AIG Israel Insurance Company Ltd

Interim Financial Report

(Unaudited)

As of June 30, 2022

Contents

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Directors' report AIG Israel Insurance Company Ltd ("the Company") for the period ended June 30, 2022

The directors' report on the business of the Company as of June 30, 2022 ("**the directors' report**"), reviews the Company and developments in its business in the first half of 2022 ("**the reported period**"). The information in this report is as of June 30, 2022 ("**the date of report**") unless otherwise is indicated explicitly.

The Company is an "insurer" as this term is defined in the Supervision of Financial Services Law (Insurance), 1981 "**the Supervision Law**"). Therefore, this report is prepared in accordance with the provisions of the Reports to the Public chapter of the Regulation Codex published by the Commissioner of the Capital Markets, Insurance and Savings Authority in the Israel Ministry of Finance ("the **Commissioner of Insurance**", "**the Commissioner**" and "**the Authority**", respectively). This directors' report was prepared assuming that the user is also holding the Company's 2021 periodic report.

The financial information in this report is in reported amounts. All financial information is in thousand NIS unless otherwise is indicated.

The business of the Company is in fields that require considerable professional knowhow that involves many professional terms that are essential for understanding the business of the Company. To present a description of the corporation that is as clear as possible, those professional terms are used along with an explanation, to the extent possible.

This directors' report is an integral part of the interim financial statements, including all its parts and should be read as one unit.

Forward looking information

This chapter in the periodic report, describing the Company, the development of its business and its fields of operations may contain forward-looking information, as this term is defined in the Israel Securities Law, 1968 ("the Securities Law"). Forward looking information is uncertain information about the future, based on the information available to the Company on report date and includes the subjective assessment of management based on assumptions and estimates of the Company and/or its intentions as of the date of this report. Providing such information is not a commitment for accuracy or completeness, and actual activity and/or results of the Company may be different than those presented in the forward-looking information presented in this report. It is possible in certain cases to detect passages that contain forward looking information by the use of words such as: "the Company assesses", "the Company believes", "it is the intention of the Company", etc., but it is possible to see such information presented using other language or it may be specifically indicated that as a forward-looking information.



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1. Condensed description of the Company:

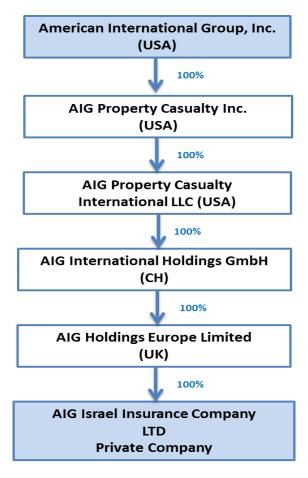
1.1 Organizational structure

AIG Israel Insurance Company Ltd ("**the Company**") was incorporated in Israel on March 27, 1996, as a private limited liability company. The Company began its insurance activity in May 1997. The company does not hold any subsidiaries or related companies. The Company has no activity outside of Israel through branches and associates.

The ultimate parent of the Company is American International Group Inc. (hereinafter: "**the global AIG corporation**", "**AIG**"). The global AIG Corporation is a leading global insurance and financial services corporation, rated BBB+ according to Standard & Poor's (S&P).

The sole shareholder of the Company is AIG Holdings Europe Limited ("AHEL"), which holds the entire issued share capital of the Company and which is a company in the global AIG corporation.

The following is the undated holding structure of the Company:





The Company was granted licenses by the Commissioner to practice as an insurer in general insurance and life insurance as follows: motor vehicle insurance, compulsory motor vehicle insurance, comprehensive home insurance, health insurance (personal injury, serious illness, and travel insurance), commercial insurance (property loss, business comprehensive insurance, engineering insurance, employers' liability insurance, third-party liability insurance and product liability insurance), cargo in transit insurance, other risk insurance (limited to crime and fraud damages), comprehensive life insurance, and foreign business insurance for different insurance types.

The Company is operating in three business divisions (vehicle and home insurance, life and health insurance and commercial insurance), headquarters, and private customers division.

The Company is marketing and selling retail insurance policies directly to customers (without insurance agents) through call centers and digitally. Customers are being serviced mainly through a central service call center. Most business of the Company in commercial insurance, and some of the retail insurance business, is done through mediation of insurance agents. As a result of the above marketing methods, the organizational structure of the Company is based on activity through a head office in Petach Tikva.

1.2 Areas of activity

The Company mostly provides coverage to individual customers. The main business areas of the Company are as follows:

General insurance: property vehicle insurance
 General insurance: compulsory vehicle insurance

• General insurance: home insurance

General insurance: commercial insuranceHealth insurance: health insurance

• Life insurance: Life insurance, risk only

1.3 Extraordinary and material events in the reported period and after the reporting date

The Coronavirus Event

In 2020-2021, a vast spreading of the coronavirus took place in Israel and worldwide (hereinafter: "the Coronavirus Event"), which had severe implications on the local and global economy. For additional information on the effects of the Coronavirus Event in 2020 and 2021 and the related actions taken by the Company, see Section 1 of the Board of Directors' Report attached to the periodic report for 2020 and section 1 of the Board of Directors' Report attached to the periodic report for 2021.

In the first half of 2022, morbidity rates somewhat increased but had a limited impact as the number of severe cases remained constant.

As of the date of publication of the report, activity in the Israeli economy has almost fully resumed, with no restrictions.

For additional information on the impact of the coronavirus, see section 2 below.



2. <u>Description of business environment:</u>

General

In accordance with data published by the Authority, there are more than 15 Israeli insurance companies currently active in Israel; most of these companies are engaged in general insurance. In accordance with these data, as of 2021, insurance fees from the general insurance business amounted to NIS 24.3 billion; the share of the 5 largest insurance companies — Harel, Phoenix, Migdal, Menorah and Clal — was NIS 15.2 billion, or 63% of the total premiums in the Israeli general insurance sectors.

For further details regarding the competition in the different lines of business of the company and regarding the measures taken by the company to face competition in this competitive market, see Sections 2.1.2, 2.2.2, 2.3.2, 2.4.2, 2.5.2 and 2.6.2 in Chapter A (description of company's business) in the Company's 2021 periodic report.

Developments in the company's macro-economic environment

Measures taken in Israel and worldwide to counter the spreading of the coronavirus had significantly affected GDP and employment in Israel. The impact of these measures on the various sectors of the economy varied. In 2021 and in 2022 until the reporting date, more lenient means were employed in place of lockdowns against breakouts, including and most notably, restrictions on entry into Israel, the majority of which, as aforementioned, have been lifted.

In February 2022, Russia invaded Ukraine. The war resulted in the imposition of multiple international sanctions on Russia, both by countries and by corporations that discontinued or restricted their operations in Russia. In addition, various restrictions were imposed on the Russian Government, including regarding the use of foreign currency and the realization of Russian assets. This tension and its implications, together with the rising morbidity rates in China have exacerbated, also in the reported period, the difficulties in the global production and supply chain, increasing the inflationary pressure and leading to a slowdown in the global economic activity.

According to the Bank of Israel's most recent forecast¹, GDP is expected to grow by 5.0% and 3.5% in 2022 and 2023, respectively, while the inflation rate is expected to reach 3.3% in the four quarters ending in the second quarter of 2023, 4.5% in 2022, and 2% in 2023.

According to the aforesaid forecast, the unemployment rate is expected to reach 3.3% and 3.5% in 2022 and 2023, respectively.

In the reported period, the Bank of Israel interest rate was raised 3 times, reaching 1.25% as of the reporting date². According to the aforementioned forecast, the Bank of Israel interest rate is expected to average 2.75% in the second quarter of 2023.

The company invests a considerable part of its investment portfolio in the capital market; therefore, the yields arising from different routes of investments in the capital market have a significant effect on company's profits.

¹ The macroeconomic forecast of the Research Division from July 4, 2022.

² According to the resolutions of the Bank of Israel's Monetary Committee from April 11, 2022, May 23, 2022 and July 4, 2022. For more information, see the Monetary Policy Report for the first half of 2022, dated July 19, 2022.



The following are data on the changes in the marketable securities indexes in the Tel Aviv Stock Exchange Ltd.:

	Jan-June 2022	Jan-June 2021	April- June 2022	April- June 2021	2021
Government bonds indexes					
General government bonds Linked government bonds NIS government bonds	(6.6%) (6.77%) (6.48%)	(0.3%) 1.5% (1.5%)	(2.46%) (3.01%) (2.08%)	0.4% 1.2% 0.0%	2.3% 7.4% (0.8%)
Corporate bonds indexes					
Tel Bond 60 Tel Bond NIS	(5.86%) (4.93%)	3.8% 1.9%	(3.23%) (1.46%)	2.0% 1.6%	7.8% 3.0%
Share indexes					
Tel-Aviv 125 S&P 500	(8.4%) (20.6%)	12.5% 14.4%	(10.17%) (16.73%)	6.0% 8.2%	31.1% 27.2%

For information regarding the composition of the Company's investments see financial investment asset list in note 6 to the condensed interim financial information. For information on general trends in the insurance sector and their effect on company's business, with emphasis on critical success factors, see Section 4.3 in Chapter A (description of company's business) in the Company's 2021 periodic report.

The impact of new laws, regulations and directives on the business of the Company in the reported period and information in the report

The following is a summary of major regulatory changes and the key issues that are relevant to the activity of the Company, as published by the Commissioner in circulars and drafts during the reported period until shortly before the date of issuing this report, which were not described in previous periodic reports of the Company:

Legislation

- In June 2022, the Insurance Contract (Amendment Home Insurance) Bill, 2022 was submitted to the Knesset (Israeli Parliament). The bill proposes to obligate the insurers to include in home and home contents insurance coverage for the event of collapse of the structure in which the insured apartment is located, and for the event of the structure being designated for demolition or sealing due to its being declared dangerous, all unless the insurer proves that the damage to the structure was caused by the policyholder.
- In June 2022, the Insurance Contract (Amendment Statute of Limitations and Special Interest) Bill, 2022 was submitted to the Knesset. The bill proposes an amendment to the law and the expansion of the powers of the Commissioner, which would allow the Commissioner to impose special interest on an insurer due to delay in the payment of insurance benefits (this power is currently conferred upon the court) and to extend the statute of limitations where a complaint has been filed with the Commissioner, in order to ensure that the limitations period prescribed by law does not elapse before the end of one year from the submission of a complaint to the Commissioner of the Capital Markets, Insurance and Savings, but will not elapse later than four years from the occurrence of the insurance event, and in the case of life insurance, illness and hospitalization insurance, and long-term care insurance, not more than 6 years.



Circulars

- In May 2022, the Updated Roadmap for the Adoption of International Financial Reporting Standard (IFRS) No. 17, Insurance Contracts, was published, which provides for the principal milestones set by the Authority to ensure that insurance companies in Israel prepare for the quality implementation of the new standard in an adequate and reliable manner. The update includes a small number of modifications to the draft update published in January 2022.
- In May 2022, Public Institutions' Circular 2022-9-15, "Reporting of Cyber and Technological Failure Events", was published. The circular prescribes the types of cases in which a public institution is required to report cyber and technological failure events to the Commissioner and introduces additional provisions in relation to those reports, this in order to ensure that the public institution takes the necessary actions to mitigate the ensuing damage, to ascertain the performance of proper recovery procedures, and to allow the Authority to take supplementary actions where the implications of the event are potentially far-reaching.
- In May 2022, an amendment to the provisions of the consolidated circular concerning "Approval of Officers and the Reporting of Functionaries in Public Institutions" was published. The principal changes contained in the amendment include specification and underscoring of the circumstances in which a public institution is required to inform the Commissioner of the appointment and renewal of office of an officer pursuant to the Supervision Law and the adjustment of the candidate questionnaire and the candidate declaration to the Criminal Information and Rehabilitation of Offenders Law, 2019 and to the changes that took place following the publication of Public Institutions Circular 2018-9-31, "Board of Directors of a Public Institution".
- In June 2022, the Commissioner published an amendment to Circular 2022-1-1, "Acceptance to an Insurance Plan". The amendment provides clarifications, among others, on the following: 1) delineation of the training required of the service representative performing the acceptance interview with the insurance candidate; 2) the manner of performance of initiated marketing to a policyholder who is a senior citizen; and 3) matching and cancellation of original policy in general insurance sectors. In addition, the amendment postpones the effective date of the circular to August 31, 2022, with the exception of the use of Appendix F (Summary of the Insurance Coverage) in health insurance policies, which will come into effect on December 1, 2022.
- In June 2022, the Commissioner published an amendment to Circular 2022-1-9, "Service to Customers of Public institutions". The amendment makes modifications to the role of the Senior Citizens Officer (as defined in the circular) as regarding the establishment of mechanisms at central junctions in the life of the product held by a senior citizen and the customization of active telephone calls to those policyholders for the provision of material information.
- In June 2022, an amendment was published to the provisions of the consolidated circular, "Measurement of Liabilities Updating of the Set of Demographic Assumptions in Life Insurance and Updating the Mortality Improvements Model for Insurance Companies and the Pension Funds". The purpose of said amendment is to update the provisions of the consolidated circular concerning measurement, including the specification of updated baseline assumptions, on the basis of which, among others, the insurance companies will perform the aforesaid calculations.

