		14,947
17.	Net investment income (Line 10 minus Line 16)		132,485

	DETAILS OF WRITE-IN LINES		
0901.	Miscellaneous Income/(Expense)	710	710
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)	710	710
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)		

(b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued div (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued int (d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.	terest on purchases.
	vidends on purchases.
(d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances	erest on purchases.
(a) included $\phi$ o for company a cocapancy of its offin bandings, and oxolded $\phi$ o interest of chicambraneos.	
(e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued int	erest on purchases.
(f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.	
(g) Includes \$ 14,947 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	2	3	4	5
		Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	(215)		(215)		
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)	(215)		(215)		

	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	2	3
		Current Year		
		Total	Prior Year	Change in Total
				-
		Nonadmitted	Total	Nonadmitted Assets
		Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
	D 1 (01 11 D)			
	Bonds (Schedule D)			
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			
	2.2 Common stocks			
3	Mortgage loans on real estate (Schedule B):			
0.				
	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.	D. C. of (O.b. of L. DD)			
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			
	Electronic data processing aguinment and coffware			
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			
	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			
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)			

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

Effective January 1, 2001, and subject to any deviations prescribed or permitted by the State of New Hampshire, the accompanying financial statements of Excelsior 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.

NE	ET INCOME						
				F/S	F/S		
			SSAP#	Page	Line #	2021	2020
(1)	Excelsior Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)	\$	XXX	XXX	XXX	93,269	49,348
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:						
				F/S	F/S		
	Details of Depreciation of Fixed Assets		SSAP#	Page	Line #	2021	2020
	Totals (Lines 01A0201 through 01A0225)	\$				0	0
(3)	State Permitted Practices that are an increase/(decrease) from NAIC SAP:						
(-)				F/S	F/S		
	Details of Depreciation of Home Office Property		SSAP#	Page	Line #	2021	2020
	Totals (Lines 01A0301 through 01A0325)	\$				0	0
(4)	NAIC SAP (1 - 2 -3 = 4)	. \$	XXX	XXX	XXX	93,269	49,348
SI	JRPLUS						
				F/S	F/S		
		1	SSAP#	Page	Line #	2021	2020
(5)	Excelsior Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	\$	xxx	xxx	xxx	7,509,890	7,405,621
(6)	State Prescribed Practices that are an increase/(decrease)from NAIC SAP:			•			
				F/S	F/S		
	e.g., Goodwill, net, Fixed Assets, Net		SSAP#	Page	Line #	2021	2020
	Totals (Lines 01A0601 through 01A0625)	\$				0	0
(7)	State Permitted Practices that are an increase/(decrease) from NAIC SAP:						
. /				F/S	F/S		
	Home Office Property		SSAP#	Pane	line#	2021	2020

		F/S	F/S		
Home Office Property	SSAP#	Page	Line #	2021	2020
Totals (Lines 01A0701 through 01A0725)	\$			0	0

(8)	NAIC SAP	(5 - 6 - 7 = 8)	XXX	XXX	XXX	7.509.890	7,405,621
(0)	11/11/00/11	(0 0 1 0)		, ,,,,,	~~~	1,000,000	1,100,021

#### В. 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

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 in 2021
- 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.

Not Applicable

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

		Limitation	lation of on Using Quarter	Current R					
	(1) Capital & Surplus	Nun	nbers 7,477,538	Peri X X					
L	.ess:  (2) Admitted Positive Goodwill  (3) Admitted EDP Equipment & Operating System Software XX  (4) Admitted Net Deferred Taxes XXX			XX	Χ				
(5)									
(6)	) Limitation on amount of goodwill (adjusted capital and surplus		7,477,538	XX	·X				
(7)	goodwill limitation [Line 5*10%])		747,754 X X		0				
(7) (8)			^^		0				
(-)	Capital and Surplus (Line 7/Line 5)	X	X X		0				
1.	<b>Discontinued Operations</b> The Company has no discontinued operations								
	Discontinued Operations Disposed of or Classified as Held to Not Applicable	for Sale							
	B. Change in Plan of Sale of Discontinued Operation								
	Not Applicable								
	C. Nature of Any Significant Continuing Involvement with Disco	ontinued Oper	rations After D	isposal					
	Not Applicable								
	D. Equity Interest Retained in the Discontinued Operation After	r 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:	Cu	urrent Year 0	Prior Year 0					
(3)				0	ntial	Comm	ercial		
(3)					ntial All Other	Comm Insured	ercial All Other	Mezzanine Mezzanine	Total
(4)	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:		0	0 Reside				Mezzanine	Total
(4) a.	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year		0	0 Reside				Mezzanine	Total
(4) <b>a.</b> 1.	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:		0	0 Reside				Mezzanine 0	Total
(4) <b>a.</b> 1.	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year  Recorded Investment (All)		Farm	Reside	All Other	Insured	All Other		Total
(4) a. 1. (a) (b) (c)	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year  Recorded Investment (All)  Current Year  30 - 59 Days Past Due  60 - 89 Days Past Due		Farm 0 0 0 0 0	Reside Insured  0 0 0 0 0 0	All Other 0 0 0 0	0 0 0	All Other  0 0 0	0	Total
(4)  a. 1. (a) (b) (c) (d)	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year  Recorded Investment (All)  Current Year  30 - 59 Days Past Due  60 - 89 Days Past Due  90 - 179 Days Past Due		Farm 0 0 0 0 0 0 0	Reside Insured  0 0 0 0 0 0 0	All Other 0 0 0 0 0 0 0 0	Insured 0	All Other 0 0 0 0 0 0 0	0 0 0	Total
a. 1. (a) (b) (c) (d) (e)	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year  Recorded Investment (All)  Current Year  30 - 59 Days Past Due  60 - 89 Days Past Due		Farm 0 0 0 0 0	Reside Insured  0 0 0 0 0 0	All Other 0 0 0 0	0 0 0	All Other  0 0 0	0	Total
a. 1. (a) (b) (c) (d) (e) 2. (a)	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year  Recorded Investment (All)  Current Year  30 - 59 Days Past Due  60 - 89 Days Past Due  90 - 179 Days Past Due  180 + Days Past Due  Accruing Interest 90 - 179 Days Past Due  Recorded Investment		Farm 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Reside Insured  0 0 0 0 0 0 0 0	All Other  0 0 0 0 0 0 0	0 0 0 0 0 0 0	All Other		Total
a. 1. (a) (b) (c) (d) (e) 2. (a) (b)	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year  Recorded Investment (All)  Current Year  30 - 59 Days Past Due  60 - 89 Days Past Due  90 - 179 Days Past Due  180 + Days Past Due  Accruing Interest 90 - 179 Days Past Due  Recorded Investment  Interest Accrued		Farm 0	Reside Insured  0 0 0 0 0 0 0	All Other 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other 0 0 0 0 0	0 0 0	Total
a. (a) (b) (c) (d) (e) (a) (b) 3. (a)	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year  Recorded Investment (All)  Current Year  30 - 59 Days Past Due  60 - 89 Days Past Due  90 - 179 Days Past Due  180 + Days Past Due  Accruing Interest 90 - 179 Days Past Due  Recorded Investment  Interest Accrued  Accruing Interest 180 + Days Past Due  Recorded Investment		Farm 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Reside Insured  0 0 0 0 0 0 0 0	All Other  0 0 0 0 0 0 0	0 0 0 0 0 0 0	All Other		Total
a. 1. (a) (b) (c) (d) (e) 2. (a) (b) 3. (a) (b)	Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year Recorded Investment (All) Current Year 30 - 59 Days Past Due 60 - 89 Days Past Due 90 - 179 Days Past Due 180 + Days Past Due Accruing Interest 90 - 179 Days Past Due Recorded Investment Interest Accrued Accruing Interest 180 + Days Past Due Recorded Investment		Farm 0	0 Reside Insured 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other	0	Total
a. 1. (a) (b) (c) (d) (e) 2. (a) (b) 3. (a) (b) 4. (a)	included in the mortgage loan total:  Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year  Recorded Investment (All)  Current Year  30 - 59 Days Past Due  60 - 89 Days Past Due  90 - 179 Days Past Due  180 + Days Past Due  Accruing Interest 90 - 179 Days Past Due  Recorded Investment  Interest Accrued  Accruing Interest 180 + Days Past Due  Recorded Investment  Interest Accrued  Recorded Investment  Interest Accrued  Interest Reduced  Recorded Investment		Farm 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 Reside Insured 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other	0 0 0 0 0	Total
a. 1. (a) (b) (c) (d) (e) 2. (a) (b) 3. (a) (b) 4. (a)	Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year Recorded Investment (All) Current Year 30 - 59 Days Past Due 60 - 89 Days Past Due 90 - 179 Days Past Due 180 + Days Past Due Accruing Interest 90 - 179 Days Past Due Recorded Investment Interest Accrued Accruing Interest 180 + Days Past Due Recorded Investment Interest Accrued Recorded Investment Interest Accrued Interest Accrued Interest Reduced Recorded Investment Interest Reduced Recorded Investment Number of Loans		Farm 0	0 Reside Insured 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other	0 0 0	Total
a. 1. (a) (b) (c) (d) (b) 3. (a) (b) 4. (a) (b) (c) 5.	Age Analysis of Mortgage Loans and Identification of Mortgage Loans in the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:  Current Year Recorded Investment (All) Current Year 30 - 59 Days Past Due 60 - 89 Days Past Due 90 - 179 Days Past Due 180 + Days Past Due Accruing Interest 90 - 179 Days Past Due Recorded Investment Interest Accrued Accruing Interest 180 + Days Past Due Recorded Investment Interest Accrued Recorded Investment Interest Accrued Interest Accrued Interest Reduced Recorded Investment Interest Reduced Recorded Investment Number of Loans		Farm 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 Reside Insured 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	All Other	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

b.	Prior Year								
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
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

Investment in Impaired Loans With or Without Allowance for Credit Losse (5) 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:

a.	C	uri	en	t	Υ	ear
----	---	-----	----	---	---	-----

2.	No Allowance for Credit Losses
3.	Total (1+2)
4.	Subject to a participant or co-lender mortgage loan agreement for which t

With Allowance for Credit Losses

	reporting entity is restricted from unilaterally foreclosing on the mortgage I	
).	Prior Year	

2. No Allowance for Credit Losses 3. Total (1+2)

1. With Allowance for Credit Losses

4.	Subject to a participant or co-lender mortgage loan agreement for which t
	reporting entity is restricted from unilaterally foreclosing on the mortgage I

	Reside	ential	Comm	ercial		
Farm	Insured	All Other	Insured	Insured All Other		Total
\$ 0	0	0	0	0	0	0
\$ 0	0	0	0	0	0	0
\$ 0	0	0	0	0	0	0
\$ 0	0	0	0	0	0	0
\$ 0	0	0	0	0	0	0
\$ 0	0	0	0	0	0	0
\$ 0	0	0	0	0	0	0
\$						
\$ 0	0	0	0	0	0	0

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 Acct:

a.	Current	Year

Average Recorded Investment
Interest Income Recognized
3. Recorded Investments on Nonaccrual Status
4. Amount of Interest Income Recognized Using a
Cash-Basis Method of Accounting

1.	Average Recorded Investment
2	Interest Income Recognized

3. Recorded Investments on Nonaccrual Status 4. Amount of Interest Income Recognized Using a

•••	,	
	Cash-Basis Method of Accounting	

Ф	U	
\$	0	
\$	0	
\$	0	
\$	0	
	Current Year	Prior Year
\$	0	

Farm

\$

Residential

. . . . 0  All Other

Insured

Allowance for Credit Losses:

	Additions charged to operations
C.	Direct write-downs charged against the allowances

		٠	•	•	•	٠	٠	٠	•	•	•	•	•	٠	٠.	٠	٠
e	В	al	a	nc	e.	а	ıt	ei	nc	1	nf	n	e	rio	hc		

\$ 0	
\$ 0	
\$ 0	
Current Year	

Mortgage Loans Derecognized as a Result of Foreclosure: a. Aggregate amount of mortgage loans derecognized

	.45. 10. 11. 11. 11. 11. 11. 11. 11. 11. 11
b.	Real estate collateral recognized
C.	Other collateral recognized
d.	Receivables recognized from a government guarantee of the

l.	Receivables recognized from a government guarantee of the
	foreclosed mortgage loan

