



QUARTERLY STATEMENT

As of March 31, 2009
of the Condition and Affairs of the

NEW ENGLAND REINSURANCE CORPORATION

NAIC Group Code.....0091, 0091 (Current Period) (Prior Period)	NAIC Company Code..... 41629	Employer's ID Number..... 06-1053492
Organized under the Laws of Connecticut Incorporated/Organized..... December 29, 1981	State of Domicile or Port of Entry Connecticut Commenced Business..... April 2, 1982	Country of Domicile US
Statutory Home Office ONE HARTFORD PLAZA..... HARTFORD CT 06155 <i>(Street and Number) (City or Town, State and Zip Code)</i>		
Main Administrative Office 150 FEDERAL STREET..... BOSTON MA 02110 <i>(Street and Number) (City or Town, State and Zip Code)</i>		617-526-8500 <i>(Area Code) (Telephone Number)</i>
Mail Address 150 FEDERAL STREET..... BOSTON MA 02110 <i>(Street and Number or P. O. Box) (City or Town, State and Zip Code)</i>		
Primary Location of Books and Records ONE HARTFORD PLAZA..... HARTFORD CT 06155 <i>(Street and Number) (City or Town, State and Zip Code)</i>		860-547-5000 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address WWW.THEHARTFORD.COM		
Statutory Statement Contact LAWRENCE JOSEPH LIUZZO <i>(Name)</i> LARRY.LIUZZO@THEHARTFORD.COM <i>(E-Mail Address)</i>		617-526-7877 <i>(Area Code) (Telephone Number) (Extension)</i> 617-526-0607 <i>(Fax Number)</i>

OFFICERS

Name	Title	Name	Title
1. ANDREW PETER MANEVAL	PRESIDENT	2. DONALD CHRISTIAN HUNT	SECRETARY
3. JOHN NICHOLAS GIAMALIS	TREASURER	4. ROBERT MONTGOMERY THOMAS II	CHIEF ACTUARY
VICE PRESIDENTS			
JOHN NICHOLAS GIAMALIS	SENIOR VICE PRESIDENT	CHRISTOPHER JOHN HANLON	SENIOR VICE PRESIDENT
WILLIAM PATRICK MEANEY	SENIOR VICE PRESIDENT	JAMES CUBANSKI	VICE PRESIDENT
ROBERT HAROLD BATEMAN JR.	VICE PRESIDENT	RAYMOND JOSEPH GODIN	VICE PRESIDENT

DIRECTORS OR TRUSTEES

MICHAEL JOHN DURY	THOMAS SCOTT JOHNSTON	ANDREW PETER MANEVAL	WILLIAM PAUL TEICH
ROBERT HAROLD BATEMAN JR. #			

State of..... CONNECTICUT
County of..... HARTFORD ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions there from for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
ANDREW PETER MANEVAL	DONALD CHRISTIAN HUNT	JOHN NICHOLAS GIAMALIS
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
PRESIDENT	SECRETARY	TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This 31st day of March, 2009

Nicole Nerbonne - Notary, My Commission Expires July 31, 2011

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

Nicole Nerbonne
Notary Public, Connecticut
My Commission Expires July 31, 2011

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	127,490,073	0	127,490,073	125,915,051
2. Stocks:				
2.1 Preferred stocks.....	0	0	0	2,000,000
2.2 Common stocks.....	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$.....0 encumbrances).....	0	0	0	0
5. Cash (\$.....272), cash equivalents (\$.....0) and short-term investments (\$.....7,332,719).....	7,332,991	0	7,332,991	7,727,447
6. Contract loans (including \$.....0 premium notes).....	0	0	0	0
7. Other invested assets.....	0	0	0	0
8. Receivables for securities.....	0	0	0	328,348
9. Aggregate write-ins for invested assets.....	0	0	0	0
10. Subtotals, cash and invested assets (Lines 1 to 9).....	134,823,064	0	134,823,064	135,970,846
11. Title plants less \$.....0 charged off (for Title insurers only).....	0	0	0	0
12. Investment income due and accrued.....	1,368,476	0	1,368,476	1,619,603
13. Premiums and considerations:				
13.1 Uncollected premiums and agents' balances in the course of collection.....	0	0	0	0
13.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	0	0	0	0
13.3 Accrued retrospective premiums.....	0	0	0	0
14. Reinsurance:				
14.1 Amounts recoverable from reinsurers.....	0	0	0	0
14.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
14.3 Other amounts receivable under reinsurance contracts.....	0	0	0	0
15. Amounts receivable relating to uninsured plans.....	0	0	0	0
16.1 Current federal and foreign income tax recoverable and interest thereon.....	0	0	0	0
16.2 Net deferred tax asset.....	98,139	98,139	0	0
17. Guaranty funds receivable or on deposit.....	0	0	0	0
18. Electronic data processing equipment and software.....	0	0	0	0
19. Furniture and equipment, including health care delivery assets (\$.....0).....	0	0	0	0
20. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
21. Receivables from parent, subsidiaries and affiliates.....	0	0	0	0
22. Health care (\$.....0) and other amounts receivable.....	0	0	0	0
23. Aggregate write-ins for other than invested assets.....	0	0	0	0
24. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 10 through 23).....	136,289,679	98,139	136,191,540	137,590,449
25. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
26. Total (Lines 24 and 25).....	136,289,679	98,139	136,191,540	137,590,449