Drafts

- In May 2022, Draft 6 was published of the "Appendix Professional Issues Concerning the Implementation of International Financial Reporting Standard (IFRS) No. 17 in Israel". The aforesaid draft includes guidelines concerning professional issues, in accordance with the roadmap for the adoption of the standard published in June 2020 and with its published update, as described above. In addition, the aforesaid draft includes a few updates to professional issues, this in response to comments that were received on the prior drafts and subsequent talks with the insurance companies and various other functions in the market.
- In May 2022, Draft 3 was published of the "FAQ File Concerning the Implementation of International Financial Reporting Standard (IFRS) No. 17 in Israel". The aforesaid file is designed to assist the insurance companies in preparing for the implementation of IFRS 17 and IFRS 9. The draft file clarifies that it is a collection of questions and answers that reflect non-binding positions and interpretations of the Authority arising from the implementation of the aforementioned, this in order to clarify the Authority's positions on complex issues that have been identified and, to the extent possible, create uniformity among the insurance companies in Israel, to allow comparability for analysis purposes. The draft further clarifies that an insurance company that is interested in implementing a position or an interpretation that differs from those provided in the file, is requested to inform the Authority.



- In May 2022, a draft update to the consolidated circular concerning "Public Reporting Sample Interim Financial Statements of Insurance Companies in Accordance with IFRS No. 17". The purpose of the above draft is to update the interim reports to the public by insurance companies to conform with the provisions of IFRS 17, IFRS 9 and IFRS 7.
- In July 2022, a draft amendment to the provisions of the consolidated circular, "Supervising Actuary and Chief Actuary" was published. The purpose of the draft is to update the related provisions in order to ensure that the actuaries are able to properly perform their duties, on the backdrop of the changes in the field, including the obligation of insurance companies to appoint a chief actuary that will head the actuarial function and, among others, oversee the work of the supervising actuaries



3. Financial information on the Company's lines of business

Following are principal balance sheet data (NIS thousands):

	<u>June 30, 2022</u>	<u>June 30,</u> <u>2021</u>	<u>December 31, 2021</u>
Other assets	461,317	324,355	412,469
Deferred acquisition expenses	181,189	172,539	172,527
Financial investments and cash	2,086,624	2,228,621	2,156,085
Reinsurance assets	747,022	775,161	767,609
Total assets	3,476,152	3,500,676	3,508,690
Equity	823,885	1,009,251	893,126
Liabilities in respect of insurance contracts	2,229,732	2,063,841	2,151,413
Other liabilities	422,535	427,584	464,151
Total equity and liabilities	3,476,152	3,500,676	3,508,690

Following are comprehensive income (loss) data (NIS thousands)

	Jan-June 2022	Jan-June 2021	April- June 2022	April- June 2021	Jan- December 2021
Gross earned premiums	625,354	567,827	321,423	297,321	1,176,114
Premiums earned by reinsurers	(100,557)	(90,612)	(51,003)	(48,065)	(190,246)
Premiums earned in retention	524,797	477,215	270,420	249,256	985,868
Gains (losses) on investments, net and financing income	(55,068)	45,844	(27,035)	20,043	74,039
Income from commissions	26,499	24,074	13,302	12,361	50,378
Total revenue	496,228	547,133	256,687	281,660	1,110,285
Payments and change in liability for insurance contracts, in retention	(434,893)	(317,050)	(213,825)	(170,423)	(737,480)
Total other expenses	(165,013)	(148,643)	(85,862)	(79,832)	(315,876)
Income (loss) before taxes on income	(103,678)	81,440	(43,000)	31,405	56,929
Tax benefit (taxes on income)	34,437	(28,170)	13,959	(10,970)	(19,784)
Income (loss) for the period and total comprehensive income (loss) for the period	(69,241)	53,270	(29,041)	20,435	37,145

Capital and capital requirements

As at June 30, 2022, equity amounted to NIS 823.9 million, as compared to NIS 893.1 million as at December 31, 2021. The change in equity in the reported period is due to a comprehensive loss of NIS 69.2 million for the period.

To the best of the Company's knowledge, as at the date of the report no events have taken place that might indicate financial difficulties or a deficiency in the required minimum capital. In addition, the Company believes that in the coming year it will not be required to raise funds for the purpose of meeting the minimum capital requirement.

Solvency-II-based economic solvency regime in insurance companies

In July 2019, the Company made a full transition to an economic solvency ratio regime. For details regarding the regulation applicable to the implementation of a Solvency-II-based economic solvency regime in insurance companies, see section 3 of the Board of Directors' Report for 2021.



Presented below are data concerning solvency ratio and MCR:

Solvency ratio (NIS thousands):

·	December 31,	December 31,
	2021	2020
Equity for purposes of solvency capital requirement	979,666	1,126,734
Solvency capital requirement	766,992	430,187
Surplus	212,674	596,547
Economic solvency ratio (%)	128%	213%

No equity transactions or material events with a direct effect on the Company's economic solvency ratio took place in the reported period. The Company believes that in the coming year it would not be required to raise sources for compliance with the statutory solvency ratio and with the solvency ratio target set by the Board of Directors of the Company.

Minimum capital requirement (MCR) (in NIS thousands):

	December 31, 2021	December 31, 2020
Minimum capital requirement (MCR)	208,716	180,552
Equity for purposes of MCR	979,666	1,126,734

<u>Solvency ratio excluding the transitional provisions for the deployment period and without</u> share-scenario adjustment

	December 31,	December 31,
	2021	2020
Equity for purposes of solvency capital requirement	979,666	1,126,734
Solvency capital requirement	907,544	669,527
Surplus	72,122	457,207
Economic solvency ratio (%)	108%	168%
Surplus (deficiency) in relation to the Board of Directors' target		
Board of Directors' economic solvency ratio target (%)	130%	130%
Surplus (deficiency) - in relation to target	(200,141)	256,349

The calculation performed by the Company as at December 31, 2021 was reviewed by the auditors of the Company, in accordance with ISAE 3400. For additional information on the solvency ratio, see the Company's economic solvency ratio report as at December 31, 2021 posted on the Company's website: https://www.aig.co.il/about/repayment-ratio.

The information that is provided in this section above constitutes forward-looking information, as defined in the Securities Law, 1968, which is based, inter alia, on the current state of the Company's operations. Actual results may differ from the estimated results, including materially, as a result of various factors, most prominently regulatory changes applicable to the Company.



4. Results of operations

In the reported period, the Company continued to increase the volume of gross premiums, which grew by 8.3% over their volume in the corresponding period. The Company's total gross premiums amounted to NIS 681.0 million in the reported period, as compared to NIS 628.9 million in the corresponding period in 2021. Most of the increase in gross premiums is in the vehicle property insurance and overseas travel sectors.

Total premiums in retention amounted to NIS 573.8 million in the reported period, as compared to NIS 522.2 million in the corresponding period in 2021, an increase of 9.9%. Most of the increase in gross premiums in retention in the reported period is in the vehicle property insurance and overseas travel sectors.

Premiums by principal operating segments (NIS thousands):

	Life	Health	General	
Jan-June 2022	insurance	insurance	insurance	Total
Gross	76,806	80,451	523,725	680,982
In retention	61,022	78,986	433,831	573,839
% of total gross	11.3	11.8	76.9	100.0
% of retention	10.6	13.8	75.6	100.0

	Life	Health	General	
Jan-June 2021	insurance	insurance	insurance	Total
Gross	74,325	67,241	487,309	628,875
In retention	59,703	65,915	396,560	522,178
% of total gross	11.8	10.7	77.5	100.0
% of retention	11.4	12.6	76.0	100.0

	Life	Health	General	
Jan-December 2021	insurance	insurance	insurance	Total
Gross	150,095	143,133	934,631	1,227,859
In retention	120,969	140,416	761,588	1,022,973
% of total gross	12.2	11.7	76.1	100.0
% of retention	11.8	13.7	74.5	100.0

Principal comprehensive income data by main operating segments (NIS thousands):

	Jan-June 2022	Jan-June 2021	April- June 2022	April- June 2021	Jan-Dec 2021
Income (loss) from compulsory vehicle insurance	3,159	(10,781)	4,022	(8,997)	(48,246)
Income (loss) from vehicle property insurance	(81,666)	17,616	(31,566)	4,897	(18,419)
Income from home insurance	2,870	16,925	2,425	12,903	41,244
Income (loss) from health insurance	(5,892)	10,768	(2,760)	5,239	16,021
Income (loss) from life insurance	(202)	12,549	(2,076)	5,857	16,466
Income (loss) from commercial insurance	2,566	5,758	(1,577)	1,461	13,591
Other - Income (loss) not allocated to any segment	(19,381)	28,605	(11,468)	10,045	36,272
Income (loss) before taxes on income	(103,678)	81,440	(43,000)	31,405	56,929
Tax benefit (taxes on income)	34,437	(28,170)	13,959	(10,970)	(19,784)
Income (loss) for the period and total comprehensive income (loss) for the period	(69,241)	53,270	(29,041)	20,435	37,145

For additional information on key segments – see note 4 to the condensed financial statements.



Following are the explanations of the Company's Board of Directors on developments in some of the data presented above:

a. The comprehensive loss of the Company amounted to NIS 69.2 million in the reported period, as compared to a comprehensive income of NIS 53.3 million in the corresponding period in 2021. Pre-tax loss in the reported period amounted to NIS 103.7 million, as compared to profit of NIS 81.4 million in the corresponding period in 2021. The causes of the loss are an underwriting loss of NIS 53 million and investment losses of NIS 55.1 million. The underwriting loss of the Company amounted to NIS 53 million, as compared to an underwriting profit of NIS 33 million in the corresponding period in 2021. The decrease in the underwriting profit is due mainly to substantial underwriting losses in the vehicle property insurance segment.

The comprehensive loss of the Company in the second quarter was NIS 29.0 million, as compared to comprehensive income of NIS 20.4 million in the corresponding period in 2021. Pre-tax loss totaled NIS 43.0 million, as compared to pre-tax profit of NIS 31.4 million in the corresponding quarter in 2021. The underwriting loss of the Company in the second quarter of 2022 amounted to NIS 18.3 million, as compared to NIS 10.6 million in the corresponding quarter in 2021. The decrease in the underwriting profit is due mainly to substantial underwriting losses in the vehicle property insurance segment.

- b. Net investment losses amounted to NIS 55.1 million in the reported period, as compared to investment gains of NIS 45.8 million in the corresponding period in 2021. These losses derived mainly from sharp drops on the financial markets and in particular in the Israeli bonds market, in both government bonds and corporate bonds. (See section 2 above).
- c. The loss of the Company from vehicle property insurance in the reported period was NIS 81.7 million, as compared to profit of NIS 17.6 million in the corresponding period in 2021. The underwriting loss of the Company from vehicle property insurance amounted to NIS 76.8 million in the reported period, as compared to profit of NIS 14.1 million in the corresponding period in 2021. The transition from profit in the corresponding period in 2021 to loss in the reported period is due to a significant increase in the claims' ratio. This increase resulted from a substantial rise in the frequency and severity of car accidents and theft, commencing in the second quarter of 2021, The claims' ratio in the first half of 2021 was still affected by the "Coronavirus Event". As a result, in the reported period the Company increased the provision for premium deficiency by NIS 23 million, to NIS 39 million as of the reporting date. The Company is taking the necessary steps, including the raising of tariffs, to reduce the claims' ratio and resume profitability in this sector.

The Company's loss from vehicle property insurance in the second quarter of 2022 was NIS 31.6 million, as compared to a profit of NIS 4.9 million in the corresponding period in 2021. The underwriting loss of the Company from vehicle property insurance in the second quarter was NIS 29.6 million, as compared to NIS 3.0 million in the corresponding period in 2021. The significant decrease in the underwriting profit was due to the substantial rise in the claims' ratio, as described above.

