FINANCIAL CONDITION REPORT ON EXAMINATION

OF

THE MANHATTAN LIFE INSURANCE COMPANY

AS OF DECEMBER 31, 2021

EXAMINER:	**THOMAS J. ALLEN, CFE**
DATE OF REPORT:	**JUNE 22, 2023**

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June 22, 2023

Honorable Adrienne A. Harris
Superintendent of Financial Services
New York, New York 10004

Dear Adrienne A. Harris:

In accordance with instructions contained in Appointment No. 32421, dated June 30, 2022, and annexed hereto, an examination has been made into the condition and affairs of The Manhattan Life Insurance Company, hereinafter referred to as "the Company". The Company's home office is located at 225 Community Drive, Great Neck, NY 11021, and its administrative office is located at 10777 Northwest Freeway, Suite 800, Houston, TX 77092. Due to the COVID-19 pandemic, the examination was conducted remotely.

Wherever "Department" appears in this report, it refers to the New York State Department of Financial Services.

The report indicating the results of this examination is respectfully submitted.

1. EXECUTIVE SUMMARY

The material violation contained in this report is summarized below.

The Company violated Section 91.4(a) of 11 NYCRR 91 (Insurance Regulation 33) by failing to maintain records with sufficient detail to fully demonstrate the method used for the allocation of expenses and the actual basis of the allocation under the service agreement with its affiliates. (See item 3D of this report.)

2. SCOPE OF EXAMINATION

The examination of the Company was a full-scope examination as defined in the National Association of Insurance Commissioners ("NAIC's") *Financial Condition Examiner*s *Handbook, 2022 Edition* (the "Handbook"). The examination covers the five-year period from January 1, 2017, to December 31, 2021. The examination was conducted observing the guidelines and procedures in the Handbook and, where deemed appropriate by the examiner, transactions occurring subsequent to December 31, 2021, but prior to the date of this report (i.e., the completion date of the examination) were also reviewed.

The examination was conducted on a risk-focused basis in accordance with the provisions of the Handbook. The Handbook guidance provides for the establishment of an examination plan based on the examiner's assessment of risk in the insurer's operations and utilizing that evaluation in formulating the nature and extent of the examination. The examiner planned and performed the examination to evaluate the current financial condition as well as identify prospective risks that may threaten the future solvency of the insurer. The examiner identified key processes, assessed the risks within those processes and evaluated the internal control systems and procedures used to mitigate those risks. The examination also included assessing the principles used and significant estimates made by management, evaluating the overall financial statement presentation, and determining management's compliance with New York statutes and Department guidelines, Statutory Accounting Principles as adopted by the Department, and annual statement instructions.

The examination was called by the State of Texas in accordance with the Handbook guidelines, through the NAIC's Financial Examination Electronic Tracking System. Texas served as the lead state with participation from the states of New York, Utah, and Washington. Since the lead and participating states are all accredited by the NAIC, all states deemed it appropriate to rely on each other's work.

Information about the Company's organizational structure, business approach and control environment were utilized to develop the examination approach. The Company's risks and management activities were evaluated incorporating the NAIC's nine branded risk categories. These categories are as follows:

- Pricing/Underwriting
- Reserving
- Operational

- Strategic
- Credit
- Market
- Liquidity
- Legal
- Reputational

The Company was audited annually, for the years 2017 through 2021, by the accounting firm of EisnerAmper LLP and the Company received an unqualified opinion in all years. Certain audit workpapers of the accounting firm were reviewed and relied upon in conjunction with this examination. The Manhattan Insurance Group ("MIG") has an internal audit department which was given the task of assessing the internal control structure of its subsidiaries, including the Company. The Company follows the same internal control processes as the other MIG companies; therefore, applicable shared internal audit reports were reviewed and portions were relied on for this examination.

The examiner reviewed the corrective actions taken by the Company with respect to the violation and comments contained in the prior report on examination. The results of the examiner's review are contained in item 6 of this report.