DETAILS OF WRITE-INS

0901.....	0	0	0	0
0902.....	0	0	0	0
0903.....	0	0	0	0
0998. Summary of remaining write-ins for Line 9 from overflow page.....	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	0	0	0	0
2301.....	0	0	0	0
2302.....	0	0	0	0
2303.....	0	0	0	0
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	0	0	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$.....0).....	7,097,080	7,419,682
2. Reinsurance payable on paid losses and loss adjustment expenses.....	0	0
3. Loss adjustment expenses.....	1,426,715	1,482,978
4. Commissions payable, contingent commissions and other similar charges.....	0	0
5. Other expenses (excluding taxes, licenses and fees).....	0	0
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	0	0
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	527,646	2,387,830
7.2 Net deferred tax liability.....	0	0
8. Borrowed money \$.....0 and interest thereon \$.....0.....	0	0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0).....	0	0
10. Advance premium.....	0	0
11. Dividends declared and unpaid:		
11.1 Stockholders.....	0	0
11.2 Policyholders.....	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions).....	0	0
13. Funds held by company under reinsurance treaties.....	0	0
14. Amounts withheld or retained by company for account of others.....	0	0
15. Remittances and items not allocated.....	0	328,348
16. Provision for reinsurance.....	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates.....	0	0
18. Drafts outstanding.....	0	0
19. Payable to parent, subsidiaries and affiliates.....	363,769	214,477
20. Payable for securities.....	0	0
21. Liability for amounts held under uninsured plans.....	0	0
22. Capital notes \$.....0 and interest thereon \$.....0.....	0	0
23. Aggregate write-ins for liabilities.....	0	0
24. Total liabilities excluding protected cell liabilities (Lines 1 through 23).....	9,415,210	11,833,315
25. Protected cell liabilities.....	0	0
26. Total liabilities (Lines 24 and 25).....	9,415,210	11,833,315
27. Aggregate write-ins for special surplus funds.....	0	0
28. Common capital stock.....	4,200,000	4,200,000
29. Preferred capital stock.....	0	0
30. Aggregate write-ins for other than special surplus funds.....	0	0
31. Surplus notes.....	0	0
32. Gross paid in and contributed surplus.....	360,692,627	360,692,627
33. Unassigned funds (surplus).....	(238,116,297)	(239,135,493)
34. Less treasury stock, at cost:		
34.1 .....0.000 shares common (value included in Line 28 \$.....0).....	0	0
34.2 .....0.000 shares preferred (value included in Line 29 \$.....0).....	0	0
35. Surplus as regards policyholders (Lines 27 to 33, less 34).....	126,776,329	125,757,134
36. Totals.....	136,191,540	137,590,449

DETAILS OF WRITE-INS

2301.	0	0
2302.	0	0
2303.	0	0
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	0	0
2701.	0	0
2702.	0	0
2703.	0	0
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above).....	0	0
3001.	0	0
3002.	0	0
3003.	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page.....	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	0	0

NEW ENGLAND REINSURANCE CORPORATION
STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.....0).....	0	0	0
1.2 Assumed..... (written \$.....163).....	163	47	217
1.3 Ceded..... (written \$.....0).....	0	0	0
1.4 Net..... (written \$.....163).....	163	47	217
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....0):			
2.1 Direct.....	0	0	0
2.2 Assumed.....	16,667	125,679	267,415
2.3 Ceded.....	0	0	0
2.4 Net.....	16,667	125,679	267,415
3. Loss adjustment expenses incurred.....	0	46,737	140,553
4. Other underwriting expenses incurred.....	1,172	767	3,096
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	17,839	173,182	411,064
7. Net income of protected cells.....	0	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(17,675)	(173,136)	(410,847)
INVESTMENT INCOME			
9. Net investment income earned.....	1,581,826	1,722,149	6,661,541
10. Net realized capital gains (losses) less capital gains tax of \$.....0.....	0	69,925	371,229
11. Net investment gain (loss) (Lines 9 + 10).....	1,581,826	1,792,075	7,032,770
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0	0	0
13. Finance and service charges not included in premiums.....	0	0	0
14. Aggregate write-ins for miscellaneous income.....	0	0	0
15. Total other income (Lines 12 through 14).....	0	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	1,564,150	1,618,939	6,621,923
17. Dividends to policyholders.....	0	0	0
18. Net income after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	1,564,150	1,618,939	6,621,923
19. Federal and foreign income taxes incurred.....	527,816	559,699	2,186,528
20. Net income (Line 18 minus Line 19) (to Line 22).....	1,036,334	1,059,240	4,435,395
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	125,757,134	121,321,739	121,321,739
22. Net income (from Line 20).....	1,036,334	1,059,240	4,435,395
23. Net transfers (to) from Protected Cell accounts.....	0	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....	(17,139)	0	0
25. Change in net unrealized foreign exchange capital gain (loss).....	0	0	0
26. Change in net deferred income tax.....	(19,637)	19,412	110,760
27. Change in nonadmitted assets.....	19,637	(19,412)	(110,760)
28. Change in provision for reinsurance.....	0	0	0
29. Change in surplus notes.....	0	0	0
30. Surplus (contributed to) withdrawn from protected cells.....	0	0	0
31. Cumulative effect of changes in accounting principles.....	0	0	0
32. Capital changes:			
32.1 Paid in.....	0	0	0
32.2 Transferred from surplus (Stock Dividend).....	0	0	0
32.3 Transferred to surplus.....	0	0	0
33. Surplus adjustments:			
33.1 Paid in.....	0	0	0
33.2 Transferred to capital (Stock Dividend).....	0	0	0
33.3 Transferred from capital.....	0	0	0
34. Net remittances from or (to) Home Office.....	0	0	0
35. Dividends to stockholders.....	0	0	0
36. Change in treasury stock.....	0	0	0
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	1,019,195	1,059,240	4,435,395
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	126,776,329	122,380,979	125,757,134
DETAILS OF WRITE-INS			
0501.	0	0	0
0502.	0	0	0
0503.	0	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401.	0	0	0
1402.	0	0	0
1403.	0	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0	0	0
3701.	0	0	0
3702.	0	0	0
3703.	0	0	0
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