- d. The profit of the Company from compulsory vehicle insurance amounted to NIS 3.2 million in the reported period, as compared to loss of NIS 10.8 million in the corresponding period in 2021. The transition to profit was due mainly to the increase in the negative interest curve, which decreased the insurance liabilities by NIS 41.5 million. At the same time, the investment gains decreased by NIS 25 million.
 - The balance of the provision for premium deficiency as of the reporting date totaled NIS 3 million, a decrease of NIS 6.5 million in the reported period. The pool losses amounted to NIS 10 million in the reported period, as compared to NIS 6.6 million in the corresponding period in 2021.
 - The profit of the Company from compulsory vehicle insurance in the second quarter was NIS 4.0 million, as compared to a loss of NIS 9.0 million in the corresponding period in 2021. The transition to profit was due mainly to the increase in the insurance liabilities as a result of the rise in the negative interest curve.
- e. The profit of the Company from home insurance amounted to NIS 2.9 million in the reported period, as compared to profit of NIS 16.9 million in the corresponding period in 2021. The decrease in profit was due mainly to the decrease in the investment gains and the higher claims' ratio. The underwriting profit of the Company from home insurance amounted to NIS 4.3 million in the reported period, as compared to profit of NIS 15.3 million in the corresponding period in 2021. The decrease in the underwriting profit was due to the rise in the claims' ratio.



The profit of the Company from home insurance in the second quarter of 2022 was NIS 2.4 million, as compared to a profit of NIS 12.9 million in the second quarter of 2021. The underwriting profit of the Company from home insurance in the second quarter of 2022 was NIS 3.0 million, as compared to NIS 12.1 million in the corresponding period in 2021. The decrease in the underwriting profit in the reported period was due to the significant increase in the claims' ratio.

- f. The loss of the Company from health insurances in the reported period was NIS 5.9 million, as compared to profit of NIS 10.8 million in the corresponding period in 2021. The underwriting loss from health insurance in the reported period was NIS 4.1 million, as compared to an underwriting profit of NIS 9.6 million in the corresponding period in 2021. The transition to underwriting loss in the reported period was due to a substantial increase in the claims' ratio in the personal accidents insurance sector.
 - The loss from health insurance in the second quarter was NIS 2.8 million, as compared to NIS 5.2 million in the corresponding period last year. The underwriting loss from health insurance in the second quarter was NIS 1.9 million, as compared to a profit of NIS 4.6 million in the corresponding period in 2021. The transition to underwriting loss in the reported period was due to the significant rise in the claims' ratio in the personal accidents sector and the severe illness sector.
- g. The loss of the Company from life insurance was NIS 0.2 million in the reported period, as compared to profit of NIS 12.5 million in the corresponding period in 2021. The transition to loss was due mainly to the significant rise in the claims' ratio.
 - The loss of the Company from life insurance in the second quarter of 2022 was NIS 2.1 million, as compared to NIS 5.9 million in the corresponding period last year. The transition to loss was due to a significant increase in the claims' ratio.
- h. The loss of the Company from professional liability insurance in the reported period was NIS 2.0 million, as compared to profit of NIS 4.0 million in the corresponding period in 2021. The transition from profit in the corresponding period of 2021 to loss in the reported period was due to a significant reduction in investment gains.
 - The loss from professional liability insurance in the second quarter of 2022 was NIS 0.1 million, as compared to a profit of NIS 1.4 million in the corresponding period last year. The transition to loss was due to the decrease in the investment gains.
- i. The profit of the Company from other property insurance in the reported period was NIS 0.4 million, as compared to profit of NIS 1.2 million in the corresponding period in 2021. The decrease in the profit was due to a reduction in investment gains.
 - The profit of the Company from other property insurance in the second quarter of 2022 was NIS 12 thousand, as compared to a profit of NIS 0.2 million in the corresponding period last year.
- j. The loss of the Company from other liability insurance amounted to NIS 1.0 million in the reported period, as compared to loss of NIS 0.5 million in the corresponding period in 2021. Investment gains decreased by NIS 4.6 million in the reported period compared to the corresponding period in 2021. At the same time, the claims' ratio improved significantly as a result of the reduction in the insurance liabilities.
 - The loss from other liability insurance in the second quarter of 2022 was NIS 1.5 million, as compared to a loss of NIS 0.1 million in the corresponding period last year .The decrease was due to the decrease in the investment gains.



Presented below is an analysis of operating results in property insurance sectors:

a. Underwriting profit (loss) (NIS thousands):

	Jan-June 2022	Jan- June 2021	April- June 2022	April- June 2021	Jan-Dec 2021
Vehicle property	(76,837)	14,110	(29,557)	3,036	(25,548)
Home	4,259	15,308	3,021	12,110	37,580
Other property sectors	738	969	170	79	1,723

b. Principal data regarding the claims' ratio³ (Loss Ratio "LR") and the claims' and expenses' ratio (Combined Ratio "CR"):

	Jan-June 2022		Jan- June 2021		Jan-De	ec 2021
	LR%	CR%	LR%	CR%	LR%	CR%
Vehicle property:						
Gross	115%	135%	71%	93%	85%	106%
In retention	115%	135%	71%	93%	85	106%
Property4:						
Gross	49%	79%	41%	70%	33%	63%
In retention *	56%	92%	39%	72%	32%	67%

	April-Ju	ne 2022	April-June 2021		
	LR%	CR%	LR%	CR%	
Vehicle property:					
Gross	105%	127%	74%	97%	
In retention	105%	127%	74%	97%	
Property 2:					
Gross	51%	83%	31%	61%	
In retention	51%	90%	25%	60%	

5. Cash flows and liquidity

Net cash provided by operating activities in the reported period was NIS 20.2 million, compared to NIS 2.8 million in the corresponding period in 2021.

Net cash used in investing activities in the reported period amounted to NIS 4.6 million, compared to NIS 6.0 million in the corresponding period in 2021.

As a result of the above, the balance of cash and cash equivalents in the reported period increased by NIS 12.8 million and amounted to NIS 74.4 million as at June 30, 2022.

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³ For the gross data, the claims' ratio and the expenses' ratio are calculated for gross earned premiums. For the data in retention, the claims' ratio and the expenses' ratio are calculated for premiums earned in retention.

⁴ Home and other property sectors.



6. Sources of funding

All of the Company's operations are funded using its own resources and capital. As of the date of approving this report, the Company does not use any external funding sources.

7. Material events after the date of the financial statements

No material events took place after the date of the statement of financial position.

8. <u>CEO and CFO Disclosure regarding the effectiveness of controls and procedures applied to company's disclosures</u>

Controls and procedures applied to disclosure

The Company's management, with the collaboration of the Company's CEO and CFO, assessed as of the end of the period covered by this report the effectiveness of the controls and procedures with respect to the Company's disclosure. Based on this assessment, the Company's CEO and CFO concluded that as of the end of this period the controls and procedures with respect to the Company's disclosure are effective in order to record, process, summarize and report the information that the Company is required to disclose in the quarterly report pursuant to the provisions of the law and the reporting provisions issued by the Commissioner of Capital Markets, Insurance and Savings, and on the date set in these provisions.

Internal controls over financial reporting

In the course of the quarter ending on June 30, 2022, no change has occurred in the internal control of the Company over financial reporting that materially affected or is reasonably expected to materially affect the Company's internal control on financial reporting.

For purposes of this paragraph, "the covered period" is the reported financial quarter.

Management's statements as to the adequacy of the financial data presented in the Company's financial statements and the existence and effectiveness of internal controls relating to the financial statements are attached hereunder.

The Board of Directors wishes to thank the Compabusiness achievements.	ny's employees and management for their contribution to its
Edward Levin	Yfat Reiter
Chairman of the Board of Directors	CEO

August 23, 2022



Declaration

I, Yfat Reiter hereby declare that:

- I reviewed the interim report of AIG Israel Insurance Company Ltd. (hereafter –
 "the insurance company") for the quarter ended June 30, 2022 (hereafter "the
 report").
- 2. Based on my knowledge, the report does not include any misstatement of a material fact or omit to disclose a material fact the presentation of which in the report is necessary for the purpose of ensuring that under the circumstances in which those presentations are included, they will not be misleading regarding the period covered by the report.
- 3. Based on my knowledge, the quarterly financial statements and other financial information included in the report reflect fairly, in all material respects, the financial position, results of operations, changes in shareholders' equity and cash flows of the insurance company for the date and periods covered by the report.
- 4. The Company's other certifying officers and I are responsible for establishing and maintaining controls and procedures relating to disclosure¹ and internal controls over financial reporting of the insurance company; and -
 - (a) Accordingly, we have designed such disclosure controls and procedures, or have had such disclosure controls and procedures established under our charge, designed to ensure that material information relating to the insurance company is made known to us by others in the insurance company particularly during the period in which the reports were prepared;
 - (b) We designed internal controls over financial reporting, or supervised the design of such internal controls designed to provide a reasonable assurance regarding the reliability of the financial reporting and assurance to the effect that the financial statements are drawn up in accordance with International Financial Reporting Standards (IFRS) and in accordance with the directives of the Supervisor of Insurance.
 - (c) We assessed the effectiveness of controls and procedures regarding the disclosure of the insurance company and presented our conclusions regarding the effectiveness of disclosure controls and procedures as of the end of the period covered in the report, based on our estimate; and
 - (d) We disclosed in the report any change in the insurance company's internal controls over financial reporting which took place in this quarter and had a

¹ As defined in the provisions of the Institutional Bodies Circular regarding internal controls over financial reporting – declarations, reports and disclosures.

material effect or is expected to have a material effect on the insurance company's internal controls over financial reporting; and

- 5. The insurance company's other certifying officers and I have disclosed to the insurance company's auditors, the insurance company's board of directors and its audit committee, based on our most recent evaluation of internal controls over financial reporting, the following:
 - All significant deficiencies and material weaknesses in the design or operation of internal control over financial reporting which are reasonably likely to adversely affect the insurance company's ability to record, process, summarize and report financial information; and
 - b. Any fraud, whether material or not, that involves management or other employees who have a significant role in the insurance company's internal controls over financial reporting.

There is nothing in the aforesaid to derogate from my responsibility or the responsibility of any other person, pursuant to any law.



August 23, 2022



Declaration

I, David Rothstein hereby declare that:

- I reviewed the interim report of AIG Israel Insurance Company Ltd. (hereafter –
 "the insurance company") for the quarter ended June 30, 2022 (hereafter "the
 report").
- 2. Based on my knowledge, the report does not include any misstatement of a material fact or omit to disclose a material fact the presentation of which in the report is necessary for the purpose of ensuring that under the circumstances in which those presentations are included, they will not be misleading regarding the period covered by the report.
- 3. Based on my knowledge, the quarterly financial statements and other financial information included in the report reflect fairly, in all material respects, the financial position, results of operations, changes in shareholders' equity and cash flows of the insurance company for the date and periods covered by the report.
- 4. The Company's other certifying officers and I are responsible for establishing and maintaining controls and procedures relating to disclosure¹ and internal controls over financial reporting of the insurance company; and -
 - (a) Accordingly, we have designed such disclosure controls and procedures, or have had such disclosure controls and procedures established under our charge, designed to ensure that material information relating to the insurance company is made known to us by others in the insurance company particularly during the period in which the reports were prepared;
 - (b) We designed internal controls over financial reporting, or supervised the design of such internal controls designed to provide a reasonable assurance regarding the reliability of the financial reporting and assurance to the effect that the financial statements are drawn up in accordance with International Financial Reporting Standards (IFRS) and in accordance with the directives of the Supervisor of Insurance.
 - (c) We assessed the effectiveness of controls and procedures regarding the disclosure of the insurance company and presented our conclusions regarding the effectiveness of disclosure controls and procedures as of the end of the period covered in the report, based on our estimate; and
 - (d) We disclosed in the report any change in the insurance company's internal controls over financial reporting which took place in this quarter and had a

¹ As defined in the provisions of the Institutional Bodies Circular regarding internal controls over financial reporting – declarations, reports and disclosures.

material effect or is expected to have a material effect on the insurance company's internal controls over financial reporting; and

- 5. The insurance company's other certifying officers and I have disclosed to the insurance company's auditors, the insurance company's board of directors and its audit committee, based on our most recent evaluation of internal controls over financial reporting, the following:
 - All significant deficiencies and material weaknesses in the design or operation of internal control over financial reporting which are reasonably likely to adversely affect the insurance company's ability to record, process, summarize and report financial information; and
 - b. Any fraud, whether material or not, that involves management or other employees who have a significant role in the insurance company's internal controls over financial reporting.

There is nothing in the aforesaid to derogate from my responsibility or the responsibility of any other person, pursuant to any law.



August 23, 2022



Directors and Management's Report Regarding Internal Controls over Financial Reporting

Management, with the supervision of the Board of Directors of AIG Insurance Company Ltd. (hereafter the "the Insurance Company") are responsible for setting and maintaining effective internal control over financial reporting. The internal controls system of the insurance company was planned in order to provide reasonable assurance to management and Board of Directors to the effect that the financial statements are prepared and presented fairly in accordance with International Financial Reporting Standards and in accordance with the directives of the Supervisor of Insurance.