(9)	Not Applicable
-----	----------------

Debt Restructuring

			Current real	FIIOI TEAI		
	tal recorded investment in restructured loans, as of year end	\$	0	0		
	e realized capital losses related to these loans	\$	0	0		
	tal contractual commitments to extend credit to debtors owing re	¢	_			
wr	nose terms have been modified in troubled debt restructurings	\$	0	0		
l No	ot Applicable					
Re	everse Mortgages					
	verse mongages					
(1)	Not Applicable					
(2)	Not Applicable					
Lo	an-Backed Securities					
Pr	epayment speed assumptions are updated monthly with data source	ed fro	om the Bloomb	erg data service.		
			(1)	(2)	(3)	
			Amortized C			
			Basis Before	Other-than-		
			Other-than-	Temporary		
			Temporary	Impairment	Fair Value	
			Impairment	Recognized in	1 - 2	
01	TTI recognized 1st Quarter					
a. Int	ent to sell	\$	0	0	0	
b. Ina	ability or lack of intent to retain the investment in the security for a					
	cover the amortized cost basis	\$	0	0	0	
	tal 1st Quarter	\$	0	0	0	
	TTI recognized 2nd Quarter					
	ent to sell	\$	0	0	0	
	ability or lack of intent to retain the investment in the security for a					
	cover the amortized cost basis	\$	0	0	0	
	tal 2nd Quarter	\$	0	0	0	
	TTI recognized 3rd Quarter	~	j	Ů		
	ent to sell	\$	0	0	0	
	ability or lack of intent to retain the investment in the security for a	*				
	cover the amortized cost basis	\$	0	0	0	
	tal 2rd Quarter	\$	0	0	0	
	rai sid Quarter TTI recognized 4th Quarter	Ψ	,	,		
		\$	0	0	0	
	ent to sell ability or lack of intent to retain the investment in the security for a	Ψ				
		\$	0	0	0	
	cover the amortized cost basis tal 4th Quarter	\$	0	0	0	
		\$				
m. An	ınual Aggregate Total	\$		0		
")	All impaired Loaned Backed Securities for which an other-than-ter	mpo	orary impairmer	nt has not been re	cognized in ea	ings as a realized loss as of December 31, 2021:
a.	The aggregate Amount of unrealized losses:				1.	
	Less than 12 months 12 Months or Longer				\$ \$	0
b.	The aggregate related fair value of securities with unrealized loss	es:				
-	25 5					
	Less than 12 months 12 Months or Longer				\$	0
(5)	extent of the decline in fair value below book value, (b) the duratic significant change in the business climate or credit ratings of the issuer. If the Company believes a decline in the value of a particular content of the value of a particular content of the value of a particular content of the value of a particular content of the value of a particular content of the value of a particular content of the value of the	on of ssue ular i ble t	f the decline, (over, (e) general investment is to collect all cases	c) significant adve market conditions emporary, the dec	rse changes in and volatility, ( cline is recorded	unantitative and qualitative considerations including, but not limited to: ne financial condition or near term prospects of the investment or issuindustry factors, and (g) the past impairment of the security holding as an unrealized loss in policyholders' equity. If the decline is believe ecurities, then the carrying value of the investment is written down to

14.4

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.

Dollar Repurchase Agreements and/or Securities Lending Transactions

E.

- (2) The Company has not pledged any of its assets as collateral as of December 31, 2021.
  - (3) Collateral Received
    - a. Aggregate Amount Collateral Received

1. Securities Lending	Fair Value
Open	\$ 367,27
30 Days or Less	\$
31 to 60 Days	\$
61 to 90 Days	\$
Greater Than 90 Days	\$
Sub-Total	\$ 367,27
Securities Received	\$ 3,20
Total Collateral Received	\$ 370,47
Dollar Repurchase Agreement	Fair Value
Dollar Repurchase Agreement     Open	Fair Value
Open	\$
Open 30 Days or Less	\$ \$
Open 30 Days or Less 31 to 60 Days	\$ \$ \$
Open 30 Days or Less 31 to 60 Days 61 to 90 Days	\$ \$ \$
30 Days or Less 31 to 60 Days 61 to 90 Days Greater Than 90 Days	\$ \$ \$ \$

- 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-term investments as outlined in the terms of the investment agreement.
- (4) Securities Lending Transactions Administered by an Affiliated Agent

Not Applicable for any LMG reporting entity

or repledged

(5) Collateral Reinvestment

1. Securities Lending

b.

a. Aggregate Amount Collateral Reinvested

Open

30 Days or Less	\$	190,730	190,730
31 to 60 Days	\$	128,538	128,538
61 to 90 Days	\$	48,004	48,004
91 to 120 Days	\$	0	0
121 to 180 Days	\$	0	0
181 to 365 Days	\$	0	0
1 to 2 years	\$	0	0
2 to 3 year	\$	0	0
Greater Than 3 years	\$	0	0
Sub-Total	\$	367,272	367,272
Securities Received	\$	0	0
Total Collateral Reinvested	\$	367,272	367,272
Open 30 Days or Less	\$ \$	0	0
30 Days or Less	\$	0	0
31 to 60 Days	\$	0	
61 to 90 Days	\$	0	
91 to 120 Days	\$	0	
121 to 180 Days	\$	0	
181 to 365 Days	\$	0	
1 to 2 years	\$	0	
2 to 3 year	\$	0	
Greater Than 3 years	\$	0	
Sub-Total	\$	0	0
Securities Received	\$	0	
Total Collateral Reinvested	\$	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.

- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
  - (2) Type of Repo Trades Used
    - a. Bilateral (YES/NO)
    - b. Tri-Party (YES/NO)
  - (3) Original (Flow) & Residual Maturity
    - a. Maxiumum Amount
    - 1. Open -- No Maturity
    - 2. Overnight
    - 3. 2 Days to 1 Week
    - 4. > 1 Week to 1 Month
    - 5. > 1 Month to 3 Months
    - 6. > 3 Months to 1 Year
    - 7. > 1 Year
    - b. Ending Balance
    - 1. Open -- No Maturity
    - 2. Overnight
    - 3. 2 Days to 1 Week
    - 4. > 1 Week to 1 Month
    - 5. > 1 Month to 3 Months
    - 6. > 3 Months to 1 Year
    - 7. > 1 Year
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
- (2) Type of Repo Trades Used
  - a. Bilateral (YES/NO)
  - b. Tri-Party (YES/NO)
- H. Repurchase Agreements Transactions Accounted for as a Sale
- (2) Type of Repo Trades Used
  - a. Bilateral (YES/NO)
  - b. Tri-Party (YES/NO)
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
- (2) Type of Repo Trades Used
  - a. Bilateral (YES/NO)
  - b. Tri-Party (YES/NO)
- J. Real Estate

Not Applicable

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

1	2	2 3			
First Quarter	Second Quarter	Third Quarter	Fourth Quarter		
NO	NO	NO	NO.		
NO	NO	NO	NO		

FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

FIRST	SECOND	THIRD	FOURTH
QUARTER	QUARTER	QUARTER	QUARTER
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

1	2	3	4	
First Quarter	Second Quarter	Third Quarter	Fourth Quarter	
NO	NO	NO	NO	
NO	NO	NO	NO	

1 2		3	4		
First Quarter Second Quarter		Third Quarter	Fourth Quarter		
NO	NO	NO	NO		
NO	NO	NO	NO		

1 2		3	4		
First Quarter Second Quarter		Third Quarter	Fourth Quarter		
NO NO		NO	NO		
NO	NO	NO	NO		

#### (1) Restricted Assets (Including Pledged)

		Gross (Admitted & Nonadmitted) Restricted									
			(	I VESTIICIEU	6	7					
		1	2	Current Year	4	5		, i			
		·	_	Total Separate	S/A Assets	Ĭ		Increase/			
		Total General	G/A Supporting	Account (S/A)	Supporting G/A	Total	Total From	(Decrease)			
	Restricted Asset Category	Account (G/A)	S/A Activity (a)	Restricted Ass	Activity (b)	(1 plus 3)	Prior Year	(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	\$ 367,273	0	0	0	367,273	585,720	-218,447			
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	\$ 2,780,735	0	0	0	2,780,735	2,774,491	6,244			
k.	On deposit with other regulatory bodies	\$0	0	0	0	0	0	0			
l.	Pledged as colletaral 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			
0.	Total Restricted Assets	\$ 3,148,008	0	0	0	3,148,008	3,360,211	-212,203			

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

		8 9 Percenta				entage
					10	11
					Gross (Admitte	Admitted
			Total	Total Admitted	Nonadmitted)	Restricted to To
			Nonadmitted	Restricted	Restricted to	Admitted Asset
	Restricted Asset Category		Restricted	(5 minus 8)	Total Assets (c	(d)
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	367,273	4.469	4.469
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	2,780,735	33.839	33.839
k.	On deposit with other regulatory bodies	\$	0	0	0.000	0.000
I.	Pledged as colletaral 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
0.	Total Restricted Assets	\$	0	3,148,008	38.308	38.308

- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28

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

			1	2	3	4
					% of BACV to	
			Book/Adjusted		Total Assets	% of BACV to
			Carrying Value		(Admitted and	Total Admitted
	Collateral Assets	L,	(BACV)	Fair Value	Nonadmitted*)	Assets**
Gen	eral Account:					
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	\$	367,273	367,273	4.469	4.469
i.	Other	\$	0	0	0.000	0.000
j.	Total Collateral Assets (a+b+c+d+e+f+g+h+i)	\$	367,273	367,273	4.469	4.469
Sep	arate Account:					
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
0.	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
t.	Total Collateral Assets (k+l+m+n+o+p+q+r+s)	\$	0	0	0.000	0.000

\* 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)

- u. Recognized Obligation to Return Collateral Assets (General Account)
- v. Recognized Obligation to Return Collateral Asset (Separate Account)
- 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.

Asset Type

- (1) Cash
- (2) Cash Equivalents
- (3) Short-Term Investments
- (4) Total
- 6. Joint Ventures, Partnerships and Limited Liability Companies

	<u>1</u>	2
		% of Liability to
	Amount	Total Liabilities*
6	367,273	51.910
6	0	0.000

Percent Share	
	0.00
	0.01
	0.00
	0.01

A. 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. Accrued Investment Income

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

B. Amounts Non admitted

No amounts were excluded as of December 31, 2021.

#### 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
- B. Derivatives under SSAP No. 108—Derivative Hedging Variable Annuity Guarantees
- (1) Discussion of hedged item/hedging instruments and hedging strategy:

Not Applicable

#### 9. Income Taxes

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

(1)			12/31/2021				
		(1)	(2)	(3)	(4)	(5)	(6)
				(Col 1 + 2)			(Col 4 + 5)
		Ordinary	Capital	Total	Ordinary	Capital	Total
a.	Gross Deferred Tax Assets	\$ 8,000	0	8,000	8,000	0	8,000
b.	Statutory Valuation Allowance Adjustments	\$ 0	0	0	0	0	0
C.	Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 8,000	0	8,000	8,000	0	8,000
d.	Deferred Tax Assets Nonadmitted	\$ 0	0	0	0	0	0
e.	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 8,000	0	8,000	8,000	0	8,000
f.	Deferred Tax Liabilities	\$ 219,000	79,000	298,000	217,000	92,000	309,000
g.	Net Admitted Deferred Tax Assets /						
	(Net Deferred Tax Liability) (1e - 1f)	\$ (211,000)	(79,000)	(290,000)	(209,000)	(92,000)	(301,000)

(1)			Change	
		(7)	(8)	(9)
		(Col 1 - 4)	(Col 2- 5)	(Col 7 + 8)
		Ordinary	Capital	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	\$ 2,000	(13,000)	(11,000)
g.	Net Admitted Deferred Tax Assets /			
	(Net Deferred Tax Liability) (1e - 1f)	\$ (2,000)	13,000	11,000