CASH FLOW

	1 Current Year to Date	2 Prior Year Ended December 31
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	163	.217
2. Net investment income.....	1,912,547	6,786,748
3. Miscellaneous income.....	0	0
4. Total (Lines 1 through 3).....	1,912,711	6,786,964
5. Benefit and loss related payments.....	339,269	903,457
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions.....	57,435	257,702
8. Dividends paid to policyholders.....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	2,388,000	(1,043,637)
10. Total (Lines 5 through 9).....	2,784,704	117,522
11. Net cash from operations (Line 4 minus Line 10).....	(871,993)	6,669,442
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	328,245	39,289,738
12.2 Stocks.....	0	0
12.3 Mortgage loans.....	0	0
12.4 Real estate.....	0	0
12.5 Other invested assets.....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	0	(157,256)
12.7 Miscellaneous proceeds.....	328,348	116,692
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	656,593	39,249,174
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	0	48,481,505
13.2 Stocks.....	0	0
13.3 Mortgage loans.....	0	0
13.4 Real estate.....	0	0
13.5 Other invested assets.....	0	0
13.6 Miscellaneous applications.....	0	328,348
13.7 Total investments acquired (Lines 13.1 to 13.6).....	0	48,809,853
14. Net increase (decrease) in contract loans and premium notes.....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	656,593	(9,560,679)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0
16.3 Borrowed funds.....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	0	0
16.5 Dividends to stockholders.....	0	0
16.6 Other cash provided (applied).....	(179,056)	231,676
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(179,056)	231,676
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(394,456)	(2,659,560)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	7,727,447	10,387,007
19.2 End of period (Line 18 plus Line 19.1).....	7,332,991	7,727,447
Note: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0001	0	0

NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies

A. Accounting Practices

There were no differences between the Company's financial statements prepared according to the NAIC Accounting Practices and Procedures Manual or practices prescribed by the state of Connecticut which would require disclosure in the Notes to the Financial Statements.

Note 2 - Accounting Changes and Corrections of Errors

No significant change.

Note 3 - Business Combinations and Goodwill

No significant change.

Note 4 - Discontinued Operations

No significant change.

Note 5 - Investments

No significant change.

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

Note 7 - Investment Income

No significant change.

Note 8 - Derivative Instruments

No significant change.

Note 9 - Income Taxes

No significant change.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant change.

Note 11 - Debt

No significant change.

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

No significant change.

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

No significant change.

Note 14 - Contingencies

No significant change.

Note 15 - Leases

No significant change.

NOTES TO FINANCIAL STATEMENTS

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

No significant change.

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

C. NONE

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

No significant change.

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

No significant change.

Note 20 - Other Items

No significant change.

Note 21 - Events Subsequent

No significant change.

Note 22 - Reinsurance

No significant change.

Note 23 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

No significant change.

Note 24 - Change in Incurred Losses and Loss Adjustment Expenses

The provision for incurred losses and loss adjustment expenses (LAE) attributable to insured events of prior years for the Pool increased by \$1.7 million during 1Q2009 due mainly to reserve strengthening pursuant to the terms of the stop loss cession to Hartford Fire as disclosed in Note 20C (2) of the Annual Statement.

Each Company's participation in the above can be calculated using the percentages shown in Note 25 ("Intercompany Pooling Arrangement") of the Annual Statement.

Note 25 - Intercompany Pooling Arrangements

No significant change.

Note 26 - Structured Settlements

No significant change.

Note 27 - Health Care Receivables

No significant change.

Note 28 - Participating Policies

No significant change.

Note 29 - Premium Deficiency Reserves

No significant change.

NOTES TO FINANCIAL STATEMENTS

Note 30 - High Deductibles

No significant change.

Note 31 - Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

No significant change.

Note 32 - Asbestos/Environmental Reserves

No significant change.