All internal controls have inherent limitations regardless of the quality of planning. Therefore, even if it is determined that these controls are effective they can only provide a reasonable measure of assurance regarding the preparation and presentation of financial statements.

Management, supervised by the Board of Directors, maintains a comprehensive control system designed to ensure that transactions are carried out in accordance with management's authorization, assets are protected, and accounting records are reliable. In addition, management with the Board of Directors' supervision takes measures in order to ensure that the information and communications channels are effective and monitor implementation, including implementation of the internal control procedures.

The Insurance Company's management with the supervision of its Board of Directors evaluates the effectiveness of the internal control of the Insurance Company over financial reporting as at June 30, 2022, based on criteria set in the internal control model of the Committee of Sponsoring Organizations of the Treadway Commission (COSO). Based on this evaluation management believes that as at June 30, 2022 the internal control of the Insurance Company over financial reporting is effective.

Mr. Edward Levin	Ms. Yfat Reiter	Mr. David Rothstein
Chairman of the Board	CEO	CFO

Date of approval of financial statements: August 23, 2022

AIG Israel Insurance Company Ltd.

Condensed Interim Financial Statements (Unaudited) As at June 30, 2022

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Auditors' review report to shareholders of AIG Israel Insurance Company Ltd.

Introduction

We have reviewed the attached financial information of AIG Israel Insurance Company Ltd ("the Company"), which is comprised of the condensed statement of financial position as of June 30, 2022 and the condensed statements of profit or loss and other comprehensive income, changes in equity and cash flows for the six- and three-month periods ended on that date. The Board of Directors and management are responsible for the preparation and presentation of the financial information for those interim periods in accordance with the provisions of International Accounting Standard No. 34, 'Interim Financial Reporting' (hereafter "IAS 34"), and they are also responsible for the preparation of the financial information for this interim period in accordance with the disclosure requirements prescribed by the Commissioner of the Capital Market, Insurance and Savings Authority in accordance with the Supervision of Financial Services (Insurance) Law, 1981. Our responsibility is to express a conclusion with respect to the financial information for those interim periods, based on our review.

Scope of review

Our review was conducted in accordance with the provisions of Review Standard (Israel) 2410 of the Institute of Certified Public Accountants in Israel, 'Review of financial information for interim period undertaken by the entity's auditor.' A review of financial information for an interim period consists of the making of enquiries, in particular, of those officials responsible for financial and accounting matters, and of the application of analytical and other review procedures. A review is substantially lesser in scope than an audit conducted in accordance with auditing standards generally accepted in Israel and consequently does not enable us to obtain assurance that we would become aware of all significant matters that might be identified in an audit. Accordingly, we do not express an audit opinion.

Conclusion

Based on our review, no matter has come to our attention that causes us to believe that the above financial information is not prepared, in all material respects, in accordance with IAS 34.

In addition, based on our review, no matter has come to our attention that causes us to believe that the above financial information does not comply, in all material respects, with the disclosure provisions prescribed by the Commissioner of the Capital Market, Insurance and Savings Authority in accordance with the Supervision of Financial Services (Insurance) Law, 1981.

Emphasis of a matter

Without qualifying our conclusion, as above, we draw attention to the stated in Note 7 to the financial information referred to above concerning the exposure to contingent liabilities.

Somekh Chaikin Certified Public Accountants (Isr.)

August 23, 2022

	June 30, 2022	June 30, 2021	December 31, 2021
	(Unaudited)	(Unaudited)	(Audited)
	NIS thousands	NIS thousands	NIS thousands
Assets:			
Intangible assets	23,623	24,919	27,194
Deferred acquisition costs	181,189	172,539	172,527
Property and equipment Reinsurance assets	24,725 747,022	29,385 775,161	28,950 767,609
Premiums collectible	224,725	197,713	195,749
Current tax assets	109,679	27,858	76,328
Deferred tax assets, net	5,352	-	-
Other receivables	73,213	44,480	84,248
	1,389,528	1,272,055	1,352,605
Financial investments:			
Marketable debt instruments	1,832,289	1,952,612	1,903,047
Non-marketable debt instruments	78,529	76,911	83,086
Other	101,441	108,797	108,370
Total financial investments	2,012,259	2,138,320	2,094,503
Cash and cash equivalents	74,365	90,301	61,582
Total assets	3,476,152	3,500,676	3,508,690

Edward Levin	Yfat Reiter	David Rothstein
Chairman of the Board	C.E.O	C.F.O
of Directors		

Date of approval of the interim financial information by the Board of Directors of the Company: August 23, 2022

	June 30, 2022	June 30, 2021	December 31, 2021
•	(Unaudited)	(Unaudited)	(Audited)
	NIS thousands	NIS thousands	NIS thousands
Equity and liabilities:			
Equity:			
Share capital	6	6	6
Share premium	250,601	250,601	250,601
Capital reserve	15,708	15,708	15,708
Retained earnings	557,570	742,936	626,811
Total equity attributable to the equity holders of the			
Company	823,885	1,009,251	893,126
Liabilities:			
Liabilities in respect of insurance contracts and			
investment contracts that are not yield dependent	2,229,732	2,063,841	2,151,413
Liabilities in respect of deferred taxes, net	-	15,159	16,559
Retirement benefit obligation, net	4,661	5,057	5,261
Liabilities to reinsurers	303,933	294,096	305,590
Other payables	113,941	113,272	136,741
Total liabilities	2,652,267	2,491,425	2,615,564
Total equity and liabilities	3,476,152	3,500,676	3,508,690

Condensed Interim Statements of Profit or Loss and Comprehensive Income

	6-month pe June		3-month pe June		Year ended December 31,
	2022	2021	2022	2021	2020
	(Unaudited)	(Unaudited)	(Unaudited)	(Unaudited)	(Audited)
	NIS thousands	NIS thousands	NIS thousands	NIS thousands	NIS thousands
Gross earned premiums Premiums earned by	625,354	567,827	321,423	297,321	1,176,114
reinsurers	(100,557)	(90,612)	(51,003)	(48,065)	(190,246)
Premiums earned in retention Gains (losses) on investments, net and	524,797	477,215	270,420	249,256	985,868
financing income	(55,068)	45,844	(27,035)	20,043	74,039
Commission income	26,499	24,074	13,302	12,361	50,378
Total income	496,228	547,133	256,687	281,660	1,110,285
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance	(468,038)	(396,930)	(227,777)	(220,375)	(880,135)
liabilities and payments for insurance contracts	33,145	79,880	13,952	49,952	142,655
Payments and change in liabilities with respect to insurance contracts, in retention	(434,893)	(317,050)	(213,825)	(170,423)	(737,480)
Commissions, marketing expenses and other acquisition costs General and administrative	(126,800)	(112,627)	(66,555)	(61,087)	(239,583)
expenses	(43,094)	(38,433)	(21,620)	(19,447)	(78,860)
Financing income, net	4,881	2,417	2,313	702	2,567
Total expenses	(599,906)	(465,693)	(299,687)	(250,255)	(1,053,356)
Income (loss) before taxes					<u> </u>
on income Tax benefit (taxes on	(103,678)	81,440	(43,000)	31,405	56,929
income)	34,437	(28,170)	13,959	(10,970)	(19,784)
Income (loss) for the period and total comprehensive income (loss) for the period	(69,241)	53,270	(29,041)	20,435	37,145
Basic earnings per share:					
Basic earnings (loss) per share	(12.08)	9.30	(5.07)	3.57	6.48
Number of shares used in calculating basic earnings per share	5,730	5,730	5,730	5,730	5,730

Condensed Interim Statements of Changes in Equity

	Share capital	Share premium	Other reserves NIS thousands	Retained earnings	Total
Six-month period ended June 30, 2022 Balance as of January 1, 2022 (Audited) Total comprehensive loss for the period (Unaudited)	6	250,601	15,708	626,811 (69,241)	893,126 (69,241)
Balance as at June 30, 2022 (Unaudited)	6	250,601	15,708	557,570	823,885
Six-month period ended June 30, 2021 Balance as of January 1, 2021 (Audited) Total comprehensive income for the period (Unaudited)	6	250,601	15,708	689,666 53,270	955,981 53,270
Balance as at June 30, 2021 (Unaudited)	6	250,601	15,708	742,936	1,009,251
Three-month period ended June 30, 2022 Balance as at April 1, 2022 (unaudited) Total comprehensive loss for the period (Unaudited)	6	250,601	15,708	586,611 (29,041)	852,926 (29,041)
Balance as at June 30, 2022 (Unaudited)	6	250,601	15,708	557,570	823,885

Condensed Interim Statements of Changes in Equity

	Share capital	Share premium	Other reserves NIS thousands	Retained earnings	Total
Three-month period ended June 30, 2021 Balance as at April 1, 2021 (unaudited) Total comprehensive income for the period (Unaudited)	6	250,601	15,708	722,501 20,435	988,816 20,435
Balance as at June 30, 2021 (Unaudited)	6	250,601	15,708	742,936	1,009,251
Year ended December 31, 2021 Balance as at January 1, 2021 (audited)	6	250,601	15,708	689,666	955,981
Total comprehensive income the year (Audited) Dividend (Audited) Balance as of December 31, 2021				37,145 (100,000)	37,145 (100,000)
(audited)	6	250,601	15,708	626,811	893,126

	Three-month period ended June 30			n period ended ne 30	Year ended December 31,	
	2022	2021	2022	2021	2021	
	(Unaudited)	(Unaudited)	(Unaudited)	(Unaudited)	(Audited)	
	NIS thousands	NIS thousands	NIS thousands	NIS thousands	NIS thousands	
Cash flows from operating activities: Net cash provided by operations		- Housairas		<u> </u>	<u> </u>	
(Appendix A) Interest paid Interest received	18,322 (157) 22,803	45,125 (211) 31,207	17,097 (75) 10,606	26,537 (102) 10,661	76,866 (396) 54,854	
Income taxes paid Income taxes received Net cash provided by operating	(30,529) 9,730	(83,287) 9,979	(18,297)	(21,751)	(52,350) 9,979	
activities	20,169	2,813	9,331	15,345	88,953	
Cash flow from investing activities: Acquisition of property and equipment Acquisition of intangible assets	(521) (4,092)	(604) (5,423)	(120) (2,159)	(583) (2,912)	(4,860) (14,511)	
Net cash used in investing activities	(4,613)	(6,027)	(2,279)	(3,495)	(19,371)	
Cash flow from financing activities: Dividend paid to the equity holders of the Company	_	_	_	_	(100,000)	
Repayment of principal of lease liability	(2,738)	(2,684)	(1,373)	(1,346)	(5,394)	
Net cash used in financing activities	(2,738)	(2,684)	(1,373)	(1,346)	(105,394)	
Impact of exchange rate fluctuations on cash and cash equivalent balances	(35)	(1,205)	11	123	(10)	
Increase (decrease) in cash and cash equivalents	12,783	(7,103)	5,690	10,627	(35,822)	
Cash and cash equivalents at beginning of period	61,582	97,404	68,675	79,674	97,404	
Cash and cash equivalents at end of period	74,365	90,301	74,365	90,301	61,582	

	Three-month period ended June 30		Three-month period ended June 30		Year ended December 31,
	2022	2021	2022	2021	2021
	(Unaudited)	(Unaudited)	(Unaudited)	(Unaudited)	(Audited)
	NIS thousands	NIS thousands	NIS thousands	NIS thousands	NIS thousands
Appendix A - cash flows from					
operating activity:					
Income (loss) for the period	(69,241)	53,270	(29,041)	20,435	37,145
Adjustments for:					
Income and expenses not involving cash flows:					
Change in liabilities for insurance					
contracts that are not yield dependent	78,319	137,197	26,238	54,773	224,769
Change in reinsurance assets	20,587	(55,997)	10,143	(34,332)	(48,445)
Change in deferred acquisition costs	(8,662)	(11,910)	710	2,186	(11,898)
Taxes on Income	(34,437)	28,170	(13,959)	10,970	19,784
Change in retirement benefit					
obligations, net	(600)	50	(300)	-	254
Depreciation of property and					
equipment	4,746	4,548	2,356	2,310	9,239
Amortization of intangible assets	7,663	6,202	3,848	3,131	13,015
Losses (gains), net, on financial investments:					
Marketable debt instruments	69,752	(992)	30,640	(7,643)	(7,153)
Non-marketable debt instruments	2,423	4,904	(815)	(352)	(2,174)
Other	6,929	(15,015)	6,382	(2,391)	(14,588)
Impact of fluctuation in exchange rate					
on cash and cash equivalents	35	1,205	(11)	(123)	10
	146,755	98,362	65,232	28,529	182,813
Changes in assets and liabilities:					
Liabilities to reinsurers	(1,657)	35	6,155	(23,777)	11,529
Investments in financial assets, net	3,124	(97,982)	(12,932)	7,126	(41,353)
Premiums collectible	(28,976)	(27,594)	(5,632)	2,930	(25,630)
Other receivables	11,035	27,883	7,186	568	(11,885)
Other payables	(20,062)	(12,858)	(3,322)	1,287	13,321
Current tax assets (current tax					
liabilities), net	(10)	35,005	(18)	(2)	(34,616)
	(36,546)	(75,511)	(8,563)	(11,868)	(88,634)
Adjustments for interest and dividend:					
Interest paid	157	211	75	102	396
Interest received	(22,803)	(31,207)	(10,606)	(10,661)	(54,854)
	(22,646)	(30,996)	(10,531)	(10,559)	(54,458)
Net cash provided by operations	18,322	45,125	17,097	26,537	76,866
- • •	 _				

Cash flows from operating activities include those stemming from financial investment purchases and sales (net) that relate to operations involving insurance contracts.