(2)			12/31/2021			12/31/2020	
(-)		(1)	(2)	(3)	(4)	(5)	(6)
				(Col 1 + 2)			(Col 4 + 5)
	Admission Calculation Components SSAP No. 101	Ordinary	Capital	Total	Ordinary	Capital	Total
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	\$ XXX	XXX	1,126,489	XXX	XXX	1,115,043
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.	\$ 8,000	0	8,000	8,000	0	8,000
d.	Deferred Tax Assets Admitted as the result of application of SSAP						
	No. 101. Total ( 2(a) + 2(b) + 2(c) )	\$ 8,000	0	8,000	8,000	0	8,000

(2)					Change			
			(1)		(2)		(3)	
			(0-14	4)	(0-10	Γ\	(0-17	. 0\
			(Col 1 -	,	(Col 2-	,	(Col 7	,
	Admission Calculation Components SSAP No. 101		Ordina	ary	Capita	al	Tota	ll .
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	\$	XXX	x	XXX	Χ		11,446
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
(3)				2021			2020	
á	. Ratio Percentage Used to Determine Recover Period							
	And Threshold Limitation Amount.				36820.40%		430	30.90%
t	Amount Of Adjusted Capital And Surplus Used To Determine							
	Recovery Period And Threshold Limitation In 2(b)2 Above.		\$	7,5	09,890.000		7,405,6	21.000
(4)		12/31/2021			12/31/2	020		

	Impact of Tax-Planning Strategies	(1)	(2)	(3)	(4)	(5)	(6)
a.	Determination of Adjusted Gross Deferred Tax						
	Assets and Net Admitted Deferred Tax Assets,					(Col 1 - 3)	(Col 2 - 4)
	By Tax Character As A Percentage.	Ordinary	Capital	Ordinary	Capital	Ordinary	Capital
1.	Adjusted Gross DTAs Amount From Note 9A1(c) \$	8,000	0	8,000	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) \$	8,000	0	8,000	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:

	carrent moonie takes meaned consist of the femousing major company			
		(1)	(2)	(3)
				(Col 1 - 2)
		12/31/2021	12/31/2020	Change
44)				
(1)	Current Income Tax			
a.	Federal \$	39,045	112,000	(72,955)
b.	Foreign \$	0	0	0
C.	Subtotal \$	39,045	112,000	(72,955)
d.	Federal Income Tax on net capital gains \$	(45)	0	(45)
e.	Utilization of capital loss carry-forwards \$	0	0	0
f.	Other \$	0	0	0
g.	Federal and foreign income taxes incurred \$	39,000	112,000	(73,000)

- (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	\$	8,000	8,000	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
13	Other (including items <5% of total ordinary tax assets)	\$	0	0	0
99.	Subtotal	\$	8,000	8,000	0
		_			

b.	Statutory valuation allowance adjustment	\$ 0	0	0
C.	Nonadmitted	\$ 0	0	0
d.	Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 8,000	8,000	0

e. Capital:

(1)	Investments	\$ 0	0	0
(2)	Net capital loss carry-forward	\$ 0	0	0
(3)	Real estate	 	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)	\$ 8.000	8.000	0

- (3) Deferred Tax Liabilities:
  - a. Ordinary

1.	Investments	\$	219,000	217,000	2,000
2.	Fixed assets	\$	0	0	0
3.	Deferred and uncollected premium	\$	0	0	0
4.	Policyholder reserves	\$	0	0	0
5.	Other Compensation	\$	0	0	0
6.	Other (including items <5% of total ordinary tax liabilities)	. \$	0	0	0
99.	Subtotal	\$	219,000	217,000	2,000

b. Capital:

1.	Investments	\$ 79,000	92,000	(13,000)
2.	Real Estate	\$ 0	0	0
3.	Other (including items <5% of total capital tax liabilities)	\$ 0	0	0
99.	Subtotal	\$ 79,000	92,000	(13,000)
C.	Deferred tax liabilities (3a99 + 3b99)	\$ 298,000	309,000	(11,000)
(4)	Net deferred tax assets/liabilities (2i - 3c)	\$ (290,000)	(301,000)	11,000

- D. Effective tax rates differ from the current statutory rate of 21% principally due to the effects of accretion of market discount and deferred intercompany transactions.
- E. The Company has no net operating loss or tax credit carry-forwards available to offset future net income subject to Federal income tax.
- (1) The amount of Federal income taxes incurred and available for recoupment in the event of future losses is \$39,000 from the current year and \$114,000 from the preceding year.
- (2) 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 Mutual Holding Company Inc.
America First Insurance Company	Liberty Mutual Insurance Company
America First Lloyd's Insurance Company	Liberty Mutual Personal Insurance Company
American Economy Insurance Company	Liberty Mutual Technology Group, Inc.
American Fire and Casualty Company	Liberty Northwest Insurance Corporation
American States Insurance Company	Liberty Personal Insurance Company
American States Insurance Company of Texas	Liberty RE (Bermuda) Limited
American States Lloyds Insurance Company	Liberty Sponsored Insurance (Vermont), Inc.
American States Preferred Insurance Company	Liberty Surplus Insurance Corporation
Barrier Ridge LLC	LIH-RE of America Corporation
Berkeley Management Corporation	LIU Specialty Insurance Agency Inc.
Colorado Casualty Insurance Company	LM General Insurance Company
Consolidated Insurance Company	LM Insurance Corporation
Diversified Settlements, Inc.	LM Property and Casualty Insurance Company
Emerald City Insurance Agency, Inc.	LMCRT-FRE-01 IC
Employers Insurance Company of Wausau	LMHC Massachusetts Holdings Inc.
Excelsior Insurance Company	Managed Care Associates Inc.
Excess Risk Reinsurance Inc.	Mid-American Fire & Casualty Company
F.B. Beattie & Co., Inc.	Nationale Borg Reinsurance N.V.
First National Insurance Company of America	North Pacific Insurance Company
First State Agency Inc.	Ocasco Budget, Inc.
General America Corporation	OCI Printing, Inc.
General America Corporation of Texas	Ohio Casualty Corporation
General Insurance Company of America	Ohio Security Insurance Company
Golden Eagle Insurance Corporation	Open Seas Solutions, Inc.
Gulf States AIF, Inc.	Oregon Automobile Insurance Company
Hawkeye-Security Insurance Company	Peerless Indemnity Insurance Company
Indiana Insurance Company	Peerless Insurance Company
Insurance Company of Illinois	Pymatuning, Inc.
Ironshore Holdings (US) Inc.	Rianoc Research Corporation
Ironshore Indemnity Inc.	SAFECARE Company, Inc.
Liberty Specialty Markets Bermuda Limited	Safeco Corporation
Ironshore Management Inc.	Safeco General Agency, Inc.
Ironshore Services Inc.	Safeco Insurance Company of America
Ironshore Specialty Insurance Company	Safeco Insurance Company of Illinois
Ironshore Surety Holdings Inc.	Safeco Insurance Company of Indiana

LEXCO Limited	Safeco Insurance Company of Oregon
Liberty-USA Corporation	Safeco Lloyds Insurance Company
Liberty Energy Canada, Inc.	Safeco National Insurance Company
Liberty Financial Services, Inc.	Safeco Properties, Inc.
Liberty Hospitality Group, Inc.	Safeco Surplus Lines Insurance Company
Liberty Insurance Corporation	San Diego Insurance Company
Liberty Insurance Holdings, Inc.	SCIT, Inc.
Liberty Insurance Underwriters Inc.	The First Liberty Insurance Corporation
Liberty International Holdings Inc.	The Midwestern Indemnity Company
Liberty Life Holdings Inc.	The National Corporation
Liberty Lloyds of Texas Insurance Company	The Netherlands Insurance Company
Liberty Management Services, Inc.	The Ohio Casualty Insurance Company
Liberty Mexico Holdings Inc.	Wausau Business Insurance Company
Liberty Mutual Agency Corporation	Wausau General Insurance Company
Liberty Mutual Credit Risk Transfer PCC Inc.	Wausau Underwriters Insurance Company
Liberty Mutual Fire Insurance Company	West American Insurance Company
Liberty Mutual Group Asset Management Inc.	Winmar Company, Inc.
Liberty Mutual Group Inc.	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. Repatriation Transition Tax

Not Applicable

I. Alternative Minimum Tax Credit

Not Applicable

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

- A. All the outstanding shares of capital stock of the Company are held by Peerless Insurance Company ("PIC"), a New Hampshire insurance company. PIC is wholly owned by Liberty Mutual Agency Corporation, an insurance holding company incorporated in Delaware. Liberty Mutual Agency Corporation is wholly owned by Liberty Insurance Holdings, Inc., an insurance holding company incorporated in Delaware. Liberty Insurance Holdings, Inc. is wholly owned by Liberty Mutual Insurance Company ("LMIC"), a Massachusetts insurance company. The ultimate parent of LMIC is Liberty Mutual Holding Company Inc., a Massachusetts company
- B. 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

Not Applicable

- D. At December 31, 2021, the Company reported a net \$29,481 due to 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 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 for the benefit of affiliates which result in a material contingent exposure of the Company's or affiliates' assets or liabilities.
- 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 entities.
- J. The Company did not recognize any impairment write down for its SCA companies during the statement period.

K.	The Company does not use	CARVM in calculating its	investment in its foreign subsidiaries.
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- L. The Company does not hold any investments in downstream non-insurance holding companies.
- M. All SCA Investments

(1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

	Percentage of			
	SCA			
SCA Entity	Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount

Not Applicable

(2) NAIC Filing Response Information

					NAIC Disallowe	
					Entities Valuatio	
				NAIC	Method,	
	Type of			Response	Resubmission	
SCA Entity	NAIC	Date of Filing to	NAIC Valuation	Received	Required	
(Should be same entities as shown in M(1) above.)	Filing *	the NAIC	Amount	Y/N	Y/N	Code **

Not Applicable

N. Investment in Insurance SCAs

Not Applicable

O. SCA 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

Not Applicable

- C. There were no outstanding borrowings as of December 31, 2021
- 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.

В.

(1) Information about Plan Assets

Not Applicable

C.

(1) Fair Value Measurements at December 31,2021

Not Applicable

D. Narrative description of expected long term rate of return assumptio

Not Applicable

E. Defined Contribution Plan

Not Applicable

F. Multiemployer Plans

Not Applicable

	G.	Consolidated/Holding Company Plans
		Not Applicable
	H.	Postemployment benefits and Compensated Absences
		Not Applicable
	l.	Impact of Medicare Modernization Act on Postretirement Benefits (I
		Not Applicable
13		Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations
A	٨.	The Company has 50,000 shares authorized and 38,000 shares issued and outstanding as of December 31, 2021. All shares have a stated par value of \$100
E	3.	Preferred Stock
		Not applicable.
(	С.	There are no dividend restrictions.
[	).	The Company did not pay any dividend to its parent in 2021.
E	Ξ.	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 2022 is \$93,269.
F		The Company does not have restricted unassigned surplus.
(	3.	The Company had no advances to surplus.
H	<del>1</del> .	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
		The company issued the following surplus debentures or similar obligations:
L		Not Applicable
L	-	The impact of any restatement due to prior quasi-reorganizations is as follows:  Not Applicable
N	Л.	Quasi-reorganization (effective date)
		Not Applicable
14.		Liabilities, Contingencies and Assessments
	A.	Contingent Commitments
		Refer to Note 10E
В.	As	sessments
	the	e 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 who 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.
(1)	The	e Company has no net guaranty fund or other assessment liabilities to report. Refer to Note 26.
C.	Ga	nin Contingencies
		Not Applicable
D.	Clai	ims related extra contractual obligations and bad faith losses stemming from lawsuits

D.