This report on examination is confined to financial statements and comments on those matters which involve departure from laws, regulations, or rules, or which require explanation or description.

3. DESCRIPTION OF COMPANY

A. History

The Company was incorporated as a stock life insurance company under the laws of the State of New York on May 29, 1850, and was licensed and commenced business on August 1, 1850, under Chapter 308 of the laws of 1849 as an entity with a guaranteed capital of $100,000. The Company was authorized to write participating life insurance policies.

On March 8, 1974, a Delaware corporation known as the Manhattan Life Corporation ("Manhattan Corp.") acquired control of the Company. In 1977, Manhattan Corp. eliminated minority interests in the Company pursuant to Section 7118 of the New York Insurance Law. The Company then became a privately held corporation. In 1982, Manhattan Corp. changed its name to Manhattan National Corporation ("Manhattan National").

On March 31, 1987, Union Central Life Insurance Company ("Union Central") acquired a majority interest in Manhattan National. On December 31, 1991, Manhattan National was liquidated and all outstanding shares of the Company were distributed to Manhattan National shareholders, and as a result, the Company again became a publicly held corporation with 72.9% of stocks owned by Union Central. Effective January 28, 1997, the Company's shareholders approved a 1-for-303,784 reverse stock split that resulted in Union Central becoming the sole shareholder of the Company. Union Central thus returned the Company to private ownership and took it off the NASDAQ National Market.

On February 4, 2000, Union Central completed the sale of all the guaranteed capital shares of the Company to Connecticut Reassurance Corporation, which subsequently changed its name to Manhattan Insurance Group, Inc., a group of four life and health insurance companies: the Company, Family Life Insurance Company ("FLIC"), Central United Life Insurance Company ("CULIC"), and Investors Consolidated Insurance Company ("Investors"). CULIC owned 51% of MIG, Northington/Connecticut Insurance Reinvestment, L.L.C. ("Northington") owned 47%, and the remaining 2% was owned by three other individuals.

In November 2001, the Company filed a plan to retire the guarantee capital shares and convert the Company to a stock insurer. The plan became effective on April 16, 2002, and the Company then became a stock insurer with eight shares of stock with a par value of $835,406 per share for a total capital of $6,683,248. On December 29, 2006, the Company acquired 100% of FLIC's outstanding shares from the Family Life Corporation.

During 2009, CULIC purchased the 49% of the issued and outstanding capital stocks of MIG that were owned by Northington (47%) and three other individuals (2%). MIG changed its state of incorporation from Connecticut to Texas on October 1, 2009.

In April 2013, CULIC acquired Western United Life Assurance Company ("WULA"), a Washington domiciled insurer, and effective February 25, 2014, Investors merged into WULA, with WULA being the surviving entity.

Effective May 1, 2017, CULIC changed its name to ManhattanLife Insurance and Annuity Company ("MAC"). On December 21, 2021, MAC redomesticated from the State of Arkansas to Texas.