Note 1 - General

A. Reporting Entity

AIG Israel Insurance Company Ltd. (hereinafter - "the Company") was incorporated in Israel on March 27, 1996 as a private company in which the shareholders have limited responsibility. The Company commenced its insurance operations in May 1997. The Company does not hold any subsidiaries or related companies. The Company has no foreign operations through branches or investee companies.

The ultimate parent company is American International Group Inc. (hereinafter - "AIG Global Corporation" or "AIG"), which is a leading international insurance and financial concern.

The Company's sole shareholder is AIG Holdings Europe Limited (hereinafter - "AHEL"), which holds all the issued share capital of the Company. AHEL is a member of the AIG Global Corporation.

The registered office of the Company is at 25 HaSivim St. Petach Tikva, Israel.

B. Definitions:

- 1. The Company AIG Israel Insurance Company Ltd.
- 2. Commissioner Commissioner of Capital Market, Insurance and Savings Authority.
- 3. The Supervision Law The Supervision of Financial Services (Insurance) Law, 1981.
- 4. Reinsurance assets the reinsurer's share in the reserves for insurance contracts and in the contingent claims.
- 5. Outstanding claims Known outstanding claims, with the addition of the expected progression of claims that have been incurred but not enough reported (I.B.N.E.R.) plus claims that have been Incurred but not reported (I.B.N.R).
- 6. Insurance contract A contract under which one party (the insurer) takes a significant insurance risk from another party (policyholder), by agreement to indemnify the policyholder if an uncertain a defined future event (insurance event) negatively affects the policyholder.
- 7. Liability for insurance contracts Insurance reserves and outstanding claims.
- 8. Premiums Premiums including fees and proceeds for related services
- 9. Premiums earned premiums that relate to the reporting period.

Note 1 – General (cont'd):

C. Material Events in the Reporting Period - The Coronavirus Event

The Coronavirus Event

In 2020 and 2021, a vast spreading of the coronavirus took place in Israel and worldwide (hereinafter: "the Coronavirus Event"), which had severe implications on the local and global economy. For additional information on the effects of the Coronavirus Event in 2020 and 2021 and the related actions taken by the Company, see section 1(c) in the financial statements for 2020 and section 1(c) in the financial statements for 2021.

In the first half of 2022, morbidity rates somewhat increased but had a limited impact as the number of severe cases remained constant.

As of the date of publication of the report, activity in the Israeli economy has almost fully resumed, with no restrictions.

Note 2 - Basis of Preparation of Financial Statements

A. Statement of compliance

The condensed interim financial statements (hereinafter - "the interim financial information") has been prepared in accordance with the provisions of International Accounting Standard No. 34 - "Interim Financial Reporting" (hereinafter - "IAS 34") and do not include all of the information required fur full annual financial statements, and in accordance with the disclosure requirements of the Supervision Law and the regulations promulgated thereunder. The interim financial information should be read in conjunction with the annual financial statements as at December 31, 2021 and for the year ended on that date (hereinafter – "the 2021 annual financial statements of the Company").

The condensed interim financial statements were approved for publication by the Board of Directors of the Company on August 23, 2022.

B. Use of estimates and judgments

The preparation of condensed interim financial statements in conformity with IFRSs requires management of the Company to make judgments, estimates and assumptions that affect the application of policies and the amounts of assets, liabilities, income and expenses. It is hereby clarified that actual results may differ from these estimates.

The significant judgments made by management in applying the Group's accounting policies and the principal assumptions used in the estimation of uncertainty were the same as those applied in the preparation of the annual financial statements of the Company for 2021.

Note 3 - Significant Accounting Policies

The significant accounting policies and the computational methods applied in the preparation of the interim financial information are consistent with the policies and methods applied in the preparation of the annual financial statements of the Company for 2021.

Update to the Roadmap for the Adoption of IFRS 17, "Insurance Contracts" in Israel

Further to the stated in the Company's annual financial statements for 2021 concerning the draft "Updated Roadmap for the Adoption of International Financial Reporting Standard No. 17 – Insurance Contracts" published by the Capital Market Authority on January 5, 2022 (hereinafter: "the Draft Roadmap"), on May 23, 2022, the Capital Market Authority published the final and binding version of the aforesaid Roadmap (hereinafter: "the Current Roadmap").

The Current Roadmap maintains the first-implementation date of IFRS 17 in Israel, as prescribed in the Draft Roadmap - which shall take effect starting in the quarterly and annual periods commencing on January 1, 2024 (accordingly, the transition date will be January 1, 2023). Nevertheless, the Current Roadmap contains a few updates in relation to the Draft Roadmap.

According to the Current Roadmap, in 2023, in the financial statements for the second quarter and for the year 2023, the companies will be required to report, in a dedicated note within the financial statements, proforma main statements (at minimum – a statement of financial position and a statement of comprehensive income, without comparative figures) drawn up in accordance with the provisions of IFRS 17 and IFRS 9, this in the disclosure format that is provided in the appendix to the Current Roadmap. In addition, the Current Roadmap specifies the preparations and the principal timetables that the Capital Market Insurance and Savings Authority believes to be necessary for ensuring that the Insurance companies in Israel are prepared for the proper and reliable high-quality implementation of the Standard, inter alia, as regarding the adaptation of the IT systems, finalizing the accounting policy and preparing for the various requisite reports, the performance of quantitative testing concerning fair value shortly before the transition date, preparation for the calculation of the risk adjustment for non-financial risk, and preparation for the audit by the independent auditors.

The Company continuously studies the implications of the adoption of the aforementioned standards on its financial statements and is preparing for their implementation within the timetables stated above.

Note 4 - Segment Information

The operating segments were determined on the basis of the information examined by the chief operational decision-maker for the purposes of evaluating performance and deciding upon the allocation of resources.

The Company operates in the following operating segments: general insurance, health insurance and life insurance, as set out below. Activities that are not attributed to the segments includes the equity, the non-insurance liabilities and their covering assets.

A. Life insurance segment

The life insurance segment provides cover for life insurance risk only as well as coverage of other risks such as disability, occupational disability and other health related services

Note 4 - Segment Information (cont'd)

B. Health insurance segment

All the Company's health insurance operations are concentrated within this segment. The segment provides personal accident cover, severe illness cover and foreign travel cover.

C. General insurance segment

The general insurance segment encompasses the property and liability sectors. In accordance with the directives of the Commissioner of Insurance, the segment is divided into the following sectors: the compulsory motor vehicle sector, the motor vehicle property sector, the home insurance sector, other property sectors, other liability sectors, and the professional liability sector.

Compulsory motor vehicle sector

The compulsory motor vehicle sector focuses on the provision of cover, the purchase of which, by the owner or driver of a vehicle, is compulsory by law. This insurance provides cover for bodily injury occasioned to the driver of the vehicle, any passengers therein or pedestrians as a result of the use of an engine vehicle.

Motor vehicle property sector

The motor vehicle property sector focuses on the provision of cover for property damage occasioned to the motor vehicle of the insured and for property damage that the motor vehicle of the insured causes to a third party.

Home insurance sector

The apartment's insurance sector focuses in providing coverage for damages caused to apartments and includes coverage in respect of damages caused by earthquake.

Professional liability sector

The professional liability sector provides cover to practitioners of the various liberal professions for any claims that may be made against them in relation to injury occasioned to a third party as a result of a mistake or professional negligence. Insurance coverage to directors and office holders in respect of an unlawful act or oversight carried out by the directors and office holders in their professional capacity, for funds misappropriation damages and for cyber events.

• Other property sectors

Other property sectors provide cover with respect to those property lines which are not connected with the motor vehicle or liability sectors. Cover is principally provided with respect to property insurance, subcontractors and mechanical breakdown insurance.

Other liability sectors

Other liability sectors provide cover for the liability of the insured with respect to damage that the insured causes to a third party. Amongst the liabilities covered by these sectors are third party liability, employer's liability and product liability.

Not

6-month period ended June 30, 2022 (unaudited)

(348,193)

(85,462)

(23,869)

(78,203)

2,053,226

1,243

Note 4 - Segment Information (cont'd)

to insurance contracts, in retention

General and administrative expenses

Financing income, net

income

June 30, 2022

Commissions and other acquisition costs

Total comprehensive loss before taxes on

Liabilities for insurance contracts, gross, as at

	Life insurance	Health Insurance *	General insurance NIS thousands	attributed to operating segments	Total
Gross earned premiums	77,662	78,148	469,544		625,354
Premiums earned by reinsurers	(15,784)	(1,465)	(83,308)		(100,557)
Premiums earned in retention	61,878	76,683	386,236		524,797
Losses on investments, net, and financing income Commission income	4,216	(1,817) 209	(30,232) 22,074	(23,019)	(55,068) 26,499
Total income	66,094	75,075	378,078	(23,019)	496,228
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance	(48,787)	(52,782)	(366,469)	, , ,	(468,038)
liabilities and payments with respect to insurance contracts Payments and change in liabilities with respect	13,055	1,814	18,276		33,145

(50,968)

(20,007)

(9,992)

(5,892)

96,739

(35,732)

(21,331)

(9,233)

(202)

79,767

6-month period ended June 30, 2021 (unaudited) Not attributed Life Health General to operating Insurance * insurance insurance segments **Total** NIS thousands Gross earned premiums 75,000 65,990 426,837 567,827 Premiums earned by reinsurers (14,623)(1,326)(74,663)(90,612)Premiums earned in retention 60,377 64,664 352,174 477,215 Gains on investments, net, and financing income 1,119 18,172 26,553 45,844 3,559 159 20,356 24,074 Commission income 390,702 **Total income** 63,936 65,942 26,553 547,133 Payments and change in liabilities with respect to insurance contracts, gross (30,424)(33,112)(333,394)(396,930)Share of reinsurers in increase of insurance liabilities and payments with respect to 6,729 1,101 72,050 79,880 insurance contracts Payments and change in liabilities with respect to insurance contracts, in retention (23,695)(32,011)(261,344)(317,050)Commissions and other acquisition costs (19,469)(14,913)(78,245)(112,627)General and administrative expenses (8,223)(8,250)(21,960)(38,433)Financing income, net 365 2,052 2,417 Total comprehensive income before taxes on 12,549 10,768 28,605 29,518 81,440 income Liabilities for insurance contracts, gross, as at 59,535 77,560 1,926,746 2,063,841 June 30, 2021

(434,893)

(126,800)

(103,678)

2,229,732

3,638

(19,381)

(43,094)

4,881

The health insurance segment primarily comprises the results of the personal accidents sector.