		Claims related ECO and bad faith losses paid during the reporting period	\$	6,809,924	
		Number of claims where amounts were paid to settle claims related extra contractual obligation			
		claims resulting from lawsuits during the reporting period: (a) 0-25 claims (b) 26-50 claims (c) (d) 101-500 claims (e) More than 500 claims	) 51-100 claims		
		Answer (A, B, C, D, or E):	A.		
		Indicate whether claim count information is disclosed (f) per claim or (g) per claimant			
		Answer (F or G):	, .F.		
E.	Proc	duct Warranties			
		Not Applicable			
F.	Jo	pint and Several Liabilities			
	Th	he Company is not a participant in any joint and several liabilities.			
G.	All	Il Other Contingencies			
		awsuits arise against the Company in the normal course of business. Contingent liabilities arisinosition of the Company.	ng from litigation, inco	come taxes, and other matters are not considered material in relation to the finance	ial
	Ве	s disclosed in Note 9 F, the Company is a member of a controlled group for federal income tax penefit Plan, a qualified plan under federal law. Pursuant to federal law, if LMGI has not made thompany, jointly and severally with all other members of the controlled group, would be continge	ne minimum required	d contributions with respect to the Liberty Mutual Retirement Benefit Plan, the	
15.		Leases.			
А		Lessee Leasing Arangements			
	а	a. The Company has no net lease obligations. Refer to Note 26.			
(	(1)				
	а	a. Not applicable			
	b	b. Not applicable			
	C.	c. Not applicable			
В		Leasing as a Significant Part of Lessors's Business Activites			
	а	a. Leasing is not a significant part of the Company's business activities.			
16.		Information About Financial Instruments With Off-Balance Sheet Risk And Financial	Instruments With C	Concentrations of Credit Risk	
		The Company is not exposed to financial instruments with off-balance sheet risk or concen	tration of credit risk.		
		Not Applicable			
17.		Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities			
	A.	Transfers of Receivables Reported as Sales			
	(1)	The Company did not have any transfers of receivables reported as sales			
	(2)	Not applicable			
B.		Transfers and Servicing of Financial Assets			
	(1)	The Company participates in a Securities Lending Program to generate additional income time from the Company's portfolio to qualifying third parties, via a lending agent. The con contractual collateral transactions that extend beyond one year from the reporting date. But value of the loaned securities. Acceptable collateral may be in the form of cash or U.S. Good loaned securities is monitored and additional collateral is obtained if the market value of the lending agent indemnifies the Company against borrower defaults. Cash collateral is unrestricted and the Company can exercise discretion as to how the collateral is invested. At December 31, 2021 the total fair value of securities on loan was \$ 361,602.50 with corr collateral that was reinvested.	npany does not particon provers of these secon exertment securities no collateral falls belocarried as an asset when the loaned securities are collateral falls belocarried as an asset when the loaned securities are securities.	icipate in term loans; therefore, the company does not have curities provide collateral equal to or in excess of 102% of the market s, such as Treasuries and Agency Bonds. The market value of the ow 102% of the market value of the loaned securities. Additionally, with an offsetting liability on the balance sheet, as the collateral is es remain a recorded asset of the Company.	

- C. Wash Sales:
- (1) Not Applicable.
- 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.

B. Other Fair Value Disclosures

Not Applicable

Ag	gregate Fair Value of All Financial Instruments  Type of Financial Instrument	1	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	\$	194,396	194,396	0	182,611	0	11,785	0
02	Bonds	\$	7,735,153	7,620,556	7,539,343	195,811	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	\$	367,276	367,273	0	367,276	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	\$	8,296,825	8,182,225	7,539,343	745,698	0	11,785	0

D. Reasons Not Practical to Estimate Fair Value

Not Applicable

- E. Instruments Measures at Net Asset Value (NAV)
- (1) 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 Tax Credits
- (1) Description of State Transferrable Tax Credits

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

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

(1) The Company has not purchased securities characterized by the market as subprime. The Company looks at such factors as average FICO scores, loan to value ratios, and levels of documentation when evaluating securities.

Mortgages in the process of foreclosure
 Mortgages in good standing
 Mortgages with restructure terms

1	2	3	4	5
			Other-Than-	
Book/Adjusted			Temporary	
Carrying Value			Impairment	
(excluding		Value of Land	Losses	
interest)	Fair Value	and Buildings	Recognized	Default Rate
 0	0	0	0	0
 0	0	0	0	0
 0	0	0	0	0
0	0	0	0	

(3) Direct exposure through other investments.

	Direct exposure through other investments.				
		1	2	3	4
					Other-Than-
			Book/Adjusted		Temporary
			Carrying Value		Impairment
			(excluding		Losses
		Actual Cost	interest)	Fair Value	Recognized
a.	Residential mortgage-backed securities	0	0	0	0
b.	Commercial mortgage-backed securities	0	0	0	0
C.	Collateralized debt obligations	0	0	0	0
d.	Structured securitie	0	0	0	0
e.	Equity investment in SCAs *	0	0	0	0
f.	Other assets	0	0	0	0
g.	Total	0	0	0	0

*ABC Company's subsidiary XYZ Company has	s investments in subprime	
mortgages. These investments comprise	_% of the companies	
invested assets.		0.

(4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.

	1	2	3	4
	Losses Paid	Losses Incurred	Case Reserves	IBNR Reserves
	in the	in the	at End of	at End of
	Current Year	Current Year	Current Period	Current Period
Mortgage Guaranty Coverage	0	0	0	
Financial Guaranty Coverage	0	0	0	
Other Lines (specify):				
	0	0	0	
	0	0	0	
	0	0	0	
	0	0	0	
	0	0	0	
	0	0	0	
	0	0	0	
	0	0	0	
	0	0	0	
	1	0	0	

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 22, 2022, the date the annual statement was available to be issued.

There were no events subsequent to December 31, 2021 that would require disclosure.

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

#### 23. Reinsurance

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								
a.	Affiliates								
b.	All Other								
C.	TOTAL								
d.	Direct Unearned Premium Reserve								

Assu	med	Ced	led	Net			
Premium Commission		Premium Commission		Premium	Commission		
Reserve	Equity	Reserve	Equity	Reserve	Equity		
(1)	(1) (2)		(4)	(5)	(6)		
\$ 0	0	3,135,751	0	(3,135,751)	0		
\$ 4,958	2,466	0	0	4,958	2,466		
\$ 4,958	2,466	3,135,751	0	(3,130,793)	2,466		
\$ 3,130,793							

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	
b.	Sliding Scale Adjustments	\$	0	0	0	
C.	Other Profit Commission Arrangements	\$	0	0	0	
d.	TOTAL	\$	0	0	0	

D. UNCOLLECTIBLE REINSURANCE

Not Applicable

E. COMMUTATION OF CEDED REINSURANCE

Not Applicable

F. RETROACTIVE REINSURANCE

Not Applicable

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, 2021.

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

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
  - b. The Company does not transact business with Certified Reinsurers.
- (2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation
- b. The Company is not a Certified Reinsurer.
- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not Applicable

K. Reinsurance Credit

The Company has not entered into any agreements covering health business.

#### 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
Not Applicable

F.

(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.

- 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 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 ("ASIC	19712	0.00%	All Lines
	American States Lloyd's Insurance Company ("ASLC	31933	0.00%	All Lines
	American States Preferred Insurance Company ("ASP	37214	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 Corporation ( LiC )  Liberty Insurance Underwriters, Inc. ("LIU")	19917	0.00%	All Lines All Lines
	Liberty Insurance Onderwhiers, Inc. ( LIO )  Liberty County Mutual Insurance Company ("LCMIC")	19544	0.00%	All Lines All Lines
	1	36447	0.00%	All Lines All Lines
	LM General Insurance Company ("LMGIC")	11041	0.00%	All Lines All Lines
	Liberty Lloyd's of Texas Insurance Company ("LLOT")			1
	LM Insurance Corporation ("LMC")	33600	0.00%	All Lines
	Liberty Mutual Mid-Atlantic Insurance Company ("LM	14486	0.00%	All Lines
	Liberty Mutual Personal Insurance Company ("LMPIC	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
	Mid-American Fire & Casualty Company ("MAFCC")	23507	0.00%	All Lines
	Montgomery Mutual Insurance Company ("MMIC")	14613	0.00%	All Lines

	The Midwestern Indemnity Company ("MWIC")	23515	0.00%	All Lines
	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
	Peerless Indemnity Insurance Company ("PIIC")	18333	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
	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
100% Quota Share	West American Insurance Company ("WAIC")	44393	0.00%	All Lines
Affiliated Companies:	LM Property and Casualty Insurance Company ("LMP	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 memebers 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, 2021.
- 27. Structured Settlements
  - A. The Company has no net exposure to contingent liabilities from the purchase of annuities. Refer to Note 26.
  - B. Not applicable.
- 28. Health Care Receivables

Not Applicable

29. Participating Policies

Not Applicable

30. Premium Deficiency Reserves

		_	(1)
01.	Liability carried for premium deficiency reserves \$	\$ .	0
02.	Date of the most recent evaluation of this liability	L	12/31/2021
03.	Was anticipated investment income utilized in the calculation?	Y.	es[]No[X]

31. High Deductible

Not Applicable

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

T	he (	Company	has no	net loss	and los	ss adjustmei	nt expense	reserves.	Refer	to N	lote '	26.

A. TABULAR DISCOUNT

Not Applicable

B. NON-TABULAR DISCOUNT

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.

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

Not Applicable

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated

## **GENERAL INTERROGATORIES**

### PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

	persons, one or more of which is an insurer?	Yes[X] 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 [X] 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[X]
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[X]
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
	By what department or departments? State of New Hampshire Insurance Department  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 [X]
3.6	Have all of the recommendations within the latest financial examination report been complied with?	Yes [X] No [ ] N/A [ ]
	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? 4.12 renewals?	Yes[] No[X] Yes[] No[X]
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:	
	<ul><li>4.21 sales of new business?</li><li>4.22 renewals?</li></ul>	Yes[] No[X] Yes[] No[X]
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	Yes[] No[X]
	If yes, complete and file the merger history data file with the NAIC.	

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.

3	2	1
State of Domicile	NAIC Company Code	Name of Entity

		entity had any Certificates of Authority, licenses or rended or revoked by any governmental entity during			Ye	s[]No[X	1
2 If	yes, give full info	rmation:					
1 D	oes any foreign (	non-United States) person or entity directly or indire	ectly control 10% or more of the reporting enti	ty?	Ye	s[]No[X	]
2 If	yes,						
	7.21	State the percentage of foreign control.					0.
	7.22	State the nationality(s) of the foreign person(s) reciprocal, the nationality of its manager or atto					
		(e.g., individual, corporation, government, mana					
		1	2				
		Nationality	Type of Entity				
	Entity 7230		EntType 10				
th	e Federal Reser	subsidiary of a depository institution holding compar we Board?  Is yes, please identify the name of the DIHC.	ny (DIHC) or a DIHC itself, regulated by		Ye	s[]No[X	1
th 2 If	e Federal Reser	ve Board?					
2 If	response to 8.1 in the company affiresponse to 8.3 ffiliates regulated fithe Comptroller	ve Board?	rms? v and state of the main office) of any le. the Federal Reserve Board (FRB), the Offince Corporation (FDIC) and the Securities			s[]No[X s[]No[X	
th 2 If 3 Is 4 If a 0	response to 8.1 in the company affiresponse to 8.3 ffiliates regulated fithe Comptroller	is yes, please identify the name of the DIHC.  illiated with one or more banks, thrifts or securities from the securities is yes, please provide the names and locations (city by a federal financial regulatory services agency [info the Currency (OCC), the Federal Deposit Insura	rms? v and state of the main office) of any le. the Federal Reserve Board (FRB), the Offince Corporation (FDIC) and the Securities	ice			
th  2 If	response to 8.1 in the company affiresponse to 8.3 ffiliates regulated fithe Comptroller	is yes, please identify the name of the DIHC.  illiated with one or more banks, thrifts or securities fi is yes, please provide the names and locations (city I by a federal financial regulatory services agency [i of the Currency (OCC), the Federal Deposit Insura ssion (SEC)] and identify the affiliate's primary fede	irms?  v and state of the main office) of any le. the Federal Reserve Board (FRB), the Office Corporation (FDIC) and the Securities ral regulator.	3	  Ye	s[] No[X	]
th  2 If	response to 8.1 in the company affiresponse to 8.3 ffiliates regulated fithe Comptroller	is yes, please identify the name of the DIHC.  illiated with one or more banks, thrifts or securities from the securities of the securitie	irms? v and state of the main office) of any i.e. the Federal Reserve Board (FRB), the Offince Corporation (FDIC) and the Securities ral regulator.		  Ye	s[]No[X	]
th 2 If 3 Is 4 If a 0	response to 8.1 in the company affiresponse to 8.3 ffiliates regulated fithe Comptroller	is yes, please identify the name of the DIHC.  illiated with one or more banks, thrifts or securities fi is yes, please provide the names and locations (city I by a federal financial regulatory services agency [i of the Currency (OCC), the Federal Deposit Insura ssion (SEC)] and identify the affiliate's primary fede	irms?  v and state of the main office) of any i.e. the Federal Reserve Board (FRB), the Offince Corporation (FDIC) and the Securities ral regulator.  2  Location (City, State)	3	  Ye	s[] No[X	]
th 2 If 3 Is 4 Iff a o E	the company aff response to 8.1 if response to 8.3 ffiliates regulated fithe Comptroller exchange Committee the reporting en	is yes, please identify the name of the DIHC.  illiated with one or more banks, thrifts or securities fi is yes, please provide the names and locations (city I by a federal financial regulatory services agency [i of the Currency (OCC), the Federal Deposit Insura ssion (SEC)] and identify the affiliate's primary fede  1  Affiliate  Name	rms?  v and state of the main office) of any e. the Federal Reserve Board (FRB), the Offince Corporation (FDIC) and the Securities ral regulator.  2 Location (City, State)	3	Ye 4 OCC	s[] No[X	6 SEC
.2 If	the company aff response to 8.1 if response to 8.3 ffiliates regulated f the Comptroller xchange Commit the reporting en e Board of Gove	is yes, please identify the name of the DIHC.  is yes, please identify the name of the DIHC.  is yes, please provide the names and locations (city) I by a federal financial regulatory services agency [i of the Currency (OCC), the Federal Deposit Insura ssion (SEC)] and identify the affiliate's primary fede  Affiliate Name	irms?  y and state of the main office) of any le. the Federal Reserve Board (FRB), the Office Corporation (FDIC) and the Securities ral regulator.  2 Location (City, State)	3	4 OCC	s[] No[X	6 SEC