Note 33 - Subscriber Savings Accounts

No significant change.

Note 34 - Multiple Peril Crop Insurance

No significant change.

NEW ENGLAND REINSURANCE CORPORATION GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3. Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No []
If yes, complete the Schedule Y-Part 1 - Organizational chart.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.

- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2007.....
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2007.....
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 12/10/2008.....

- 6.4 By what department or departments?
Connecticut

- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

- 7.2 If yes, give full information:

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

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

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

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC

- 9.1 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? Yes [X] No []
 - (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - (c) Compliance with applicable governmental laws, rules and regulations;
 - (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - (e) Accountability for adherence to the code.

- 9.11 If the response to 9.1 is No, please explain:

- 9.2 Has the code of ethics for senior managers been amended? Yes [] No [X]

- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]

NEW ENGLAND REINSURANCE CORPORATION GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted)

PART 1 - COMMON INTERROGATORIES

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

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

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$.....0

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$.....0

13. Amount of real estate and mortgages held in short-term investments: \$.....0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds.....	\$0	\$0
14.22 Preferred Stock.....	\$0	\$0
14.23 Common Stock.....	\$0	\$0
14.24 Short-Term Investments.....	\$0	\$0
14.25 Mortgage Loans on Real Estate.....	\$0	\$0
14.26 All Other.....	\$0	\$0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above.....	\$0	\$0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]

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

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

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

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase Bank, N. A.	4 New York Plaza, 15th Floor, New York, NY 10004

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

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

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? Yes [] No [X]

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

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

16.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address

17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [X] No []

17.2 If no, list exceptions:

**NEW ENGLAND REINSURANCE CORPORATION
GENERAL INTERROGATORIES (continued)**

PART 2

PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [] No [X] N/A []
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [] No [X]
If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [] No [X]

3.2 If yes, give full and complete information thereto:

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation liabilities tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero? Yes [] No [X]

4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximum Interest	3 Disc. Rate	Total Discount				Discount Taken During Period				
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total	
	.....0.0	.....0.000 %	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
Total.....	.....XXX...	.....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Name of Reinsurer	4 Location	5 Is Insurer Authorized? (YES or NO)
------------------------------	------------------------------	------------------------	---------------	---

NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year to Date	3 Prior Year to Date	4 Current Year to Date	5 Prior Year to Date	6 Current Year to Date	7 Prior Year to Date
1. Alabama.....AL	N	0	0	0	0	0	0
2. Alaska.....AK	N	0	0	0	0	0	0
3. Arizona.....AZ	L	0	0	0	0	0	0
4. Arkansas.....AR	L	0	0	0	0	0	0
5. California.....CA	L	0	0	0	0	0	0
6. Colorado.....CO	N	0	0	0	0	0	0
7. Connecticut.....CT	L	0	0	0	0	0	0
8. Delaware.....DE	Q	0	0	0	0	0	0
9. District of Columbia.....DC	L	0	0	0	0	0	0
10. Florida.....FL	Q	0	0	0	0	0	0
11. Georgia.....GA	L	0	0	0	0	0	0
12. Hawaii.....HI	N	0	0	0	0	0	0
13. Idaho.....ID	L	0	0	0	0	0	0
14. Illinois.....IL	L	0	0	0	0	0	0
15. Indiana.....IN	L	0	0	0	0	0	0
16. Iowa.....IA	L	0	0	0	0	0	0
17. Kansas.....KS	L	0	0	0	0	0	0
18. Kentucky.....KY	N	0	0	0	0	0	0
19. Louisiana.....LA	L	0	0	0	0	0	0
20. Maine.....ME	N	0	0	0	0	0	0
21. Maryland.....MD	Q	0	0	0	0	0	0
22. Massachusetts.....MA	Q	0	0	0	0	0	0
23. Michigan.....MI	L	0	0	0	0	0	0
24. Minnesota.....MN	N	0	0	0	0	0	0
25. Mississippi.....MS	L	0	0	0	0	0	0
26. Missouri.....MO	L	0	0	0	0	0	0
27. Montana.....MT	N	0	0	0	0	0	0
28. Nebraska.....NE	N	0	0	0	0	0	0
29. Nevada.....NV	L	0	0	0	0	0	0
30. New Hampshire.....NH	L	0	0	0	0	0	0
31. New Jersey.....NJ	L	0	0	0	0	0	0
32. New Mexico.....NM	N	0	0	0	0	0	0
33. New York.....NY	Q	0	0	0	0	0	0
34. North Carolina.....NC	N	0	0	0	0	0	0
35. North Dakota.....ND	N	0	0	0	0	0	0
36. Ohio.....OH	L	0	0	0	0	0	0
37. Oklahoma.....OK	L	0	0	0	0	0	0
38. Oregon.....OR	L	0	0	0	0	0	0
39. Pennsylvania.....PA	Q	0	0	0	0	0	0
40. Rhode Island.....RI	L	0	0	0	0	0	0
41. South Carolina.....SC	Q	0	0	0	0	0	0
42. South Dakota.....SD	N	0	0	0	0	0	0
43. Tennessee.....TN	N	0	0	0	0	0	0
44. Texas.....TX	L	0	0	0	0	0	0
45. Utah.....UT	L	0	0	0	0	0	0
46. Vermont.....VT	Q	0	0	0	0	0	0
47. Virginia.....VA	N	0	0	0	0	0	0
48. Washington.....WA	N	0	0	0	0	0	0
49. West Virginia.....WV	N	0	0	0	0	0	0
50. Wisconsin.....WI	N	0	0	0	0	0	0
51. Wyoming.....WY	N	0	0	0	0	0	0
52. American Samoa.....AS	N	0	0	0	0	0	0
53. Guam.....GU	N	0	0	0	0	0	0
54. Puerto Rico.....PR	N	0	0	0	0	0	0
55. US Virgin Islands.....VI	N	0	0	0	0	0	0
56. Northern Mariana Islands.....MP	N	0	0	0	0	0	0
57. Canada.....CN	N	0	0	0	0	0	0
58. Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0
59. Totals.....	(a).....24	0	0	0	0	0	0