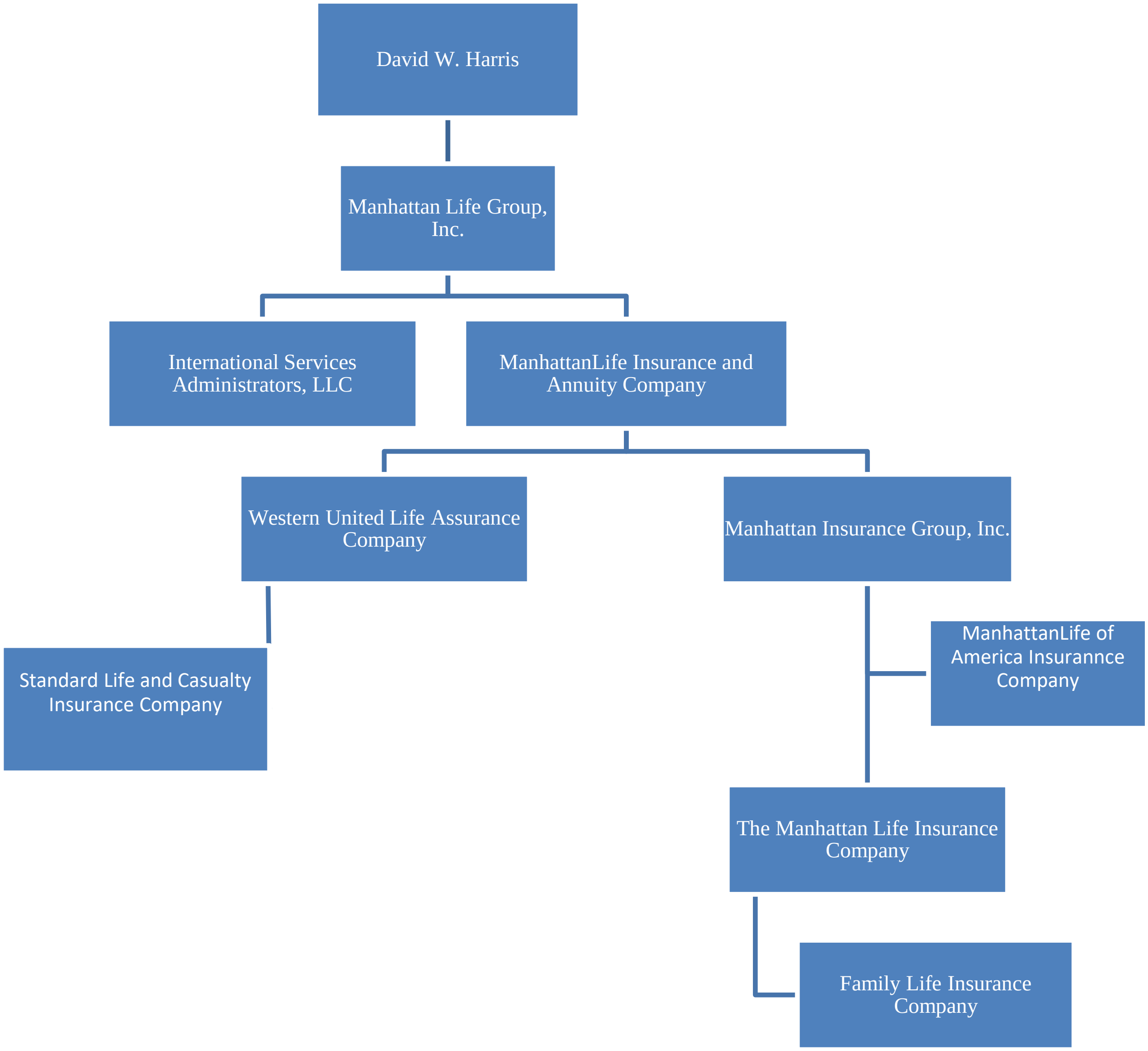
The Company paid cash dividends of $3,000,000 and $4,700,000 to MAC on July 29, 2022, and December 31, 2022, respectively.

B. Holding Company

The Company is a wholly owned subsidiary of MIG, a Texas privately held corporation, which is in turn a wholly owned subsidiary of MAC, a Texas life and accident and health company. MAC is in turn a wholly owned subsidiary of Manhattan Life Group, Inc. ("MLG"), a Texas corporation. MLG is ultimately owned by eleven individuals: David W. Harris (81.6%), Daniel George (5.1%), J. Tyler Harris (2.4%), Geneva Harris (2.4%), Samuel Harris (2.4%), David D. Harris (2.4%), John Powelson (1.0%), Zeidy Harris (1.0%), Kent Lamb (0.8%), John McGettigan (0.8%), and David Parsons (0.1%).

C. Organizational Chart

An organization chart reflecting the relationship between the Company and significant entities in its holding company system as of December 31, 2021, follows:



D. Service Agreements

The Company had two service agreements in effect with affiliates during the examination period.