Note 4 - Segment Information (cont'd)

110te 4 - Segment Information (con	iit u)	3-month period	ended June 30, 2	022 (unaudited)	
	Life insurance	Health Insurance *	General insurance NIS thousands	Not attributed to operating segments	Total
Gross earned premiums	39,033	42,246	240,144		321,423
Premiums earned by reinsurers	(8,300)	(763)	(41,940)		(51,003)
Premiums earned in retention	30,733	41,483	198,204		270,420
Losses on investments, net, and financing					
income	-	(825)	(13,022)	(13,188)	(27,035)
Commission income	2,185	113	11,004		13,302
Total income	32,918	40,771	196,186	(13,188)	256,687
Payments and change in liabilities with					
respect to insurance contracts, gross	(29,543)	(29,468)	(168,766)		(227,777)
Share of reinsurers in increase of insurance liabilities and payments with respect to insurance contracts	9,624	1,493	2,835		13,952
Payments and change in liabilities with					
respect to insurance contracts, in retention	(19,919)	(27,975)	(165,931)		(213,825)
Commissions and other acquisition costs	(10,402)	(10,416)	(45,737)		(66,555)
General and administrative expenses	(4,673)	(5,140)	(11,807)		(21,620)
Financing income, net			593	1,720	2,313
Total comprehensive loss before taxes on income	(2,076)	(2,760)	(26,696)	(11,468)	(43,000)

	3-month period ended June 30, 2021 (unaudited)					
	Life insurance	Health Insurance *	General insurance NIS thousands	Not attributed to operating segments	Total	
Gross earned premiums	37,014	33,351	226,956		297,321	
Premiums earned by reinsurers	(7,064)	(670)	(40,331)		(48,065)	
Premiums earned in retention	29,950	32,681	186,625		249,256	
Gains on investments, net, and financing						
income	-	628	10,080	9,335	20,043	
Commission income	1,784	82	10,495		12,361	
Total income	31,734	33,391	207,200	9,335	281,660	
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance	(16,118)	(17,393)	(186,864)		(220,375)	
liabilities and payments with respect to insurance contracts	3,995	576	45,381		49,952	
Payments and change in liabilities with respect to insurance contracts, in retention Commissions and other acquisition costs General and administrative expenses	(12,123) (9,565) (4,189)	(16,817) (7,159) (4,176)	(141,483) (44,363) (11,082)		(170,423) (61,087) (19,447)	
Financing income (expenses)	-	-	(8)	710	702	
Total comprehensive income before taxes on income	5,857	5,239	10,264	10,045	31,405	

^{*} The health insurance segment primarily comprises the results of the personal accidents sector.

Note 4 - Segment Information (cont'd)

Year ended December 31, 2021 (audited) Not attributed Life Health General to operating insurance Insurance * insurance segments Total NIS thousands Gross earned premiums 149,881 141,832 844,401 1,176,114 (29,128)(2,717)(158,401)(190,246)Premiums earned by reinsurers 120,753 139,115 726,000 985,868 Premiums earned in retention Gains on investments, net and financing 35,000 74.039 income 2,363 36,676 7,337 331 42,710 50,378 Commission income **Total income** 128,090 141,809 805,386 35,000 1,110,285 Payments and change in liabilities with respect to insurance contracts, gross (73,306)(76,042)(730,787)(880, 135)Share of reinsurers in increase of insurance liabilities and payments with respect to 17,149 1,512 123,994 142,655 insurance contracts Payments and change in liabilities with respect to insurance contracts, in retention (56,157)(74,530)(606,793)(737,480)Commissions and other acquisition costs (38,368)(32,569)(168,649)(239.583)General and administrative expenses (17,099)(18,689)(43,072)(78,860)1,295 1,272 2,567 Financing income, net Total comprehensive income (loss) before 16,466 16,021 36,272 56,929 (11,830)taxes on income Liabilities for insurance contracts, gross, as at 72,095 83,221 1,996,097 2,151,413 June 30, 2022

^{*} The health insurance segment primarily comprises the results of the personal accidents sector.

	6-month period ended June 30, 2022 (unaudited)						
	Compulsory Motor Vehicle	Motor vehicle Property	Home	Professional liability NIS thousands	Other property sectors*	Other liability sectors*	Total
Gross premiums Reinsurance premiums	117,143 (1,588)	248,429	72,219 (8,462)	50,542 (46,524)	20,642 (20,268)	14,750 (13,052)	523,725 (89,894)
Premiums in retention Change in balance of unearned premiums, in retention Premiums earned in retention	115,555 (11,954) 103,601	248,429 (31,666) 216,763	63,757 (3,303) 60,454	4,018 (470) 3,548	374 8 382	1,698 (210) 1,488	433,831 (47,595) 386,236
Losses on investments, net, and financing income Commission income Total income	(15,702)	(5,512)	(1,936) 501 59,019	(3,801) 15,150 14,897	(357) 3,803 3,828	(2,924) 2,620 1,184	(30,232) 22,074 378,078
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance liabilities and payments with respect to insurance contracts	(56,036) (6,159)	(248,693)	(34,405)	(18,707) 14,873	(8,154) 7,628	(474) 1,193	(366,469)
Payments and change in liabilities with respect to insurance contracts, in retention	(62,195)	(248,963)	(33,664)	(3,834)	(526)	719	(348,193)
Commissions and other acquisition costs General and administrative expenses Financing income, net Total expenses	(15,879) (6,666) - (84,740)	(35,143) (9,764) 683 (292,917)	(16,410) (6,622) 547 (56,149)	(12,537) (526) 10 (16,887)	(2,751) (170) - (3,447)	(2,742) (121) 3 (2,141)	(85,462) (23,869) 1,243 (456,281)
Total comprehensive income (loss) before taxes on income	3,159	(81,666)	2,870	(1,990)	381	(957)	(78,203)
Liabilities for insurance contracts, gross, as at June 30, 2022	916,889	386,952	111,930	316,952	91,504	228,999	2,053,226
Liabilities for insurance contracts, net, as of June 30, 2022	756,983	386,952	106,896	39,240	2,073	37,533	1,329,677

Other property sectors reflect mainly the results of the property loss insurance sector, which accounts for 97% of the total premiums attributable to these sectors. Other liability sectors reflect mainly the results of the third-party insurance sector, which accounts for 45% of the total premiums attributable to these sectors.

Note 4 - Segment Information (cont'd)

	6-month period ended June 30, 2021 (unaudited)						
	Compulsory Motor Vehicle	Motor vehicle Property	Home	Professional liability	Other property sectors*	Other liability sectors*	Total
				NIS thousands			
Gross premiums Reinsurance premiums	111,296 (1,523)	219,725	67,802 (6,995)	52,450 (48,155)	20,217 (20,148)	15,819 (13,928)	487,309 (90,749)
Premiums in retention	109,773	219,725	60,807	4,295	69	1,891	396,560
Change in balance of unearned premiums, in retention	(12,125)	(29,183)	(2,115)	(766)	(13)	(184)	(44,386)
Premiums earned in retention	97,648	190,542	58,692	3,529	56	1,707	352,174
Gains on investments, net, and financing income Commission income	8,906	3,334	1,430 713	2,603 13,249	235 3,106	1,664 3,288	18,172 20,356
Total income	106,554	193,876	60,835	19,381	3,397	6,659	390,702
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance liabilities and payments with respect to insurance contracts	(113,017) 16,515	(135,360)	(23,331) 582	(29,837) 26,252	(9,583) 9,452	(22,266) 19,249	(333,394) 72,050
Payments and change in liabilities with respect to insurance contracts, in retention	(96,502)	(135,360)	(22,749)	(3,585)	(131)	(3,017)	(261,344)
Commissions and other acquisition costs General and administrative expenses Financing income, net Total expenses	(14,880) (5,953) - (117,335)	(31,593) (9,479) 172 (176,260)	(15,494) (5,854) 187 (43,910)	(11,333) (423) 5 (15,336)	(1,942) (120) - (2,193)	(3,003) (131) 1 (6,150)	(78,245) (21,960) 365 (361,184)
Total comprehensive income (loss) before taxes on income	(10,781)	17,616	16,925	4,045	1,204	509	29,518
Liabilities for insurance contracts, gross, as at June 30, 2021	853,919	285,293	113,361	339,478	93,247	241,448	1,926,746
Liabilities for insurance contracts, net, as of June 30, 2021	696,439	285,293	107,763	300,706	2,216	39,043	1,169,526

^{*} Other property sectors reflect mainly the results of the property loss insurance sector, which accounts for 100% of the total premiums attributable to these sectors.

^{**} Other liability sectors reflect mainly the results of the third-party insurance sector, which accounts for 45% of the total premiums attributable to these sectors.

Note 4 - Segment Information (cont'd)

	3-month period ended June 30, 2022 (unaudited)						
	Compulsory Motor Vehicle	Motor vehicle Property	Home	Professional liability	Other property sectors*	Other liability sectors*	Total
				NIS thousands			
Gross premiums	53,351	111,958	33,435	20,674	11,166	6,502	237,086
Reinsurance premiums	(707)	-	(4,967)	(18,905)	(11,142)	(5,582)	(41,303)
Premiums in retention	52,644	111,958	28,468	1,769	24	920	195,783
Change in balance of unearned premiums, in retention	909	(446)	1,927	158	2	(129)	2,421
Premiums earned in retention	53,553	111,512	30,395	1,927	26	791	198,204
Losses on investments, net, and financing income	(6,799)	(2,337)	(857)	(1,615)	(158)	(1,256)	(13,022)
Commission income	<u>-</u>	<u>-</u>	255	7,568	1,862	1,319	11,004
Total income	46,754	109,175	29,793	7,880	1,730	854	196,186
Payments and change in liabilities with respect to insurance contracts, gross	(25,060)	(117,235)	(15,285)	(7,687)	(7,505)	4,006	(168,766)
Share of reinsurers in increase of insurance liabilities and payments with respect to insurance contracts	(5,729)	<u>-</u>	81	6,281	7,165	(4,963)	2,835
Payments and change in liabilities with respect to insurance contracts, in retention	(30,789)	(117,235)	(15,204)	(1,406)	(340)	(957)	(165,931)
Commissions and other acquisition costs	(8,657)	(19,092)	(9,059)	(6,281)	(1,292)	(1,356)	(45,737)
General and administrative expenses	(3,286)	(4,742)	(3,366)	(266)	(86)	(61)	(11,807)
Financing income, net	<u> </u>	328	261	3	<u> </u>	1	593
Total expenses	(42,732)	(140,741)	(27,368)	(7,950)	(1,718)	(2,373)	(222,882)
Total comprehensive income (loss) before taxes on income	4,022	(31,566)	2,425	(70)	12	(1,519)	(26,696)

^{*} Other property sectors reflect mainly the results of the property loss insurance sector, which accounts for 100% of the total premiums attributable to these sectors.

^{**} Other liability sectors reflect mainly the results of the third-party insurance sector, which accounts for 46% of the total premiums attributable to these sectors.

Note 4 - Segment Information (cont'd)

	3-month period ended June 30, 2021 (unaudited)						
	Compulsory Motor Vehicle	Motor vehicle Property	Home	Professional liability	Other property sectors*	Other liability sectors*	Total
				NIS thousands			
Gross premiums	49,914	96,188	31,426	23,077	9,362	6,637	216.604
Reinsurance premiums	(669)	-	(3,893)	(21,228)	(9,337)	(5,563)	(40,690)
Premiums in retention	49,245	96,188	27,533	1,849	25	1,074	175,914
Change in balance of unearned premiums, in retention	2,843	4,652	3,131	80	(4)	9	10,711
Premiums earned in retention	52,088	100,840	30,664	1,929	21	1,083	186,625
Gains on investments, net, and financing income	4,939	1,858	795	1,439	131	918	10,080
Commission income	-	-	187	6,932	1,522	1,854	10,495
Total income	57,027	102,698	31,646	10,300	1,674	3,855	207,200
Payments and change in liabilities with respect to insurance							
contracts, gross	(64,078)	(74,813)	(7,718)	(18,676)	(5,267)	(16,312)	(186,864)
Share of reinsurers in payments and change in insurance liabilities with respect to insurance contracts	9,364	<u> </u>	329	16,633	4,989	14,066	45,381
Payments and change in liabilities with respect to insurance contracts, in retention	(54,714)	(74,813)	(7,389)	(2,043)	(278)	(2,246)	(141,483)
Commissions, marketing expenses and other acquisition costs	(8,332)	(18,238)	(8,353)	(6,630)	(1,123)	(1,687)	(44,363)
General and administrative expenses	(2,978)	(4,753)	(2,999)	(221)	(63)	(68)	(11,082)
Financing income (expenses), net		3	(2)	(7)	<u> </u>	(2)	(8)
Total expenses	(66,024)	(97,801)	(18,743)	(8,901)	(1,464)	(4,003)	(196,936)
Total comprehensive income (loss) before taxes on income	(8,997)	4,897	12,903	1,399	210	(148)	10,264

^{*} Other property sectors reflect mainly the results of the property loss insurance sector, which accounts for 100% of the total premiums attributable to these sectors.

^{**} Other liability sectors reflect mainly the results of the third-party insurance sector, which accounts for 39% of the total premiums attributable to these sectors.