DETAILS OF WRITE-INS

5801.	XXX	0	0	0	0	0	0
5802.	XXX	0	0	0	0	0	0
5803.	XXX	0	0	0	0	0	0
5898. Summary of remaining write-ins for Line 58 from overflow page.....	XXX	0	0	0	0	0	0
5899. Totals (Lines 5801 thru 5803 + Line 5898) (Line 58 above).....	XXX	0	0	0	0	0	0

(a) Insert the number of L responses except for Canada and Other Alien.

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

NORTH AMERICAN PROPERTY/CASUALTY OPERATIONS

*Hartford Fire Insurance Company 06-0383750/NAIC #19682/CT
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)

*Hartford Underwriters Insurance Company 06-1222527 /NAIC #30104/CT

*Twin City Fire Insurance Company 06-0732738/NAIC #29459/IN

*Hartford Insurance Company of Illinois 06-1010609/NAIC #38288/IL

*Hartford Lloyd's Insurance Company 06-1007031/NAIC #38253/TX
Four Thirty Seven Land Company, Inc. 13-2852356/DE (37.5% owned)

*Hartford Accident and Indemnity Company 06-0383030/NAIC #22357/CT
*Hartford Casualty Insurance Company 06-0294398/NAIC #29424/IN
Four Thirty Seven Land Company, Inc. 13-2852356/DE (62.5% owned)

Specialty Risk Services, LLC 20-0730592/DE

HARCO Property Services, Inc. 06-1107677/CT
HRA, Inc. 06-1185090/CT
HRA Brokerage Services, Inc. 06-1126749/CT

Access CoverageCorp., Inc. 56-2160819/NC

*Nutmeg Insurance Company 06-1032405/NAIC #39608/CT
(100% of common stock owned by Hartford Holdings, Inc. 22-3866674/DE)

*Hartford Financial Products International Limited (United Kingdom)
Hartford Management, Ltd. (Bermuda)
*Hartford Insurance Ltd. (Bermuda)

HartRe Group, LLC 06-1032405/CT
*Fencourt Reinsurance Company, Ltd. 06-1323788 (Bermuda)

Trumbull Services, LLC 02-0665394/CT
Hartford Residual Market, LLC 74-3112496/CT
Trumbull Flood Management, LLC 88-0517612/CT

*Hartford Insurance Company of the Midwest 06-1008026/NAIC #37478/IN
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)

*Hartford Insurance Company of the Southeast 06-1013048/NAIC #38261/CT
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)

*Trumbull Insurance Company 06-1184984/NAIC #27120/CT
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)
Hartford Technology Services Company, LLC 06-1552692/DE
Horizon Management Group, LLC 06-1526449/DE

*Property and Casualty Insurance Company of Hartford 06-1276326/NAIC #34690/IN
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)

*Pacific Insurance Company, Limited 06-1401918/NAIC #10046/CT
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)

*Sentinel Insurance Company, Ltd. 06-1552103/NAIC #11000/CT
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)

*denotes an insurance company

LIFE OPERATIONS

*Champlain Life Reinsurance Company 32-0181180/VT
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)

Hartford Holdings, Inc. 22-3866674/DE
(100% of common stock owned by The Hartford Financial Services Group, Inc. 13-3317783/DE)

Hartford Life, Inc. 06-1470915/DE

*Hartford Life Insurance, KK (Japan)

*Hartford Life and Accident Insurance Company 06-0838648/NAIC #70815/CT

*American Maturity Life Insurance Company 06-1422508 /NAIC #81213/CT

*Hartford Life Insurance Company 06-0974148/NAIC #88072/CT
*Hartford International Life Reassurance Corporation 06-1207332/NAIC #93505/CT

*Hartford Life and Annuity Insurance Company 39-1052598/NAIC #71153/CT
*Hartford Life, Ltd. 27-0008332 (Bermuda)

Hartford Hedge Fund Company, LLC 06-1597414/DE

Woodbury Financial Services, Inc. 41-0944586/MN (2)