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]
	Addit Nate), or substantially similar state law or regulation:	165[] 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	Ver f. 1 Ne f.V.1
	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	0
	12.13 Total book/adjusted carrying value	\$0
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]

- 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;

Association

(ABA) Routing Number

0

0

d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

Issuing or Confirming

Bank Name

	e. Accountability for adhe	rence to the code.	ns identified in the code, and	Yes[]No[X]
14.11	If the response to 14.1 is no	, please explain:		
14.2	Has the code of ethics for se	enior managers been amended?		Yes[]No[X]
14.21	If the response to 14.2 is ye	s, provide information related to amendment(s).		
14.3	Have any provisions of the	code of ethics been waived for any of the specified of	ficers?	Yes[]No[X]
14.31	If the response to 14.3 is ye	s, provide the nature of any waiver(s).		
15.1	Is the reporting entity the be confirming bank is not on th	neficiary of a Letter of Credit that is unrelated to reins e SVO Bank List?	surance where the issuing or	Yes[]No[X]
15.2		es, indicate the American Bankers Association (ABA) of the Letter of Credit and describe the circumstances	-	
	1 American Bankers	2	3	4

#### **BOARD OF DIRECTORS**

Circumstances That Can Trigger the Letter of Cred

0

0

16	6. 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[X] No[]
17	7. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?	Yes[X] No[]
18	3. 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[X] 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 [ X ]

	• • • • • • • • • • • • • • • • • • • •	Tocourito, exclusi	ve of policy loans):		
		20.11 To dir	rectors or other officers	\$	0
		20.12 To sto	ockholders not officers	\$	0
		20.13 Truste	ees, supreme or grand (Fraternal only)	\$	0
20.2	Total amount of loans outstanding at the end of year (inclusi	ve of Senarate A	ccounts, exclusive of policy loans):		
	Total amount of loans outstanding at the one of your (mouse		rectors or other officers	¢	Λ
				\$	0
			ockholders not officers		
		20.23 Trusto	ees, supreme or grand (Fraternal only)	\$	0_
	Were any assets reported in this statement subject to a cont	ractual obligatior	n 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 curre	nt year:			
		21.21 Rente	ed from others	\$	0
		21.22 Borro	wed from others		0
		21.23 Lease	ed from others	\$	0
		21.24 Other		\$	0
22.1	Does this statement include payments for assessments as d	lescribed in the A	annual Statement Instructions other than		
	guaranty fund or guaranty association assessments?			Yes[]No[X]	
	3 y 3 y				
22.2	If answer is yes:				
		22 21 Amoi	ınt paid as losses or risk adjustment	\$	0
			int paid as expenses	\$	0
					0
		ZZ.Z3 Otner	amounts paid	<b>\$</b>	<u>U</u>
00.4	Does the second of the second on the second of the second		officiates on Done O of this		
23.1	Does the reporting entity report any amounts due from parer	nt, subsidiaries of	r arrillates on Page 2 of this	V	
	statement?			Yes[X] No[]	
23.2	If yes, indicate any amounts receivable from parent included	I in the Page 2 ar	nount:	\$	0
	are not settled in full within 90 days?				
24	4.2. If the response to 24.1 is ves, identify the third-party that	navs the agents	and whether they are a related party		
24	4.2 If the response to 24.1 is yes, identify the third-party that	pays the agents			
24	1	pays the agents	2	v (Yes/No)	
24		pays the agents		y (Yes/No)	
24	1	pays the agents	2	y (Yes/No)	
24	1	pays the agents	2	y (Yes/No)	
24	1	pays the agents	2	y (Yes/No)	
24	1		2 Is the Third-Party Agent a Related Part	y (Yes/No)	
24	1		2	y (Yes/No)	
	Name of Third Party	INV	Is the Third-Party Agent a Related Part	y (Yes/No)	
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has	y (Yes/No)	
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting en	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has		
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has	y (Yes/No)  Yes [X] No[]	
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting enaddressed in 25.03)	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has		
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting en	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has		
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting enaddressed in 25.03)	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has		
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting enaddressed in 25.03)	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has		
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting enaddressed in 25.03)	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has		
25.01	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting enaddressed in 25.03)	INV	Is the Third-Party Agent a Related Part  ESTMENT  nt year, over which the reporting entity has		
25.01 25.02	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting enaddressed in 25.03)	INV mber 31 of curre ntity on said date	Is the Third-Party Agent a Related Part  ESTMENT  It year, over which the reporting entity has ? (other than securities lending programs		
25.01 25.02	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eladdressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the p	INV	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent of the control of t		
25.01 25.02 25.03	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eraddressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the posecurities, and whether collateral is carried on or off-balance	INV	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent of the control of t		
25.01 25.02 25.03	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eladdressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the p	INV	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent of the control of t		
25.01 25.02 25.03	Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eraddressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the procurities, and whether collateral is carried on or off-balance information is also provided)	INV	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent of the control of t		
25.01 25.02 25.03	Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eraddressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the procurities, and whether collateral is carried on or off-balance information is also provided)	INV	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent of the control of t		
25.01 25.02 25.03	Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eraddressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the procurities, and whether collateral is carried on or off-balance information is also provided)	INV	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent of the control of t		
25.01 25.02 25.03	Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eraddressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the procurities, and whether collateral is carried on or off-balance information is also provided)	INV	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent of the control of t		
25.01 25.02 25.03	Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eraddressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the procurities, and whether collateral is carried on or off-balance information is also provided)	intity on said date	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent to the reporting programs  (other than securities lending programs)  Invalue for collateral and amount of loaned that ive is to reference Note 17 where this		
25.01 25.02 25.03	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eladdressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the p securities, and whether collateral is carried on or off-balance information is also provided)  See Note 17B	intity on said date	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent to the reporting programs  (other than securities lending programs)  Invalue for collateral and amount of loaned that ive is to reference Note 17 where this		73_
25.01 25.02 25.03	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eraddressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the p securities, and whether collateral is carried on or off-balance information is also provided)  See Note 17B  For the reporting entity's securities lending program, report a	intity on said date	Is the Third-Party Agent a Related Part  ESTMENT  Int year, over which the reporting entity has equivalent to the reporting programs  (other than securities lending programs)  Invalue for collateral and amount of loaned that ive is to reference Note 17 where this	Yes [X] No [ ]	73_
25.01 25.02 25.03	Name of Third Party  Were all the stocks, bonds and other securities owned Dece exclusive control, in the actual possession of the reporting eraddressed in 25.03)  If no, give full and complete information, relating thereto:  For security lending programs, provide a description of the p securities, and whether collateral is carried on or off-balance information is also provided)  See Note 17B  For the reporting entity's securities lending program, report a	inversible amount of collate	Is the Third-Party Agent a Related Part  ESTMENT  In tyear, over which the reporting entity has  (other than securities lending programs)  I value for collateral and amount of loaned  native is to reference Note 17 where this  ral for conforming programs as outlined	Yes [X] No [ ]	7 <u>3</u>

25.06	Does your securities lending program require 102% (dome counterparty at the outset of the contract?	estic secu	rities) and 105% (foreign securities) from the	Υє	es[]No[]N/A[X]
25.07	Does the reporting entity non-admit when the collateral rec	ceived fro	m the counterparty falls below 100%?	Ye	es[X] No[] N/A[]
	Does the reporting entity or the reporting entity's securities Agreement (MSLA) to conduct securities lending?	s lending a	agent utilize the Master Securities Lending	Υє	es[X] No[] N/A[]
25.09	For the reporting entity's security lending program, state the	he amount	t of the following as of December 31 of the current year	:	
	25.091 Total fair value of reinvested collateral assets re	eported on	Schedule DL, Parts 1 and 2	\$	367,273
	25.092 Total book adjusted/carrying value of reinvested	d collatera	l assets reported on Schedule DL, Parts 1 and 2	\$	367,273
	25.093 Total payable for securities lending reported on	the liabilit	y page	\$	367,273
	Were any of the stocks, bonds or other assets of the report exclusively under the control of the reporting entity or has a put option contract that is currently in force? (Exclude solf yes, state the amount thereof at December 31 of the cur	the report	ting entity sold or transferred any assets subject to subject to Interrogatory 21.1 and 25.03).	Υe	es[X] No[]
		26.21 26.22 26.23 26.24 26.25 26.26 26.27 26.28 26.29 26.30	Subject to repurchase agreements Subject to reverse repurchase agreements Subject to dollar repurchase agreements Subject to reverse dollar repurchase agreements Placed under option agreements Letter stock or securities restricted as to sale - excluding FHLB Capital Stock FHLB Capital Stock On deposit with states On deposit with other regulatory bodies Pledged as collateral - excluding collateral pledged to an FHLB Pledged as collateral to FHLB - including assets backing funding agreements Other	\$ \$ \$ \$ \$	0 0 0 0 0 0 0 2,780,735 0
	For category (26.26) provide the following:  1  Nature of Restriction		2 Description		0
27.1	Does the reporting entity have any hedging transactions reported	on Schedul	le DB?		Yes[] No[X]
27.2	If yes, has a comprehensive description of the hedging program b If no, attach a description with this statement.	een made a	available to the domiciliary state?		Yes[] No[] N/A [X]
27.3	hrough 27.5 : FOR LIFE/FRATERNAL REPORTING ENTITIES OF Does the reporting entity utilize derivatives to hedge variable annual of interest rate sensitivity?		tees subject to fluctuations as a result		Yes[]No[]

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting

27.42

27.43

Special accounting provision of SSAP No. 108

Permitted accounting practice

Other accounting guidance

Yes [ ] No [ ]

Yes [ ] No [ ]

Yes [ ] No [ ]

entity attests to the following:

## **GENERAL INTERROGATORIES**

Yes [ ] No [ ]