Type of Agreement and Department File Number	Effective Date	Provider(s) of Services	Recipient of Services	Specific Services Covered	Expense* For Each Year of the Examination
Management Service Agreement File No. 26946	02/04/2000	CULIC	The Company	Administrative, accounting, financial management, marketing, claims, underwriting, investment management, legal, personnel and information technology services	2017 $(3,200,000)
Master Services Agreement File No. 56247 Replaced No. 26946	04/01/2018	MAC, FLIC, WULA	The Company	Record retention, administrative and facilities, personnel, marketing, claims, underwriting, insurance product development, legal, personnel and information technology services	2018 $(3,000,000) 2019 $(3,000,000) 2020 $(3,000,000) 2021 $(3,250,000)

* Amount of Expense Incurred by the Company

The Company participates in a federal income tax allocation agreement with its parent, MLG.

Section 91.4(a) of 11 NYCRR 91 (Insurance Regulation 33) states, in part:

"... (2) Each life insurer shall maintain records with sufficient detail to show fully:
(i) the system actually used for allocation of income and expenses;
(ii) the actual bases of allocation;
(iii) the actual monetary distribution of the respective items of income, salaries, wages, expenses, and taxes to ...
(d) companies ...
(3) Such records shall be classified and indexed in such form as to permit ready identification between the item allocated and the basis upon which it was allocated, and shall be maintained in such a manner as to be readily accessible for examination ..."

The method for the allocation of general expenses among affiliates cannot be substantiated as of December 31, 2021. Payroll expenses are allocated among each of its subsidiaries/affiliates using a time allocation survey to determine the percentage of time each employee works for a particular subsidiary/affiliate. According to the Master Services Agreement, the Company is required to conduct the time allocation survey on its employees on an annual basis (by September 30th of each year). However, it was noted that the time allocation survey used in the Company's December 31, 2021 intercompany expense allocation calculation was conducted in 2020. No time allocation survey was conducted in 2021 as required by the Master Services Agreement and there are no individual invoices to and from the various companies who participate in the agreement. The examiner could not determine whether the 2020 employee time allocation percentages were still accurate in 2021 since no time survey was performed as of year-end 2021. As a result, the examiner could not determine if the intercompany expense allocations are fair and reasonable as of December 31, 2021.

The Company violated Section 91.4(a) of 11 NYCRR 91 (Insurance Regulation 33) by failing to maintain records with sufficient detail to fully demonstrate the method used for the allocation of expenses and the actual basis of the allocation under the service agreement with its affiliates.

E. Management

The Company's by-laws provide that the board of directors shall be comprised of not less than seven directors. Directors are elected for a period of one year at the annual meeting of the stockholder. As of December 31, 2021, the board of directors consisted of nine members. Meetings of the board are held at least quarterly.

The nine board members and their principal business affiliations, as of December 31, 2021, were as follows:

Name and Residence	Principal Business Affiliation	Year First Elected
James M. Foster* Houston, TX	Owner Mitch Foster, DDS	2007

Name and Residence	Principal Business Affiliation	Year First Elected
Daniel J. George Houston, TX	President and Treasurer The Manhattan Life Insurance Company	2000
Daniel A. Hargraves* Irvington, NY	President and Attorney Hargraves, McConnell & Costigan	2003
Kent W. Lamb Cypress, TX	Senior Vice President and Chief Financial Officer The Manhattan Life Insurance Company	2007
Phillip A. Martin* Houston, TX	Owner Phillip Martin Architect	2006
John E. McGettigan Houston, TX	Executive Vice President, General Counsel, Chief Legal Officer and Secretary The Manhattan Life Insurance Company	2009
Teresa S. Moro Houston, TX	Senior Vice President The Manhattan Life Insurance Company	2013
Dale R. Oldham* Kansas City, MO	Independent Contractor Eisenach Reinsurance Services	2000

* Not affiliated with the Company or any other company in the holding company system

J. Tyler Harris was elected as a director on May 10, 2022, following the retirement of Daniel J. George. Geneva S. Harris was elected as a director on May 10, 2022.