Hartford Financial Services, LLC 52-2137766/DE (2)
HL Investment Advisors, LLC 06-1534085/CT
Hartford Investment Financial Services, LLC 06-1629808/DE
Hartford Investments Canada Corp. 99-0219177 (Canada)
Hartford-Comprehensive Employee Benefit Service Company 06-1120503/CT
Hartford Retirement Services, LLC 26-1589907/DE
Hartford Equity Sales Company, Inc. 06-0896599/CT
Hartford Securities Distribution Company, Inc. 06-1408044/CT
Hartford Advantage Investment, Ltd. (Bermuda)
Trumbull Securities, LLC 80-0199328/DE

Hartford Life International, Ltd. 06-1293360/CT (2)
*Hartford Life Limited (Ireland)
*Icatu Hartford Seguros S.A., (50% owned) (Brazil) (1)
Icatu Hartford Capitalizacao S.A. (Brazil)
The Hartford International Asset Management Company Limited (Ireland)

Hartford Life Private Placement, LLC 01-0573691/DE

Hartford Administrative Services Company 41-0679409/MN

Planco, LLC 20-3944101 /DE

Planco Financial Services, LLC 20-3944031/DE

(1) Hartford Life International Ltd. has 50% voting rights.
(2) On March 31, 2009, Hartford Life and Accident Insurance Company contributed to Hartford Life Insurance Company the ownership interest of Woodbury Financial Services, Inc., Hartford Financial Services, LLC and Hartford Life International, Ltd.

OTHER OPERATIONS OWNED BY THE HARTFORD FINANCIAL SERVICES GROUP, INC.

Hartford Holdings, Inc. 22-3866674/DE

The Hartford Investment Management Company 06-1472135/DE

Hartford Strategic Investments, LLC 20-5814558/DE

Heritage Holdings, Inc. 06-1442285/CT
*First State Insurance Company 04-2198460 /NAIC #21822/CT
*New England Insurance Company 04-2177185 /NAIC #21830/CT
*New England Reinsurance Corporation 06-1053492 /NAIC #41629/CT
*Heritage Reinsurance Company, Ltd. 98-0188675 (Bermuda)
*Excess Insurance Company, Limited (United Kingdom)

*New Ocean Insurance Co., Ltd. 98-0188674 (Bermuda)

**NEW ENGLAND REINSURANCE CORPORATION
PART 1 - LOSS EXPERIENCE**

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....	0	0	0.0	0.0
2. Allied lines.....	0	0	0.0	0.0
3. Farmowners multiple peril.....	0	0	0.0	0.0
4. Homeowners multiple peril.....	0	0	0.0	0.0
5. Commercial multiple peril.....	0	0	0.0	0.0
6. Mortgage guaranty.....	0	0	0.0	0.0
8. Ocean marine.....	0	0	0.0	0.0
9. Inland marine.....	0	0	0.0	0.0
10. Financial guaranty.....	0	0	0.0	0.0
11.1. Medical professional liability - occurrence.....	0	0	0.0	0.0
11.2. Medical professional liability - claims made.....	0	0	0.0	0.0
12. Earthquake.....	0	0	0.0	0.0
13. Group accident and health.....	0	0	0.0	0.0
14. Credit accident and health.....	0	0	0.0	0.0
15. Other accident and health.....	0	0	0.0	0.0
16. Workers' compensation.....	0	0	0.0	0.0
17.1. Other liability-occurrence.....	0	0	0.0	0.0
17.2. Other liability-claims made.....	0	0	0.0	0.0
18.1. Products liability-occurrence.....	0	0	0.0	0.0
18.2. Products liability-claims made.....	0	0	0.0	0.0
19.1, 19.2 Private passenger auto liability.....	0	0	0.0	0.0
19.3, 19.4 Commercial auto liability.....	0	0	0.0	0.0
21. Auto physical damage.....	0	0	0.0	0.0
22. Aircraft (all perils).....	0	0	0.0	0.0
23. Fidelity.....	0	0	0.0	0.0
24. Surety.....	0	0	0.0	0.0
26. Burglary and theft.....	0	0	0.0	0.0
27. Boiler and machinery.....	0	0	0.0	0.0
28. Credit.....	0	0	0.0	0.0
29. International.....	0	0	0.0	0.0
30. Warranty.....	0	0	0.0	0.0
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0.0	0.0
35. Totals.....	0	0	0.0	0.0
DETAILS OF WRITE-INS				
3401.	0	0	0.0	0.0
3402.	0	0	0.0	0.0
3403.	0	0	0.0	0.0
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.0	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.0	0.0