<ul> <li>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</li> </ul>						
nditional Tail Expectation Amount.						
<ul> <li>Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a</li> <li>Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging</li> </ul>						
ategy being used by the company in its a	ctual day-to-day risk mitigation efforts.					
Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into						
uity, or, at the option of the issuer, conve	rtible into equity?			Yes[]No[X]		
es, state the amount thereof at December	er 31 of the current year.			\$		
cluding items in Schedule E - Part 3 - Sp	ecial Deposits, real estate, mortgage loar	ns and investments held				
	aults or safety deposit boxes, were all sto					
	suant to a custodial agreement with a qu amination Considerations, F. Outsourcing	•	·			
	nancial Condition Examiners Handbook?	,		Yes [X] No []		
r agreements that comply with the remplete the following:	equirements of the NAIC Financial C	Condition Examiners H	łandbook,			
1 Name of Cu			2 Custodian's Address			
r all agreements that do not comply ovide the name, location and a com	with the requirements of the NAIC F	Financial Condition Ex	aminers Handbook,			
	•	Financial Condition Ex	aminers Handbook, 3 Complete Explanation(s)			
ovide the name, location and a com	plete explanation:	Financial Condition Ex	3			
ovide the name, location and a com	plete explanation:	Financial Condition Ex	3			
ovide the name, location and a com  1  Name(s)	plete explanation:		3 Complete Explanation(s)	Yes[] No[X]		
ovide the name, location and a com  1  Name(s)	plete explanation:  2 Location(s)  ng name changes, in the custodian(		3 Complete Explanation(s)	Yes[] No[X]		
ovide the name, location and a com  1  Name(s)  ave there been any changes, including the ses, give full and complete information.	plete explanation:  2 Location(s)  ing name changes, in the custodian(s)  on relating thereto:	s) identified in 29.01 c	3 Complete Explanation(s) during the current year?	Yes[] No[X]		
ovide the name, location and a com  1  Name(s)  ave there been any changes, including the set of th	plete explanation:  2  Location(s)  ng name changes, in the custodian(	s) identified in 29.01 c	3 Complete Explanation(s) during the current year?	Yes[] No[X]		
ovide the name, location and a com  1  Name(s)  ave there been any changes, including the ses, give full and complete information.	plete explanation:  2 Location(s)  ing name changes, in the custodian(s)  on relating thereto:	s) identified in 29.01 c	3 Complete Explanation(s) during the current year?	Yes[] No[X]		
nvide the name, location and a com  1  Name(s)  Inve there been any changes, including es, give full and complete information	plete explanation:  2 Location(s)  ing name changes, in the custodian(s)  on relating thereto:	s) identified in 29.01 c	3 Complete Explanation(s) during the current year?	Yes[] No[X]		
ovide the name, location and a com  1  Name(s)  Ive there been any changes, includices, give full and complete information  1  Old Custodian	plete explanation:  2 Location(s)  ng name changes, in the custodian( on relating thereto:  2 New Custodian	s) identified in 29.01 c	3 Complete Explanation(s) during the current year?  4 Reason	Yes [ ] No [X]		
ovide the name, location and a com  1  Name(s)  ave there been any changes, includi es, give full and complete information  1  Old Custodian	plete explanation:  2 Location(s)  ng name changes, in the custodian( on relating thereto:  2 New Custodian  nvestment advisors, investment mail	s) identified in 29.01 of 3  Date of Change	3 Complete Explanation(s) during the current year?  4 Reason	Yes[] No[X]		
ovide the name, location and a com  1 Name(s)  ve there been any changes, includi es, give full and complete information  1 Old Custodian  estment management - Identify all is thave the authority to make investremally by employees of the reporting	plete explanation:  2 Location(s)  ng name changes, in the custodian( on relating thereto:  2 New Custodian	s) identified in 29.01 of 3  Date of Change  nagers, broker/dealers rring entity. For assets	Complete Explanation(s)  during the current year?  4  Reason  s, including individuals at that are managed	Yes [ ] No [X]		
ovide the name, location and a com  1 Name(s)  Inve there been any changes, including es, give full and complete information  1 Old Custodian  Investment management - Identify all into the the authority to make investrementally by employees of the reporting the complete information in the complete information	plete explanation:  2 Location(s)  ng name changes, in the custodian( on relating thereto:  2 New Custodian  nvestment advisors, investment manent decisions on behalf of the repo	s) identified in 29.01 of 3  Date of Change  nagers, broker/dealers rring entity. For assets	Complete Explanation(s)  during the current year?  4  Reason  s, including individuals at that are managed	Yes[] No[X]		
ovide the name, location and a com  1  Name(s)  Ive there been any changes, including the set of th	plete explanation:  2 Location(s)  ng name changes, in the custodian( on relating thereto:  2 New Custodian  nivestment advisors, investment mannent decisions on behalf of the repo	s) identified in 29.01 of 3  Date of Change  nagers, broker/dealers rring entity. For assets	Complete Explanation(s)  during the current year?  4  Reason  s, including individuals s that are managed ment accounts";	Yes[] No[X]		

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	2	3	4	5
	Central Registration	Legal Entity		Investment Management
Name Firm or Individual	Depository Number	Identifier (LEI)	Registered With	Agreement (IMA) Filed
N/A	Liberty Mutual Group	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	2	3
CUSIP # Name of Mutual Fund		Book/Adjusted Carrying Value
		0
		0
		0
30.2999 TOTAL		0

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

1	2	3	4
		Amount of Mutual Fund's	
Name of Mutual Fund	Name of Significant Holding	Book/Adjusted Carrying Value	
(from above table)	of the Mutual Fund	Attributable to the Holding	Date of Valuation
		0	
		0	
		0	

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	2	3
			Excess of Statement
			over Fair Value (-),
	Statement (Admitted)		or Fair Value over
	Value	Fair Value	Statement (+)
31.1 Bonds	7,620,556	7,735,153	114,597
31.2 Preferred stocks	0	0	0
31.3 Totals	7,620,556	7,735,153	114,597

314	Describe the	sources or	methods	utilized in	determining	the fair	values.
J 1.4	Describe trie	3001003 01	IIICIIIUUS	utilizeu III	ueterrilling	uic iaii	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[]

	If the answer to 32.2 is no, describe the reporting entity's process for deterministic source for purposes of disclosure of fair value for Schedule D:	ing a reliable pricing					
33.1	Have all the filing requirements of the Purposes and Procedures Manual of the followed?	NAIC Investment Analysis Office been	Yes[] No[X]				
33.2	If no, list exceptions:						
34	By self-designating 5GI securities, the reporting entity is certifying the following a. Documentation necessary to permit a full credit analysis of the securib. Issuer or obligor is current on all contracted interest and principal pay	ity does not exist or an NAIC CRP credit rating					
	c. The insurer has an actual expectation of ultimate payment of all control. Has the reporting entity self-designated 5GI securities?	racted interest and principal.	Yes[]No[X]				
35	By self-designating PLGI securities, the reporting entity is certifying the following	ng elements of each self-designated PLGI secu	ırity:				
	<ul> <li>a. The security was purchased prior to January 1, 2018.</li> <li>b. The reporting entity is holding capital commensurate with the NAIC D.</li> <li>c. The NAIC Designation was derived from the credit rating assigned by shown on a current private letter rating held by the insurer and availad.</li> <li>d. The reporting entity is not permitted to share this credit rating of the F.</li> </ul>	y an NAIC CRP in its legal capacity as an NRS ible for examination by state insurance regulate					
	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 et a. The shares were purchased prior to January 1, 2019.	ntity is certifying the following elements of each	self-designated FE fund:				
	<ul> <li>b. The reporting entity is holding capital commensurate with the NAIC E</li> <li>c. The security had a public credit rating(s) with annual surveillance ass to January 1, 2019.</li> <li>d. The fund only or predominantly holds bonds in its portfolio.</li> </ul>	,	an NRSRO prior				
	The current reported NAIC Designation was derived from the public of in its legal capacity as an NRSRO.     The public credit rating(s) with annual surveillance assigned by an NA		d by an NAIC CRP				
	Has the reporting entity assigned FE to Schedule BA non-registered private full	nds that complied with the above criteria?	Yes[]No[X]				
37.	By rolling/renewing short-term or cash-equivalent investments with continued r (identified through a code (%) in those investment schedules), the reporting en		E Part 2				
	<ul> <li>a. The investment is a liquid asset that can be terminated by the reporti</li> <li>b. If the investment is with a nonrelated party or nonaffiliate, then it reflected discretion of all involved parties.</li> </ul>		impleted at the				
	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.						
	<ul> <li>Short-term and cash equivalent investments that have been renewed</li> <li>37.a - 37.c are reported as long-term investments.</li> </ul>	arrolled from the prior period that do not meet tr	le criteria in				
	Has the reporting entity rolled/renewed short-term or cash equivalent investment	ents in accordance with these criteria?	Yes[] No[X] N/A []				
	ОТНІ	ER					
38.1	Amount of payments to trade associations, service organizations and statistical	al or Rating Bureaus, if any?	\$0				
38.2	2 List the name of the organization and the amount paid if any such payment re total payments to trade associations, service organizations and statistical or re covered by this statement.						
	1	2 Amount Paid					
	Name	Amount Paid \$	0.				
		\$	0				

Annual Statement for the year 2021 of the	Excelsior Insurance Company

39.1 Am	ount of payments for legal expenses, if any?		\$ 0
39.2 Lis	the name of the firm and the amount paid if any such payment represente	ed 25% or more of the total	
pay	ments for legal expenses during the period covered by this statement.		
	1	2	
	Name	Amount Paid	
		\$	
		\$0	
		\$ 0	
40.1 Am	ount of payments for expenditures in connection with matters before legisle	ative bodies, officers or departments	
of (	povernment, if any?		\$ 0_
40.2 Lis	the name of the firm and the amount paid if any such payment represente	ed 25% or more of the total	
pay	ment expenditures in connection with matters before legislative bodies, of	ficers or departments of government	
dur	ing the period covered by this statement.		
	1	2	

## PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any dire	ct Medicare Sup	plement Insurance in force?		Yes [ ] No [X]
1.2 If yes, indicate premium earned on U.S	business only.			\$0_
1.3 What portion of Item (1.2) is not reported 1.31 Reason for excluding	ed on the Medica	re Supplement Insurance Experier	nce Exhibit?	\$0
				• •
<ul><li>1.4 Indicate amount of earned premium att</li><li>1.5 Indicate total incurred claims on all Me</li><li>1.6 Individual policies:</li></ul>			ed in Item (1.2) above.	\$0 \$
The marvadar policies.	Most	current three years:		
	1.61	Total premium earned		\$0
	1.62 1.63	Total incurred claims  Number of covered lives		\$ <u>0</u>
		ars prior to most current three year	rs:	
	1.64 1.65	Total premium earned Total incurred claims		\$ <u>0</u> \$
	1.66	Number of covered lives		<u> </u>
1.7 Group policies:				
		current three years:		
	1.71	Total premium earned Total incurred claims		\$ <u>0</u> \$
	1.72 1.73	Number of covered lives		<u> </u>
		ars prior to most current three year	rs:	Φ 0
	1.74 1.75	Total premium earned Total incurred claims		\$0
	1.76	Number of covered lives		0
2. Health Test:			1 2	
	2.1	Premium Numerator	Current Year Prior Year \$ 0 \$	)
	2.2	Premium Denominator		<u>5</u> )
	2.3	Premium Ratio (2.1 / 2.2)	0.00 0.00	
	2.4	Reserve Numerator		<u>)                                    </u>
	2.5 2.6	Reserve Denominator Reserve Ratio (2.4 / 2.5)	\$\$ <u></u>	<u>)                                    </u>
	2.0	11000110 11010 (2.17 2.0)		<u>.                                    </u>
3.1 Did the reporting entity issue participati	ing policies during	g the calendar year?		Yes[X]No[]
3.2 If yes, provide the amount of premium	written for partici	pating and/or non-participating pol	icies during the calendar year	
	3.21	Participating policies		\$(15,621)
	3.22	Non-participating policies		\$5,942,899_
4. For Mutual reporting entities and Recip	rocal Exchanges	only:		
4.1 Does the reporting entity issue assessa	able policies?			Yes [ ] No [X]
4.2 Does the reporting entity issue non-ass	sessable policies	?		Yes[]No[X]
4.3 If assessable policies are issued, what	is the extent of the	ne contingent liability of the policyh	nolders?	
4.4 Total amount of assessments paid or o	rdered to be paid	I during the year on deposit notes	or contingent premiums.	\$0_
5. For Reciprocal Exchanges Only:				
5.1 Does the exchange appoint local agent	ts?			Yes [ ] No [X]
5.2 If yes, is the commission paid:				
	5.21	Out of Attorney's-in-fact compen	sation	Yes[]No[]N/A[X]
	5.22	As a direct expense of the excha	ange	Yes[]No[]N/A[X]
5.3 What expenses of the Exchange are no	ot paid out of the	compensation of the Attorney-in-fa	act?	
				• •
5.4 Has any Attorney-in-fact compensation	, contingent on fo	ulfillment of certain conditions, bee	en deferred?	Yes [ ] No [ ]
5.5 If yes, give full information	-			,
6.1 What provision has this reporting entity compensation contract issued without I see Note 21C1		itself from an excessive loss in the	e event of a catastrophe under a workers'	
300 NOIG 2 NO I				
				••