Note 4 - Segment Information (cont'd)

	Year ended December 31, 2021 (audited)						
	Compulsory Motor Vehicle	Motor vehicle Property	Home	Professional liability	Other property sectors*	Other liability sectors*	Total
				NIS thousands			
Gross premiums Reinsurance premiums	209,874 (2,878)	421,221	135,374 (13,928)	103,219 (94,802)	37,953 (37,853)	26,990 (23,582)	934,631 (173,043)
Premiums in retention Change in balance of unearned premiums, in retention	206,996 (7,822)	421,221 (24,169)	121,446 (2,872)	8,417 (649)	100 (13)	3,408 (63)	761,588 (35,588)
Premiums earned in retention	199,174	397,052	118,574	7,768	87	3,345	726,000
Gains on investments, net, and financing income Commission income	17,931	6,472	3,045 1,336	5,328 27,964	456 7,028	3,444 6,328	36,676 42,710
Total income	217,105	403,524	122,955	41,060	7,625	13,117	805,386
Payments and change in liabilities with respect to insurance contracts, gross	(258,961)	(336,699)	(367,901)	(45,570)	(15,557)	(36,099)	(730,787)
Share of reinsurers in increase of insurance liabilities and payments with respect to insurance contracts Payments and change in liabilities with respect to insurance	38,125	<u> </u>	652	40,987	15,090	29,140	123,994
contracts, in retention	(220,836)	(336,699)	(37,249)	(4,583)	(467)	(6,595)	(606,793)
Commissions, marketing expenses and other acquisition costs General and administrative expenses Financing income	(32,635) (11,880)	(68,565) (17,336) 657	(32,726) (12,355) 619	(24,209) (972) 15	(4,670) (309)	(5,841) (220) 4	(168,646) (43,072) 1,295
Total expenses	(265,351)	(421,943)	(81,711)	(29,749)	(5,446)	(13,016)	(817,216)
Total comprehensive income (loss) before taxes on income	(48,246)	(18,419)	41,244	11,311	2,179	101	(11,830)
Liabilities for insurance contracts, gross, as at December 31, 2021	935,152	310,885	105,762	307,820	93,934	242,544	1,996,097
Liabilities with respect to insurance contracts, in retention, as at December 31, 2021	757,093	310,885	100,519	36,673	2,032	41,207	1,248,409

^{*} Other property sectors reflect mainly the results of the property loss insurance sector, which accounts for 99% of the total premiums attributable to these sectors.

^{**} Other liability sectors reflect mainly the results of the third-party insurance sector, which accounts for 45% of the total premiums attributable to these sectors.

4.1 Additional information relating to life insurance segment:

Six-month period ended June 30, 2022 (unaudited):	
F	Policies not
	containing
	savings element
	Risk sold as
	single policy
	Private
	NIS thousands
Gross risk premiums	76,806
Payments and change in liabilities with respect to	
insurance contracts, gross	48,787
insurance contracts, gross	10,707
Six-month period ended June 30, 2021 (unaudited):	
	Policies not
	containing
	savings element
	Risk sold as
	single policy Private
	NIS thousands
	N15 mousands
Gross risk premiums	74,325
Payments and change in liabilities with respect to	
insurance contracts, gross	30,424
Three-month period ended June 30, 2022 (unaudited	Policies not containing savings element
	Risk sold as
	single policy Private
	NITC 41 a second state
	NIS thousands
Gross risk premiums	NIS thousands 38,784
Gross risk premiums Payments and change in liabilities with respect to	
•	
Payments and change in liabilities with respect to	38,784 29,543
Payments and change in liabilities with respect to insurance contracts, gross	38,784 29,543 2): Policies not containing
Payments and change in liabilities with respect to insurance contracts, gross	38,784 29,543 29;543 Policies not containing savings element
Payments and change in liabilities with respect to insurance contracts, gross	38,784 29,543 2): Policies not containing
Payments and change in liabilities with respect to insurance contracts, gross	29,543 29,543 Policies not containing savings element Risk sold as
Payments and change in liabilities with respect to insurance contracts, gross	29,543 29,543 Policies not containing savings element Risk sold as single policy
Payments and change in liabilities with respect to insurance contracts, gross	38,784 29,543): Policies not containing savings element Risk sold as single policy Private
Payments and change in liabilities with respect to insurance contracts, gross Three-month period ended June 30, 2021 (unaudited	29,543 29,543 Policies not containing savings element Risk sold as single policy Private NIS thousands

4.1 Additional information relating to life insurance segment (cont'd):

(,	Policies not containing savings element
	Risk sold as single policy
	Private
	NIS thousands
Gross risk premiums	150,095
Payments and change in liabilities with respect to	
insurance contracts, gross	73,306

4.2 Additional information relating to healthcare segment:

Six-month period ended June 30, 2022 (unaudited):

	Long-term	Short-term	Total
	NIS thousands	IS thousands NIS thousands NIS	
Gross premiums	62,732	17,719	* 80,451
Payments and change in liabilities with respect to			
insurance contracts, gross	39,312	13,470	52,782
* Consists primarily of policies issued to individuals			

Consists primarily of policies issued to individuals.

Six-month period ended June 30, 2021 (unaudited):

	Long-term	Short-term	Total	
	NIS thousands	NIS thousands	NIS thousands	
Gross premiums	64,021	3,220	67,241	
Payments and change in liabilities with respect to				
insurance contracts, gross	32,573	539	33,112	

Consists primarily of policies issued to individuals.

Three-month period ended June 30, 2022 (unaudited):

	Long-term	Short-term	Total
	NIS thousands	NIS thousands	NIS thousands
Gross premiums	31,480	12,054	* 43,534
Payments and change in liabilities with respect to			
insurance contracts, gross	22,649	6,819	29,468
* C ' ' ' C ' ' ' 1			

Consists primarily of policies issued to individuals.

Three-month period ended June 30, 2021 (unaudited):

	Long-term	Short-term	Total
	NIS thousands	NIS thousands	NIS thousands
Gross premiums	31,535	3,078	* 34,613
Payments and change in liabilities with respect to			
insurance contracts, gross	16,042	1,351	17,393

Consists primarily of policies issued to individuals.

4.2 Additional information relating to healthcare segment (cont'd):

Year ended December 31, 2021 (audited):

	Long-term	Short-term	Total
	NIS thousands	NIS thousands	NIS thousands
Gross premiums	126,898	16,235	* 143,133
Payments and change in liabilities with respect to			
insurance contracts, gross	67,841	8,201	76,042

^{*} Consists primarily of policies issued to individuals.

Note 5 - Shareholders' Equity and Capital Requirements

A. Capital management and requirements

The policy of the Company is to maintain a strong capital base in order to ensure its solvency and its ability to meet its obligations to policyholders, to preserve the ability of the Company to continue its business activities and to generate yield to its shareholders. The Company is subject to the capital requirements stipulated by the Commissioner. The Board of Directors of the Company has set a target Solvency II-based solvency ratio.

B. Solvency II-based economic solvency regime

- 1. On June 1, 2017, the Commissioner issued a circular on the provisions for implementing a Solvency II-based regime. The provisions of the circular are mostly based on the quantitative tier of the related European directive, adjusted for the Israeli market.
- 2. On July 7, 2019, the Company received the Commissioner's approval of the audit of the capital ratio report that it had submitted pursuant to the guidelines, and is therefore no longer subject to the old Capital Regulations concerning the "minimum capital required" and now fully follows an economic solvency ratio regime.
- 3. The directives of the Commissioner prescribe, inter alia, transitional provisions that allow the gradual deployment of the capital requirements until December 31, 2024.
- 4. According to the Commissioner's guidelines from October 1, 2017 concerning dividend distributions, an insurance company that distributes a dividend is required to deliver to the Commissioner, within 20 business days of the date of distribution, all of the following:
 - An annual profit forecast for the two years following the dividend distribution date;
 - An updated debt service plan of the insurance company approved by the Company's Board of Directors, as well as an updated debt service plan of the holding company that holds the insurance company that was approved by the board of directors of the holding company;
 - An updated capital management plan approved by the Board of Directors of the insurance company, which also includes extensive reference to meeting the repayment ratio target set by the Board of Directors over time;
 - A copy of the minutes of the Board of Directors of the insurance company in which
 the distribution of the dividend was approved, together with the background material
 for the discussion.

Note 5 - Shareholders' Equity and Capital Requirements (Cont'd)

B. Solvency II-based economic solvency regime (cont'd)

5. According to the solvency ratio report as at December 31, 2021, the Company has surplus capital independent of the transitional provisions. See disclosure in Section 3 of the Directors' Report (Solvency II-Based Economic Solvency Regime in Insurance Companies).

The calculation performed by the Company, as above, has been reviewed by the independent auditors of the Company in accordance with ISAE 3400 – The Examination of Prospective Financial Information. This standard applies to the review of the Solvency calculations and is not part of the auditing standards that apply to financial statements.

It is hereby stressed that the forecasts and the assumptions, which served as a basis for the drawing up of the economic solvency ratio report, are substantially based on past experience, as reflected in actuarial studies that are performed from time to time. In view of the capital market, insurance and savings reforms and the changes in the economic environment, past data are not necessarily indicative of future results.

Note 6 - Financial Instruments and Financial Risks

A. Fair value hierarchy:

The various levels of fair value are determined as follows:

- Level 1 fair value measured by use of quoted prices (unadjusted) on an active market for identical instruments.
- Level 2 fair value measured by using observable inputs, direct and indirect, which are not included in Level 1 above.
- Level 3 fair value measured by using inputs that are not based on observable market data.

Fair value measurements of all of the Company's marketable financial investments (excluding non-marketable debt instruments) that are measured at fair value through profit or loss constitute Level 1 assets. Fair value measurements of non-marketable debt assets of the Company that are measured at depreciated cost and the fair value of which is presented for disclosure purposes only (see d(2) above), constitute Level 2.

Pursuant to the aforesaid, during the 6 months ended June 30, 2021, no fair value amounts in respect of financial assets were transferred into or out of the various levels of the hierarchy.

B. The fair value of financial assets and financial liabilities

- The carrying amounts of cash and cash equivalents, premiums collectible, accounts receivable, and accounts payable are identical or close to their fair values.
- For details on the fair value of financial investments, see c. below.

Note 6 - Financial Instruments and Financial Risks (cont'd)

C. Composition of financial investments:

C. Composition of financial investments:	-	20. 2022 / 114	1)
Marketable debt instruments (1)	Measured at fair value through profit or loss NIS thousands 1,832,289	Loans and receivables NIS thousands	Total NIS thousands 1,832,289
Non-marketable debt instruments (2)	-	78,529	78,529
Other (3)	104,441	<u>-</u>	104,441
Total	1,933,790	78,529	2,012,259
	June	e 30, 2021 (unaudite	d)
	Measured at fair value through profit or loss NIS thousands	Loans and receivables NIS thousands	Total NIS thousands
Marketable debt instruments (1)	1,952,612	-	1,952,612
Non-marketable debt instruments (2)	-	76,911	76,911
Other (3)	108,797		108,797
Total	2,061,409	76,911	2,138,320
	Decei	nber 31, 2021 (audit	ted)
	Measured at fair value through profit or loss NIS thousands	Loans and Receivables NIS thousands	Total NIS thousands
Marketable debt instruments (1)	1,903,047	-	1,903,047
Non-marketable debt instruments (2)	-	83,086	83,086
Other (3)	108,370	<u> </u>	108,370
Total	2,011,417	83,086	2,094,503

(1) **Composition of marketable debt instruments** (designated upon initial recognition to the fair value through profit or loss category):

· · · · · · · · · · · · · · · · · · ·	June 30, 2022	
(Unaudited)	(Unaudited)	
Carrying A	mortized	
amount	Cost	
NIS thousands NIS t	housands	
Government bonds 562,632	559,739	
Other debt assets:		
other non-convertible debt assets 1,269,657 1,	284,243	
Total marketable debt assets 1,832,289 1,	843,982	

Note 6 - Financial Instruments and Financial Risks (cont'd)

- C. Composition of financial investments (cont'd):
- (1) **Composition of marketable debt instruments** (designated upon initial recognition to the fair value through profit or loss category) (cont'd):

	June 30, 2021	
	(Unaudited)	
	Carrying amount	Amortized Cost
	NIS thousands	NIS thousands
Government bonds Other debt assets:	716,438	680,392
other non-convertible debt assets	1,236,174	1,203,314
Total marketable debt assets	1,952,612	1,883,706
	December	31, 2021
	(Audi	ted)
	Carrying amount	Amortized Cost
	NIS thousands	NIS thousands
Government bonds Other debt assets:	651,762	625,068
other non-convertible debt assets	1,251,285	1,211,385
Total marketable debt assets	1,903,047	1,836,453

(2) Composition of non-marketable debt instruments:

June 30, 2022	
(Unaudited)	
Carrying	Fair value
NIS thousands	NIS thousands
664	779
77,865	77,922
78,529	78,701
June 30 (Unaud	
Carrying amount	Fair value
NIS thousands	NIS thousands
766	959
76,145	76,453
76,911	77,402
	Carrying amount NIS thousands 664 77,865 78,529 June 30 (Unaud) Carrying amount NIS thousands 766 76,145

Note 6 - Financial Instruments and Financial Risks (cont'd)

- C. Composition of financial investments (cont'd):
- (2) Composition of non-marketable debt instruments (cont'd):

	December 31, 2021	
	(Audited)	
	Carrying amount Fair val	
	NIS thousands	NIS thousands
Bank deposits	798	967
Presented at amortized cost, excluding bank deposits	82,288	82,686
Total non-marketable debt assets	83,086	83,653

(3) **Composition of other financial investments** (designated upon initial recognition to the fair value through profit or loss category):

	June 30, 2022	
	(Unaudited)	
	Carrying amount NIS thousands	Cost NIS thousands
Marketable financial investments	101,441	95,837
	June 30, 2021	
	(Unaudited)	
	Carrying amount	Cost
	NIS thousands	NIS thousands
Marketable financial investments	108,797	95,837
	December	31, 2021
	(Audi	ted)
	Carrying	C
	amount	NIC the second of
	NIS thousands	NIS thousands
Marketable financial investments	108,370	95,837

Note 7 - Contingent Liabilities

There is a general exposure which cannot be evaluated or quantified resulting, inter alia, from the complexity of the services provided by the Company to its policy holders and the frequent changes in regulation. The complexity of these arrangements embodies, inter alia, the potential for arguments pertaining to a long series of commercial and regulatory conditions. It is impossible to anticipate in advance the types of arguments that might be raised in this field, and the exposure resulting from these and other contentions.