The following is a listing of the principal officers of the Company as of December 31, 2021:

Name	Title
David W. Harris	Chairman of the Board and Chief Executive Officer
Daniel J. George	President and Treasurer
John E. McGettigan*	Executive Vice President, General Counsel, Chief Legal Officer and Secretary
Kent W. Lamb	Senior Vice President and Chief Financial Officer
Lee Ann Blakey	Senior Vice President and Chief of Staff
J. Tyler Harris	Senior Vice President and Chief Information Officer
Todd Z. Hayden	Senior Vice President and Chief Marketing Officer
Teresa S. Moro	Senior Vice President and Chief Investment Officer

Name	Title
David L. Parsons	Senior Vice President and Chief Technology Officer
William V. Bay Jr.	Senior Vice President, Information Technology Web Development
Ngoc-Bich T. Tran	Vice President, Internal Audit
Carolyn K. Pratt	Vice President, Controller
Geneva S. Harris	Vice President

On February 2, 2022, Robert LaPlant was elected as the Company's Chief Information Security Officer.

On May 10, 2022, J. Tyler Harris was promoted to President and Treasurer of the Company following the retirement of Daniel J. George. Daniel Robson was elected Senior Vice President and Chief Sales Officer and Marybel L. Huff was elected Senior Vice President and Chief of Operations and Keinya Trice was elected Vice President.

The examiner's review of the minutes of the meetings of the board of directors and its committees indicated that meetings were well attended, and that each director attended a majority of meetings.

4. TERRITORY AND PLAN OF OPERATIONS

The Company is authorized to write life insurance, annuities and accident and health insurance as defined in paragraphs 1, 2 and 3 of Section 1113(a) of the New York Insurance Law.

The Company is licensed to transact business in all 50 states, the District of Columbia and Puerto Rico. Policies are written on a non-participating basis.

The following tables show the percentage of direct premiums received, by state, and by major lines of business for the year 2021:

Life Insurance Premiums

Aggregate other alien*	30.0%
New York	13.4
California	11.9
Florida	10.1
New Jersey	4.6
Subtotal	70.0%
All others	30.0
Total	100.0%

Annuity Considerations

New York	71.5%
Florida	10.9
New Jersey	3.4
Puerto Rico	3.0
Subtotal	88.8%
All others	11.2
Total	100.0%

Accident and Health Insurance Premiums

Missouri	14.3%
Texas	10.8%
Pennsylvania	10.0%
Mississippi	7.4%
Georgia	6.4%
Subtotal	48.9%
All others	51.1%
Total	100.0%

* Life premiums were received from Latin American countries: Mexico (26.49%), Venezuela (22.3%), Peru (17.2%), Argentina (8.4%) and Ecuador (5.7%).

A. Statutory and Special Deposits

As of December 31, 2021, the Company had $2,000,000 (par value) of United States Treasury Bonds on deposit with the State of New York, its domiciliary state, for the benefit of all policyholders, claimants and creditors of the Company. An additional $971,055 reported in Schedule E of the 2021 filed annual statement was being held by the states of Arkansas, Georgia, Massachusetts, New Mexico and North Carolina.

B. Direct Operations

The Company markets universal life, whole life, and term life products to individuals, and to small and medium-size employer groups via worksite distribution and managing general agents. Annuities products are marketed to individuals in order to provide annuity retirement funds and with minimal new annuity considerations added to existing contracts. The Company also markets individual accident and health, and group disability income insurance. The Company ceased writing participating business in March 1998. All policies written prior to that date were participating. In July 2002, the Company began writing a non-participating simplified issue universal life policy.

In 2014, the Company began writing the Medicare supplement product that had been written by FLIC. In addition, the Company began writing the WULA fixed income annuity in the central and eastern areas of the United States.