NONE

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1	2	3
	Current Quarter	Current Year to Date	Prior Year Year to Date
1. Fire.....	0	0	0
2. Allied lines.....	0	0	0
3. Farmowners multiple peril.....	0	0	0
4. Homeowners multiple peril.....	0	0	0
5. Commercial multiple peril.....	0	0	0
6. Mortgage guaranty.....	0	0	0
8. Ocean marine.....	0	0	0
9. Inland marine.....	0	0	0
10. Financial guaranty.....	0	0	0
11.1. Medical professional liability - occurrence.....	0	0	0
11.2. Medical professional liability - claims made.....	0	0	0
12. Earthquake.....	0	0	0
13. Group accident and health.....	0	0	0
14. Credit accident and health.....	0	0	0
15. Other accident and health.....	0	0	0
16. Workers' compensation.....	0	0	0
17.1. Other liability-occurrence.....	0	0	0
17.2. Other liability-claims made.....	0	0	0
18.1. Products liability-occurrence.....	0	0	0
18.2. Products liability-claims made.....	0	0	0
19.1, 19.2 Private passenger auto liability.....	0	0	0
19.3, 19.4 Commercial auto liability.....	0	0	0
21. Auto physical damage.....	0	0	0
22. Aircraft (all perils).....	0	0	0
23. Fidelity.....	0	0	0
24. Surety.....	0	0	0
26. Burglary and theft.....	0	0	0
27. Boiler and machinery.....	0	0	0
28. Credit.....	0	0	0
29. International.....	0	0	0
30. Warranty.....	0	0	0
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	0	0	0
35. Totals.....	0	0	0
DETAILS OF WRITE-INS			
3401.	0	0	0
3402.	0	0	0
3403.	0	0	0
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

NONE

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2009 Loss and LAE Payments on Claims Reported as of Prior Year-End	2009 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2009 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/Deficiency (Cols. 11 + 12)
1. 2006 + Prior.....	4,214	4,689	8,903	369	26	395	3,408	742	4,373	8,524	(436)	452	16
2. 2007.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Subtotals 2007 + Prior.....	4,214	4,689	8,903	369	26	395	3,408	742	4,373	8,524	(436)	452	16
4. 2008.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Subtotals 2008 + Prior.....	4,214	4,689	8,903	369	26	395	3,408	742	4,373	8,524	(436)	452	16
6. 2009.....	XXX	XXX	XXX	XXX	0	0	XXX	0	0	0	XXX	XXX	XXX
7. Totals.....	4,214	4,689	8,903	369	26	395	3,408	742	4,373	8,524	(436)	452	16
8. Prior Year-End's Surplus As Regards Policyholders	125,757												
											Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. ....(10.4)%	2. ....9.6 %	3. ....0.2 %
													Col. 13, Line 7 Line 8
													4. ....0.0 %

Q13

NEW ENGLAND REINSURANCE CORPORATION SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	<hr style="width: 100%;"/> NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	<hr style="width: 100%;"/> NO
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	<hr style="width: 100%;"/> NO

Explanation:

- 1.
- 2.
- 3.

Bar Code:



NONE

**NEW ENGLAND REINSURANCE CORPORATION
SCHEDULE A - VERIFICATION**

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Current year change in encumbrances.....	0	0
4. Total gain (loss) on disposals.....	0	0
5. Deduct amounts received on disposals.....	0	0
6. Total foreign exchange change in book/adjusted carrying value.....	0	0
7. Deduct current year's other than temporary impairment recognized.....	0	0
8. Deduct current year's depreciation.....	0	0
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....	0	0
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase (decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium and mortgage interest points and commitment fees.....	0	0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....	0	0
10. Deduct current year's other than temporary impairment recognized.....	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....	0	0
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....	0	0
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase (decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium and depreciation.....	0	0
9. Total foreign exchange change in book/adjusted carrying value.....	0	0
10. Deduct current year's other than temporary impairment recognized.....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Deduct total nonadmitted amounts.....	0	0
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	127,915,051	118,114,726
2. Cost of bonds and stocks acquired.....	0	48,481,505
3. Accrual of discount.....	16,752	91,002
4. Unrealized valuation increase (decrease).....	(17,139)	0
5. Total gain (loss) on disposals.....	0	937,526
6. Deduct consideration for bonds and stocks disposed of.....	328,245	39,289,738
7. Deduct amortization of premium.....	96,346	266,397
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	153,573
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	127,490,073	127,915,051
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	127,490,073	127,915,051

SCHEDULE D - PART 1B

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

QS102

	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1 (a).....	128,082,416	771,069	1,493,052	1,686,800	129,047,233	0	0	128,082,416
2. Class 2 (a).....	5,559,092	0	0	198,547	5,757,639	0	0	5,559,092
3. Class 3 (a).....	0	0	0	17,920	17,920	0	0	0
4. Class 4 (a).....	0	0	0	0	0	0	0	0
5. Class 5 (a).....	0	0	0	0	0	0	0	0
6. Class 6 (a).....	0	0	0	0	0	0	0	0
7. Total Bonds.....	133,641,508	771,069	1,493,052	1,903,267	134,822,792	0	0	133,641,508
PREFERRED STOCK								
8. Class 1.....	0	0	0	0	0	0	0	0
9. Class 2.....	2,000,000	0	0	(2,000,000)	0	0	0	2,000,000
10. Class 3.....	0	0	0	0	0	0	0	0
11. Class 4.....	0	0	0	0	0	0	0	0
12. Class 5.....	0	0	0	0	0	0	0	0
13. Class 6.....	0	0	0	0	0	0	0	0
14. Total Preferred Stock.....	2,000,000	0	0	(2,000,000)	0	0	0	2,000,000
15. Total Bonds and Preferred Stock.....	135,641,508	771,069	1,493,052	(96,733)	134,822,792	0	0	135,641,508