#### 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		
	500 Note 2101		
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.	0	)_
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,  (b) The entity only engages in a 100% guest share contract with an affiliate and the affiliated or lead company has filed an attestation.	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[]No[X]	

#### PART 2 – PROPERTY & CASUALTY INTERROGATORIES

		s assumed risks from another entity would have been requ	•	-		serve equal	Yes [X] No [	] N/A [ ]
	Has the reporting entity of the state of the	guaranteed policies issued by	any other entity and no	ow in force:			Yes[]No[X	]
	If the reporting entity rec	orded accrued retrospective p						
	amount of corresponding		11 Unpaid losses				\$	0
			12 Unpaid underwriting	j expenses (including lo	oss adjustment expens	es)	\$	0
12.2	Of the amount on Line 1	5.3, Page 2, state the amoun	t that is secured by lette	ers of credit, collateral a	and other funds?		\$	0_
		derwrites commercial insurands covering unpaid premiums		rs' compensation, are p	premium notes or promi	issory notes	Yes[]No[X	] N/A [ ]
12.4	If yes, provide the range	of interest rates charged und	er such notes during the	e period covered by thi	is statement:			0.00 0/
			41 From 42 To					0.00 %
	promissory notes taken I	ollateral and other funds receiving a reporting entity or to secutible features of commercial p	ure any of the reporting		• •		Yes[]No[X	]
12.6	If yes, state the amount	thereof at December 31 of cu	-					
			<ul><li>61 Letters of Credit</li><li>62 Collateral and other</li></ul>	· funds			\$ \$	0
13 1	Largest net aggregate a	mount insured in any one risk					\$	0
		•					Ť	
	Does any reinsurance or reinstatement provision?	ontract considered in the calc	ulation of this amount in	clude an aggregate lim	nit of recovery without a	lso including a	Yes [X] No [	]
		surance contracts (excluding ligatory contracts) considered			ding facultative progran	ns, automatic		1_
14.1	Is the company a cedan	t in a multiple cedant reinsura	nce contract?				Yes [ X ] No [	]
14.2		ne method of allocating and reples were allocated pursuant			mpany pooling agreem	ient.		
14.3	If the answer to 14.1 is v	es, are the methods describe	d in item 14.2 entirely c	contained in the respect	tive multiple cedant reir	nsurance		
	contracts?	oo, are the methode december	a in tom 11.2 Sharoly o	ontained in the reopes	avo marapio ocazin ron	loaranoo	Yes[]No[X	]
14.4	If the answer to 14.3 is n	o, are all the methods descril	ped in 14.2 entirely conf	ained in written agreer	nents?		Yes [X] No [	]
14.5	If the answer to 14.4 is n N/A	o, please explain:						
15.1	Has the reporting entity	guaranteed any financed prer	mium accounts?				Yes[]No[X	]
15.2	If yes, give full information	on						
		write any warranty business' wing information for each of the		rranty coverage:			Yes[]No[X	]
		1	2	3	4	5		
		Direct Losses	Direct Losses	Direct Written Premium	Direct Premium Unearned	Direct Premium Earned		
		Incurred	Unpaid					
	16.11 Home	\$0	\$ 0	\$0	\$0	\$0		
	16.11 Home 16.12 Products 16.13 Automobile 16.14 Other*		•	\$ 0 \$ 0 \$ 0 \$ 0	\$ 0 \$ 0	\$ 0		

#### 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:		
	<ul> <li>17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3 exempt from the statutory provision for unauthorized reinsurance</li> <li>17.12 Unfunded portion of Interrogatory 17.11</li> <li>17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11</li> <li>17.14 Case reserves portion of Interrogatory 17.11</li> <li>17.15 Incurred but not reported portion of Interrogatory 17.11</li> <li>17.16 Unearned premium portion of Interrogatory 17.11</li> <li>17.17 Contingent commission portion of Interrogatory 17.11</li> </ul>	\$	0 0 0 0 0 0
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.	\$	0_
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 adminstered as of the reporting date.	\$	0_
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 [ X ] N/	A[]

# 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
		2021	2020	2019	2018	2017
	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	55,295	1,070,158	2,924,704	7,288,924	48,361,211
2.	Descriptions (Lines 4.0.0.40.04.00)	83,175	605,080	1,539,734	4,425,364	18,940,954
	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	F 004 404	10,596,534	12,463,709	17,373,182	36,985,518
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	1	10,030,004	12,400,703	17,575,102	30,303,310
5.	Nonprepartional reinquirence lines (Lines 21, 20,9,22)					
	T-1-1 (1: 25)	5.939.664	12,271,772	16,928,147	29,087,470	104,287,683
0.	Net Premiums Written (Page 8, Part 1B, Col. 6)			10,020,111	20,001,110	101,201,000
7	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
	Dronothy lines /Lines 1 2 0 10 21 8 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)					
	Total (Line 35)					
	Statement of Income (Page 4)					
13	Net underwriting gain (loss) (Line 8)					
14.	Net investment gain (loss) (Line 11)	132,314	161,117	1,562,826	758,615	717,866
15.	Total other income (Line 15)		231	15,633	(10,842)	1
16.	Dividends to policyholders (Line 17)				(19,512)	
	Federal and foreign income taxes incurred (Line 19)	39,045	112,000	(46,764)	(254,875)	336,471
l .	Not in a constitution of the constitution of t	93,269	49,348	1,625,223	1,002,648	377,361
10.	Balance Sheet Lines (Pages 2 and 3)			1,020,220	1,002,010	
19.	Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	8,217,449	8,391,714	8,774,985	39,860,386	36,694,292
20.	Premiums and considerations (Page 2, Col. 3)	0,217,443	0,031,714	0,774,300	03,000,000	00,004,232
	0041	(64)				
	000 D ( )   1   1   1   1   15   000					
	20.2 Deterred and not yet due (Line 15.2) 20.3 Accrued retrospective premiums (Line 15.3)					
21	Total liabilities evaluating protected call business (Page 2. Line 26)	707,559	986,093	1,498,712	3,028,335	832,890
22.	Lease (Page 2 Line 1)	707,559		1,430,712	3,020,333	002,000
23.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
	Uncorned premiums (Page 2 Line 0)					
	Conitel paid up (Dage 2 Lines 20 8 24)	3,800,000	3,800,000	3,800,000	3,800,000	3,800,000
26.	Curelus as regards noticularly (Dags 2 Line 27)	7,509,890	7,405,621	7,276,273	36,832,050	35,861,402
20.	Cash Flow (Page 5)	7,505,050	7,400,021	1,210,213	00,032,000	30,001,402
27	Not only from according (Line 44)	23,769	125,561	1,343,055	442,835	605,309
27.	Risk-Based Capital Analysis	20,703	120,001	1,040,000	442,000	
28.	± 11 ° 11 ° 11	7,509,890	7,405,621	7,276,273	36,832,050	35,861,402
29.		20,396	17,210	18,203	73,718	60,132
25.	Percentage Distribution of Cash, Cash Equivalents and Invested Assets	20,030		10,200	1	00,102
	(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30.	Bonds (Line 1)	93.1	90.7	83.7	92.1	96.9
	Stocks (Lines 2.1 & 2.2)					1
32	Mortgage loans on real estate (Lines 3.1 and 3.2)					
33.						
34.		2.4	2.3	4.2	0.9	2.1
35.	Contract loans (Line 6)					
36.	Derivatives (Line 7)					
37.						
38.	Receivables for securities (Line 9)				1	
39.	Securities lending reinvested collateral assets (Line 10)			12.1	6.9	1.0
40.	Aggregate write-ins for invested assets (Line 11)					1
41.		400.0	100.0	100.0	100.0	100.0
	Investments in Parent, Subsidiaries and Affiliates	100.0				
42.	Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1)					
43.	Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					1
44.	Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
45.						1
	Col. 5, Line 10)				]	
46.	*					1
	All other affiliated					1
48.	Total of above Lines 42 to 47					
49.	Total investment in parent included in Lines 42 to 47 above					1
50.	Percentage of investments in parent, subsidiaries and affiliates to surplus as					1
	regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					
	, ,,,	1	1	l	1	1

# FIVE - YEAR HISTORICAL DATA

(Continued)

•		1	2	3	4	5
		2021	2020	2019	2018	2017
	Capital and Surplus Accounts (Page 4)					
	Net unrealized capital gains (losses) (Line 24)			(00.447.400)		
52. 53.	Dividends to stockholders (Line 35)  Change in surplus as regards policyholders for the year (Line 38)	104,269	129,348	(20,417,460) (29,555,777)		482,361
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	12,168,653	19,506,000	33,107,138	39,447,686	53,642,192
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	23,900	(67,720)	470,735	2,906,500	5,316,227
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	27,077,746		12,195,432	16,034,903	15,825,875
57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59.	Total (Line 35)	39,270,299	29,245,919	45,773,305	58,389,089	74,784,294
	Net Losses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65.	Total (Line 35)					
	Operating Percentages (Page 4) (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
	Losses incurred (Line 2)					
68.	Loss expenses incurred (Line 3)					
69.	Other underwriting expenses incurred (Line 4)					
70.	Net underwriting gain (loss) (Line 8)					
	Other Percentages					
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)					
	divided by Page 3, Line 37, Col. 1 x 100.0)					
	One Year Loss Development (\$000 omitted)					
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)					
	Two Year Loss Development (\$000 omitted)					
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)					

policyflolders surplus of second prior year end (Line 76 above divided		Į.	 1	
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	o a merger in complianc	e with the disclosure	Yes[]N	io[]
requirements of SSAP No. 3, Accounting Changes and Correction of Errors?				
If no, please explain:				
			 •	

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** 

		1 Active	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders	5 Direct Losses Paid	6 Direct	7 Direct	8 Finance and Service Charges Not	9 Direct Premium Written for Federal Purchasing
	States, Etc.	Status (a)	Direct Premiums Written	Direct Premiums Earned	on Direct Business	(Deducting Salvage)	Losses Incurred	Losses Unpaid	Included in Premiums	Groups (Included in Col. 2)
1.	Alabama AL	N.								
2.	Alaska AK	N								
3. 4.	Arizona AZ Arkansas AR	N N								
5.	California CA	! <mark>N</mark>								
6.	Colorado CO	N N								
7.	Connecticut CT	L	5,647	25,448		824,652	(15,490)	15,278,500		
8. 9.	Delaware DE District of Columbia DC	<del> </del>		66,564		259,256	(62,706) 1,196	1,765,922 146,679		
10.	Florida FL	<del>.</del>					1,130	140,079		
11.	Georgia GA	[	2,860	1,209,939		22,983,061	33,685,136	12,937,784		
12.	Hawaii HI	N								
13.	Idaho ID	N								
14. 15.	Illinois IL Indiana IN	N i								
16.	lowa IA									
17.	Kansas KS	N.	1				1			
18.	Kentucky KY	<u>L</u>								
19. 20.	Louisiana LA Maine ME	N .	870	205,171		298,820	(319,416)	6,048,017		
20.	Maryland MD		(7,519)	27,241		285,271	(173,019)	4,255,492		
22.	Massachusetts MA	<u>F</u>	(21,503)	71,579		775,823	(10,672)	13,838,441		
23.	Michigan MI	N								
24.	Minnesota MN Mississippi MS	N N								
25. 26.	Mississippi MS Missouri MÖ	! <u>N</u>								
27.	Montana MT									
28.	Nebraska NE	N					1			l
29.	Nevada NV	N	<u></u>							
30. 31.	New Hampshire NH New Jersey NJ	<del> </del>	70	7,911		331,215	(260,178)	10,377,025		
32.	New Jersey NJ New Mexico NM	<u>-</u>	5,996,559	6,499,714		10,363,743	2,079,186	66,946,327		
33.	New York NY	[	(7,971)	143,669		2,245,931	(1,771,880)	52,900,142		
34.	North Carolina NC			43,346		190,130	(619,743)	5,355,547		<b> </b>
35.	North Dakota ND	N								
36. 37.	Ohio OH Oklahoma OK	N N								
38.	Oregon OR	! <mark>N</mark>								
39.	Pennsylvania PA	L	(38,379)	639,713		2,351,517	842,730	9,278,230		
40.	Rhode Island RI	L. L.	75	85						
41. 42.	South Carolina SC South Dakota SD	N N								
43.	Tennessee TN	! <mark>N</mark>								
44.	Texas TX	N								
45.	Utah UT	N	<u></u>							
46.	Vermont VT Virginia VA	<del> </del>	(177)	184,025	95,001	196,631	231,143	5,075,428 1,446,843		
47. 48.	Virginia VA Washington WA	<u>.</u>	(3,254)	137,697		202,538	323,422	1,440,043		
49.	West Virginia WV	N	1				1			
50.	Wisconsin WI	N								
51. 52.	Wyoming WY American Samoa AS	N N								
52.	Guam GU	<u>N</u>								
54.	Puerto Rico PR	· · · · · · · · · · · · · · · · · · ·					1			
55.	U.S. Virgin Islands VI	N								
56.	Northern Mariana Islands MP	N.								
57. 58.	Canada CAN Aggregate Other Alien OT	XXX								
59.	Totals	(a) 17	5,927,278	9,262,102	95,001	41,308,588	33,929,709	205,650,377		
	DETAILS OF WRITE-INS									
58001.	DETAILS OF WINTERNS	XXX	-							
58002.		XXX								
58003.		XXX								
58998.	Summary of remaining write-ins									
58999.	for Line 58 from overflow page Totals (Lines 58001 through	XXX	+							
	58003 plus 58998) (Line 58 above)	XXX								