The Company's international segment that began in 2003 by marketing universal life and term life products marketed primarily to upper-middle income individuals in Latin America was placed in run-off during 2015.

The Company's agency operations are conducted on a general agency basis and its products are distributed through independent brokers/agents.

C. Reinsurance

As of December 31, 2021, the Company had reinsurance treaties in effect with 17 companies, of which 14 were authorized or accredited. The Company's life business is reinsured on a coinsurance, modified-coinsurance, and yearly renewable term basis. Reinsurance is provided on an automatic and/or facultative basis.

The maximum retention limit for individual life contracts is $250,000. The total face amount of life insurance ceded as of December 31, 2021, was $744,279,038, which represents 55.6% of the total face amount of life insurance in force. Reserve credit taken for reinsurance ceded to unauthorized companies, totaling $12,442,737 was fully supported by letters of credit and trust agreements.

The total face amount of life insurance assumed as of December 31, 2021, was $179,246,729.

In 2018, the Company acquired four blocks of life and accident and health insurance business from Humana Insurance Company including $10,994,973 of policy reserves and assets. The business is 100% coinsurance and will be moved over time to assumption as states approve.

5. FINANCIAL STATEMENTS

The following statements show the assets, liabilities, capital and surplus as of December 31, 2021, as contained in the Company's 2021 filed annual statement, a condensed summary of operations and a reconciliation of the capital and surplus account for each of the years under review. The examiner's review of a sample of transactions did not reveal any differences which materially affected the Company's financial condition as presented in its financial statements contained in the December 31, 2021 filed annual statement.

A. Independent Accountants

The firm of EisnerAmper LLP was retained by the Company to audit the Company's combined statutory basis statements of financial position of the Company as of December 31 of each year in the examination period, and the related statutory-basis statements of operations, capital and surplus, and cash flows for the year then ended.

EisnerAmper LLP concluded that the statutory financial statements presented fairly, in all material respects, the financial position of the Company at the respective audit dates. Balances reported in these audited financial statements were reconciled to the corresponding years' annual statements with no discrepancies noted.

B. Net Admitted Assets

Bonds	$496,779,445
Stocks:	
Preferred stocks	15,599,628
Common stocks	28,702,980
Mortgage loans on real estate:	
First liens	38,809,597
Cash, cash equivalents and short-term investments	26,444,025
Contract loans	13,655,432
Other invested assets	124,577
Receivable for securities	58,670
Investment income due and accrued	4,444,616
Premiums and considerations:	
Uncollected premiums and agents' balances in the course of collection	913,655
Deferred premiums, agents' balances and installments booked but deferred and not yet due	1,363,680
Reinsurance:	

Amounts recoverable from reinsurers	117,919
Other amounts receivable under reinsurance contracts	6,195
Net deferred tax asset	4,048,956
Guaranty funds receivable or on deposit	296,387
Receivables from parent, subsidiaries and affiliates	592,654
Goodwill on acquired blocks of business	598,691
Total admitted assets	$632,557,107

C. Liabilities, Capital and Surplus

Aggregate reserve for life policies and contracts	$516,756,013
Aggregate reserve for accident and health contracts	5,360,651
Liability for deposit-type contracts	6,694,471
Contract claims:	
Life	2,417,005
Accident and health	3,158,455
Provision for policyholders' dividends and coupons payable in following calendar year – estimated amounts	
Dividends apportioned for payment	132,774
Dividends not yet apportioned	286,849
Premiums and annuity considerations for life and accident and health contracts received in advance	152,277
Contract liabilities not included elsewhere:	
Other amounts payable on reinsurance	397,679
Interest maintenance reserve	15,112,612
General expenses due or accrued	10,996
Current federal and foreign income taxes	948,016
Unearned investment income	69,185
Amounts withheld or retained by company as agent or trustee	(129,865)
Remittances and items not allocated	(3,277,370)
Miscellaneous liabilities:	
Asset valuation reserve	4,836,530
Payable to parent, subsidiaries and affiliates	2,013,513
Total liabilities	$554,939,791
Common capital stock	$ 6,683,248
Surplus notes	6,500,000
Gross paid in and contributed surplus	13,422,338
Unassigned funds (surplus)	51,011,730
Surplus	$ 70,934,068
Total capital and surplus	$ 77,617,316
Total liabilities, capital and surplus	$632,557,107