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals.....	7,332,719	XXX	7,332,719	16,300	0

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	7,726,457	10,386,693
2. Cost of short-term investments acquired.....	771,069	23,122,730
3. Accrual of discount.....	0	0
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	0	0
6. Deduct consideration received on disposals.....	1,164,807	25,782,966
7. Deduct amortization of premium.....	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	7,332,719	7,726,457
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	7,332,719	7,726,457

**Sch. DB-Part F-Section 1
NONE**

**Sch. DB-Part F-Section 2
NONE**

**Sch. E-Verification
NONE**

**Sch. A-Part 2
NONE**

**Sch. A-Part 3
NONE**

**Sch. B-Part 2
NONE**

**Sch. B-Part 3
NONE**

**Sch. BA-Part 2
NONE**

**Sch. BA-Part 3
NONE**

**Sch. D-Part 3
NONE**

SCHEDULE D - PART 4

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

1 CUSIP Identification	2 Description	3 F o r e i g n	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value At Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Maturity Date	22 NAIC Design- ation or Market Indicator (a)
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amortization)/ Accretion	13 Current Year's Other Than Temporary Impairment Recognized	14 Total Change in B./A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B./A.C.V.							
Bonds - U.S. Government																					
36213F 2M 4	GNMA 30YR.....	...	.03/01/2009	SCHEDULED REDEMPTION..		.....51,830	.....51,830	.....54,049	.....55,776	.....0	.....(3,946)	.....0	.....(3,946)	.....0	.....51,830	.....0	.....0	.....0	.....709	04/01/2032	1.....
03999999	Total - Bonds - U.S. Government.....					.....51,830	.....51,830	.....54,049	.....55,776	.....0	.....(3,946)	.....0	.....(3,946)	.....0	.....51,830	.....0	.....0	.....0	.....709	....XXX.....	..XXX...
Bonds - U.S. Special Revenue and Special Assessment																					
31386P Z9 7	FNMA 30YR.....	...	.03/01/2009	SCHEDULED REDEMPTION..		.....2,845	.....2,845	.....2,869	.....2,918	.....0	.....(73)	.....0	.....(73)	.....0	.....2,845	.....0	.....0	.....0	.....32	05/01/2032	1.....
31999999	Total - Bonds - U.S. Special Revenue & Assessment.....					.....2,845	.....2,845	.....2,869	.....2,918	.....0	.....(73)	.....0	.....(73)	.....0	.....2,845	.....0	.....0	.....0	.....32	....XXX.....	..XXX...
Bonds - Industrial and Miscellaneous																					
617059 JH 4	JPMC_00-C10.....	...	.03/01/2009	SCHEDULED REDEMPTION..		.....124,370	.....124,370	.....134,038	.....125,645	.....0	.....(1,275)	.....0	.....(1,275)	.....0	.....124,370	.....0	.....0	.....0	.....2,093	08/01/2032	1FE.....
61746W G8 7	MSC_03-T11.....	...	.03/01/2009	SCHEDULED REDEMPTION..		.....149,200	.....149,200	.....146,344	.....148,430	.....0	.....770	.....0	.....770	.....0	.....149,200	.....0	.....0	.....0	.....1,451	06/01/2041	1FE.....
38999999	Total - Bonds - Industrial & Miscellaneous.....					.....273,570	.....273,570	.....280,382	.....274,075	.....0	.....(505)	.....0	.....(505)	.....0	.....273,570	.....0	.....0	.....0	.....3,544	....XXX.....	..XXX...
83999997	Total - Bonds - Part 4.....					.....328,245	.....328,245	.....337,300	.....332,768	.....0	.....(4,523)	.....0	.....(4,523)	.....0	.....328,245	.....0	.....0	.....0	.....4,285	....XXX.....	..XXX...
83999999	Total - Bonds.....					.....328,245	.....328,245	.....337,300	.....332,768	.....0	.....(4,523)	.....0	.....(4,523)	.....0	.....328,245	.....0	.....0	.....0	.....4,285	....XXX.....	..XXX...
99999999	Total - Bonds, Preferred and Common Stocks.....					.....328,245	.....XXX.....	.....337,300	.....332,768	.....0	.....(4,523)	.....0	.....(4,523)	.....0	.....328,245	.....0	.....0	.....0	.....4,285	....XXX.....	..XXX...

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

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**Sch. DB-Part A-Section 1
NONE**

**Sch. DB-Part B-Section 1
NONE**

**Sch. DB-Part C-Section 1
NONE**

**Sch. DB-Part D-Section 1
NONE**

NEW ENGLAND REINSURANCE CORPORATION
SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Open Depositories								
JP Morgan Chase Bank..... New York, NY.....		.....0.000	.....0	.....0	.....621	.....10	.....272	XXX
0199999. Total Open Depositories.....	.....XXX	.....XXX	.....0	.....0	.....621	.....10	.....272	XXX
0399999. Total Cash on Deposit.....	.....XXX	.....XXX	.....0	.....0	.....621	.....10	.....272	XXX
0599999. Total Cash.....	.....XXX	.....XXX	.....0	.....0	.....621	.....10	.....272	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
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NONE

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