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

(a)	Active Status Counts		
	L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG	17	
	É – Eligible - Reporting entities eligble or approved to write surplus lines in the state		
	D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile		
	R - Registered - Non-domiciled RRGs		
	Q - Qualified - Qualified or accredited reinsurer		
	N = None of the above - Not allowed to write business in the state (other than their state of domicile - See DSLI)	40	

#### 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

\*States employee's main work place - Worker's Compensation

\*Location of Court or Obligee - Surety

\*Location of Principal place of garaging of each individual car - Auto Liability, Auto Physical Damage

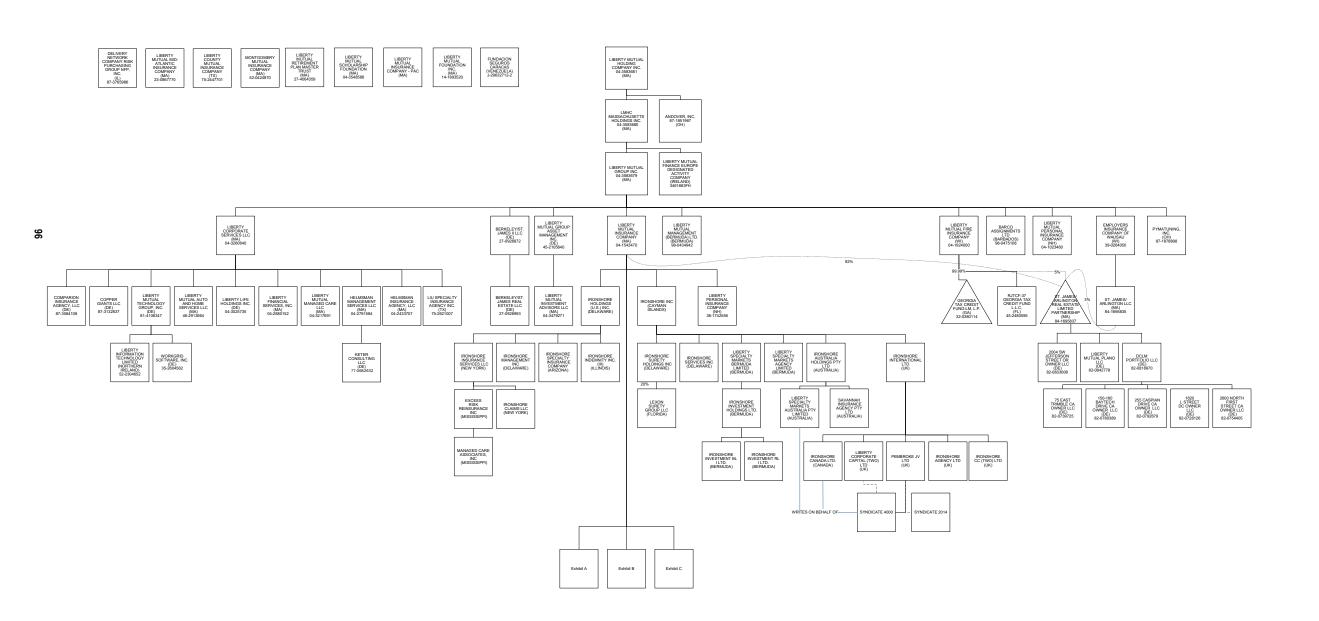
\*Principal Location of business or location of coverage - Liability other than Auto, Fidelity, Warranty
\*Point of origin of shipment or principal location of assured - Inland Marine
\*State in which employees regularly work - Group Accident and Health

\*Address of Assured - Other Accident and Health

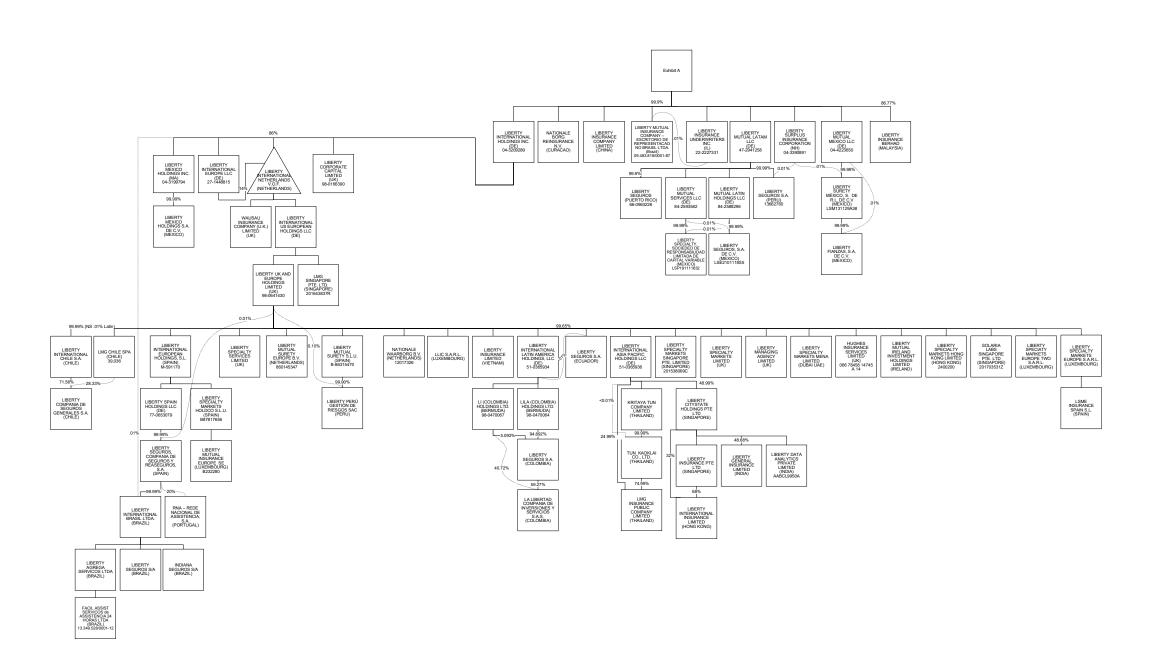
\* Location of Properties covered - Burglary and Theft \*Principal Location of Assured - Ocean Marine, Credit

\*Primary residence of Assured- Aircraft (all perils)

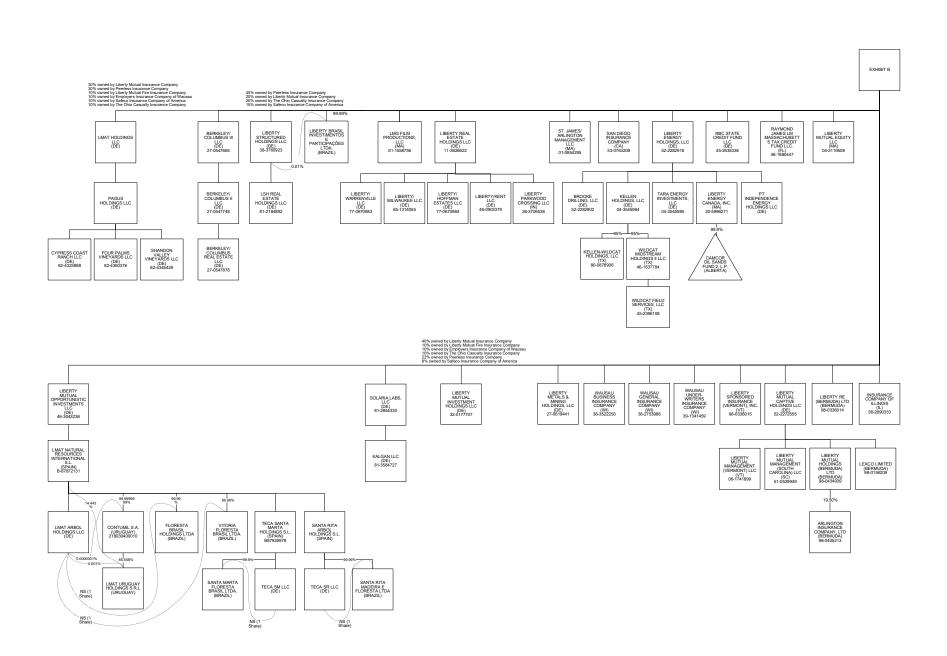
# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART

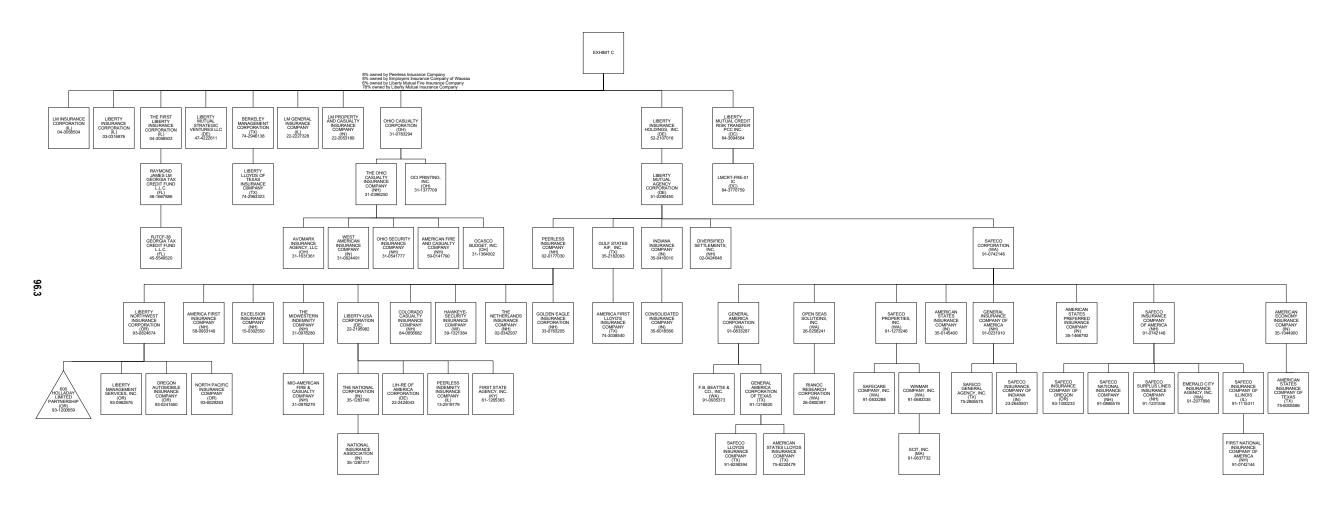


# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



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

#### **PART 1 - ORGANIZATIONAL CHART**



# **OVERFLOW PAGE FOR WRITE-INS**