D. Condensed Summary of Operations

	2017	2018	2019	2020	2021
Premiums and considerations	$ 90,121,064	$ 79,800,512	$ 93,711,676	$144,495,364	$ 68,482,195
Investment income	24,441,186	26,071,828	27,102,143	24,367,540	26,367,927
Commissions and reserve adjustments on reinsurance ceded	46,942,580	47,699,685	43,146,188	35,697,052	26,508,154
Total income	$161,504,830	$153,572,025	$163,960,007	$204,559,956	$121,358,276
Benefit payments	$ 52,594,486	$ 57,444,765	$ 91,314,540	$111,968,251	$145,845,470
Increase in reserves	46,839,286	29,471,451	10,158,194	40,721,423	(69,766,867)
Commissions	36,819,585	37,839,524	34,074,062	27,045,188	21,946,212
General expenses and taxes	12,057,939	12,466,635	11,561,436	11,729,437	11,020,458
Increase in loading on deferred and uncollected premiums	(14,491)	(49,783)	(33,574)	32,520	(28,970)
Total deductions	$148,296,805	$137,172,592	$147,074,658	$191,496,819	$109,016,303
Net gain	$ 13,208,025	$ 16,399,433	$ 16,885,349	$ 13,063,137	$ 12,341,973
Dividends	408,253	483,064	467,764	408,660	334,936
Federal and foreign income taxes incurred	3,703,833	3,647,879	3,269,251	3,914,157	2,073,836
Net gain from operations before net realized capital gains	$ 9,095,939	$ 12,268,490	$ 13,148,334	$ 8,740,320	$ 9,933,201
Net realized capital gains (losses)	(535,005)	53,681	(101,090)	(587,307)	188,990
Net income	$ 8,560,934	$ 12,322,171	$ 13,047,244	$ 8,153,013	$ 10,122,191

E. Capital and Surplus Account

	2017	2018	2019	2020	2021
Capital and surplus, December 31, prior year	$51,076,687	$54,111,018	$59,045,642	$66,008,291	$68,221,238
Net income	$ 8,560,934	$12,322,171	$13,047,244	$ 8,153,013	$10,122,191
Change in net unrealized capital gains (losses)	(2,680,914)	(2,703,067)	(1,829,799)	(666,280)	37,355
Change in net deferred income tax	(1,193,256)	1,357,522	697,166	2,028,299	(285,500)
Change in non-admitted assets and related items	1,371,747	(904,697)	(671,536)	(3,561,542)	3,317,365
Change in reserve valuation basis	0	(775,000)	0	0	0
Change in asset valuation reserve	(349,180)	(687,305)	(605,426)	(240,543)	(795,333)
Change in surplus notes	0	0	0	(500,000)	0
Surplus adjustments:					
Change in surplus as a result of reinsurance	(675,000)	(675,000)	(675,000)	0	0
Dividends to stockholders	(2,000,000)	(3,000,000)	(3,000,000)	(3,000,000)	(3,000,000)
Net change in capital and surplus for the year	$ 3,034,331	$ 4,934,624	$ 6,962,649	$ 2,212,947	$ 9,396,078
Capital and surplus, December 31, current year	$54,111,018	$59,045,642	$66,008,291	$68,221,238	$77,617,316

6. PRIOR REPORT SUMMARY AND CONCLUSIONS

Following are the violation and comments contained in the prior report on examination and the subsequent actions taken by the Company in response to each citation:

Item	Description
A	The Company violated Section 1505(d)(3) of the New York Insurance Law by receiving services from FLIC and WULA on a regular and systematic basis without notifying the Superintendent in writing of its intention to enter into such transactions at least 30 days prior thereto. The review revealed that the Company filed and received approval for a new master services agreement.
B	The examiner reviewed the Company's reserves as of December 31, 2016, in accordance with 11 NYCRR 95 (Insurance Regulation 126). During the review, concerns were raised regarding the lack of conservatism in certain assumptions with respect to the Company's asset adequacy. The Company has agreed to refine the reserve analysis in a manner acceptable to the Department. As a result, the Company has established additional asset adequacy testing reserves in the amount of $775 thousand as of March 31, 2018. The review of the Company's reserves as of December 31, 2021 revealed that the Company made the necessary refinements to its asset adequacy testing as noted on the prior examination in a manner acceptable to the Department.
C	In addition, it was noted that the Company increased the Cost of Insurance ("COI") rates for a number of universal life policies without appropriate approval or justification in violation of Section 4232(b) of the New York Insurance Law. The Company was informed and agreed to remove the COI increase and refund the appropriate amount to policyholders. The Company estimated that 255 New York policyholders were affected, with a total restitution of approximately $170 thousand. The Department is in the process of verifying this amount. The Department continued to work with the Company to resolve this issue following the close of the examination as of December 31, 2016. The Department was ultimately satisfied with the amount of restitution and overall conclusions reached.

Item	Description
D	The examiner also reviewed the Company's pricing adequacy for various products subject to Section 4228(h) of the New York Insurance Law. The review included an examination of the required actuarial statements of self-support and the supporting demonstrations. During the review, concerns were raised regarding the overall process used to demonstrate self-support and the supportability of the current guarantees for several forms. The Department is continuing to review this issue with the Company. The review revealed that the Company updated its processes used to demonstrate self-support in a manner acceptable to the Department.

7. SUMMARY AND CONCLUSIONS

Following is the violation contained in this report:

Item	Description	Page No(s).
A	The Company violated Section 91.4(a) of 11 NYCRR 91 (Insurance Regulation 33) by failing to maintain records with sufficient detail to fully demonstrate the method used for the allocation of expenses and the actual basis of the allocation under the service agreement with its affiliates.	9

Respectfully submitted,

Thomas J. Allen, CFE
Examination Resources, LLC

EMILY LEONARD
Commission No. 809298
My Comm. Expires 03/05/2024

STATE OF IOWA)
) SS:
COUNTY OF POLK)

Thomas J. Allen, being duly sworn, deposes and says that the foregoing report, subscribed by him, is true to the best of his knowledge and belief.

Thomas J. Allen

Subscribed and sworn to before me

this 30 day of May 2023

Respectfully submitted,

_____________/s/___________
Anthony Mauro
Principal Insurance Examiner

STATE OF NEW YORK)
) SS:
COUNTY OF NEW YORK)

Anthony Mauro, being duly sworn, deposes and says that the foregoing report, subscribed by him, is true to the best of his knowledge and belief.

_____________/s/___________
Anthony Mauro

Subscribed and sworn to before me

this__________ day of ___________________

APPOINTMENT NO. 32421

NEW YORK STATE

DEPARTMENT OF FINANCIAL SERVICES

*I, **ADRIENNE A. HARRIS**, Superintendent of Financial Services of the State of New York, pursuant to the provisions of the Financial Services Law and the Insurance Law, do hereby appoint:*

THOMAS J. ALLEN
(EXAMINATION RESOURCES, LLC)

as a proper person to examine the affairs of the

THE MANHATTAN LIFE INSURANCE COMPANY

and to make a report to me in writing of the condition of said

COMPANY

with such other information as he shall deem requisite.

In Witness Whereof, I have hereunto subscribed my name
and affixed the official Seal of the Department
at the City of New York

this 30th day of June, 2022

ADRIENNE A. HARRIS
Superintendent of Financial Services

By:

MARK MCLEOD
DEPUTY CHIEF - LIFE BUREAU