In addition, there is a general exposure due to complaints that are filed from time to time with various authorities, such as Supervision, concerning the rights of policy holders under insurance policies and/or the law. These complaints are handled on a current basis by those functions in the Company that oversee customer concerns. The rulings of the authorities on such complaints, to the extent that any ruling is made, are often given across the board. Additionally, in some cases the complaining parties even threaten to initiate legal proceedings in relation to their complaints, including in the form of a petition for certification a class action. At such preliminary stage, the development of such proceedings cannot be assessed and at any rate the potential exposure in their regard or the very initiation of such proceedings cannot be estimated. Accordingly, no provision was created for said exposure.

In the opinion of management of the Company, as to the chances of such proceedings, which is based on the opinion of its legal counsel, the provisions included in the financial statements, where necessary, are sufficient to cover damages from such claims. For proceedings that are at a preliminary stage and their chances cannot be estimated, no provision was included in the financial statements. If compromise is a possibility in any such proceedings, a provision was included in the amount of the potential compromise. The provision included in the financial statements is in an immaterial amount.

A. Motions to certify class actions

1. On June 9, 2016, a motion for certification of a class action was filed against the Company, alleging that the Company did not pay salary and statutory employee benefits as legally required. The class action seeks a total of NIS 9,769 thousand.

The response of the Company to the motion to certify the claim as class action was filed on January 1, 2017. The plaintiffs filed a response on their behalf to the Company response dated June 1, 2017. Concurrently, the plaintiffs filed a motion for discovery of documents. On October 1, 2017, the Company filed its response to the motion for discovery.

A first pretrial hearing on the case was held on February 12, 2018. On July 15, 2018, a ruling was given for the stay of proceedings pending a ruling in an appeal that had been submitted to the High Court of Justice in relation to the ruling of the National Court in another case (Supreme Court Case 5148/18 Or Shacham et al. - National Labor Court and Castro Model Ltd. Hereinafter: "the Castro SC Case") concerning overtime.

The High Court of Justice heard the appeal on November 25, 2020 and on July 11, 2022 ruled that it is permissible to certify a class action for the payment of overtime on commissions or incentives. It further ruled that the matter of the existence of a substantial right would be deliberated within the framework of the class action. This ruling overturns the ruling of the National Labor Court in the same matter, in practice ratifying the ruling of the Regional Labor Court that partially certified the class action. The two other components claimed in the class action (selection of a day off and/or delay in the payment of wages) were not included in the Castro SC Case.

A. Motions to certify class actions (cont'd)

1. (cont'd)

A motion to renew the proceedings in the case has not yet been filed.

In the opinion of the Company's management, which is based on the opinion of its legal counsel, the chances of the class action against the Company being rejected are at least 50%.

2. On January 8, 2017, a petition to certify a class action was filed against the Company and another insurance company (hereinafter: "the respondents").

The petition alleges the overcharging of policy holders and the breach of the enhanced duties of the insurance companies to their policy holders, as reflected in the ability to update age and/or years of driving experience when moving into another age and/or driving experience bracket, which entitle the policy holders to discounted insurance rates.

The claim amount for all class members is estimated at NIS 12,250 thousand. The amount of related to the Company is negligible.

On July 18, 2019, the court accepted the parties' joint motion for a procedural arrangement. Evidentiary hearings were held in October-November 2020. In May 2020, additional evidentiary hearings were held.

On June 28, 2021, the petitioners filed a motion for the amendment of the minutes of the evidentiary hearings held on April 22, 2021 and May 19, 2021. On July 11, 2021, the court accepted the motion.

On February 9, 2022, another evidentiary hearing was held in the case, in which the declarants on behalf of Menora Mivtachim Ltd. testified.

On March 3, 2022, petitioners 1-12 submitted an update notice to the court, pursuant to which, in February 2022 a ruling was issued in PC 48191-07-14 Litvinov vs. Clal, rejecting the motion to certify a class action. The notice also stated that the named plaintiff in the Litvinov vs. Clal case is planning to appeal the ruling to the Supreme Court. In addition, the notice states that the representative of the petitioners believes that it would be appropriate to suspend the proceedings here in the evidentiary hearing stage, pending a ruling by the Supreme Court on the expected appeal in the Litvinov vs. Clal case.

On March 10, 2022, the respondents submitted their response to the petitioners' notice. In their response, the respondents suggest that the upcoming evidentiary hearing will be converted into a pre-trial hearing, in which the update notice of petitioners 1-12 and the derivative issues will be discussed.

A. Motions to certify class actions (cont'd)

2. (cont'd)

On March 16, 2022, the court ruled that the evidentiary hearing that was scheduled for March 20, 2022 will be converted into a pre-trial hearing in which the issue of the suspension of proceedings will be discussed.

A hearing concerning the suspension of proceedings was held on March 20, 2022. The court issued a ruling, suspending the proceedings in the case pending the issue of a ruling on the appeal in the case of Litvinov. The court ruled that these are not similar or identical matters, but noted that. at this stage, the ruling on the appeal that would be submitted has bearing on the proceedings and could have substantial implications on the furtherance of proceedings. Should the proceedings be renewed following the issue of a ruling by the Supreme Court and subject to such ruling, they would pick up from the point on which they were suspended, prior to the testimonies of the defense on behalf of the respondents and subject to necessary changes in light of the Supreme Court's ruling.

On April 26, 2022, the respondents submitted a notification, pursuant to which, on April 25, 2022, an appeal was filed with the Supreme Court regarding the Central District Court's ruling in CA 48191-07-14 Litvinov Vs. Clal Insurance Company Ltd.

In the opinion of the Company's management, which is based on the opinion of its legal counsel, the petition to certify the claim as a class action is more likely to be rejected than accepted.

3. On January 16, 2020, a petition to certify a class action was filed against the Company and 3 other companies (hereinafter: "the respondents").

The petition alleges that the Company does not provide original window panes with Israeli accreditation to policyholders as stipulated in the terms of service concerning windowpanes.

On March 23, 2020, the court accepted the petitioners' motion to amend the certification petition. On October 27, 2020, the Company submitted a statement of response to the certification petition. On December 16, 2020, the petitioners submitted their response to the respondents' response to the certification petition.

A court hearing was held on March 18, 2021. In the hearing it has been determined that the parties will consider, within 45 days, a possible amendment to the relevant clause in the service appendices towards the advancement understandings that will facilitate a consensual termination of the claim.

On July 13, 2021, the petitioners submitted an update notification, pursuant to which the discussions between the parties have not been successful. On October 4, 2021, a hearing was held to examine the reaon for the parties' inability to reach understandings.

On November 2, 2021, the parties submitted another notice, informing the court that the discussions between the parties did not evolve into an understanding and, accordingly, requesting that the court rule on the motions concerning the discovery of documents and questionnaires and a motion to subpena a witness for the presentation of documents.

On December 10, 2021, the court issued a ruling, rejecting substantially all of the motions. The Company was required by the court to answer two questions only and to attach the full agreement with Ilan Car Glass, with the commercial data redacted.

A. Motions to certify class actions (cont'd)

3. (cont'd)

A hearing in the case has been scheduled for September 7, 2022.

In the opinion of the Company's management, which is based on the opinion of its legal counsel, the motion is more likely to be rejected than accepted.

4. On April 19, 2020, a petition to certify a class action was filed against the Company and 11 other companies. The petition alleges that the insurance companies continue to charge full payments and/or fail to refund monies to policy holders in vehicle insurance (compulsory, comprehensive and third party), while many vehicle owners are unable to use their vehicles as a result of the coronavirus crisis. The total amount claimed for all class members in relation to the Company is estimated at NIS 47,000 thousand.

On April 20, 2020, a ruling was given, pursuant to which perusal of the petition suggests that it does not address the personal insurance agreement between each of the class members and the respective insurance company, but rather relates to the general agreement between the entire Israeli population and all insurance companies. Accordingly, the court ordered the petitioners to clarify whether the petition relates to the personal insurance agreements between the class members and their respective insurance companies, or to an alleged general insurance agreement between all policy holders and all 12 insurance companies.

On April 26, 2020, the petitioners notified the court that they have become aware of the filing of two additional claims with two other courts, in connection with the same issues of fact and law. Accordingly, negotiations were held between the representatives of the parties in all three claims for the purpose of transferring the claims to a single court. On April 27, 2020, the petitioners provided additional information, in conformity with the court's ruling from April 20, 2020.

On May 20, 2020, the petitioners filed a motion for a change of venue. On June 4, 2020, the court accepted the motion, transferring the case to the Tel Aviv Court. A hearing was scheduled for January 21, 2021.

Pursuant to the motion to clarify submitted with regard to the topics that are to be discussed at the hearing, on October 12, 2020, the court responded that on the date of the scheduled hearing, the petition will be discussed in accordance with Section 7(B) of the Class Actions Law, 2006. The court also determined that responses to the certification petition are to be submitted by all the respondents within 90 days of a ruling on the petition in accordance with Section 7(B).

On January 11, 2021, in view of the increase in morbidity and the guidelines of the Courts Administration to avoid hearings with multiple participants, the court cancelled the hearing scheduled for January 21, 2021 and determined that a ruling will be issued in accordance with Section 7 of the Law - without a hearing.

A. Motions to certify class actions (cont'd)

4. (cont'd)

On February 22, 2021, a ruling was issued by virtue of Section 7(B) of the Law, pursuant to which the petitioners in this claim and in claim 6 below will jointly deliberate the claim against all of the defendants that they have named and that were also named in claim 5 below concerning vehicle insurance policies. Additionally, claim 5 below, together with the accompanying motion to certify, is dismissed in relation to the vehicle insurance policies, other than in relation to defendant 13 - Libra Insurance Company Ltd. (which has not been named in this claim and in claim 6 below). Additionally, it has been determined that the plaintiff in claim 5 below may continue to pursue his claim concerning home contents insurance against all of the defendants that are named in his statement of claim.

On August 30, 2021, the respondents in CA 3510-04-20, Segal et al vs. Agricultural Insurance - Central Cooperative Society et al (hereinafter: "the Segal Matter") filed a consensual motion for the suspension of hearings until the issue of a peremptory ruling in CA 25472-04-20, CamaMia Textile Ltd. et al vs. Migdal Insurance Company Ltd. et al (hereinafter: "the CamaMia Matter") that is being deliberated at the Haifa District Court, which addresses similar issues to those of the aforesaid proceeding or, to the extent that the ruling is appealed to the Supreme Court - until a ruling is given in the appeal.

On October 5, 2021, the petitioners submitted their position on the motion to postpone the hearing. On October 19, 2021, the court ruled on the motion, ordering the stay of proceedings in the case.

On November 5, 2021, the court issued a ruling, cancelling the hearing that had been scheduled for February 28, 2022, and determining that by said date the parties will submit a notice concerning the outcome of the parallel proceeding (the CamaMia Matter).

On December 6, 2021, the petitioners in the aforesaid proceeding (Nir petition) and in proceeding PC 19832-04-20 (Nachum petition) submitted a notice, informing the court that the representatives of the petitioners, who are also the petitioners in the CamaMia petition, have decided not to appeal the ruling in the CamaMia petition, which eliminates the need for the stay of proceedings in the Nir and Nachum petitions.

Accordingly, the parties submitted a procedural arrangement concerning the dates for the submission of the respondents' response and the petitioners' response to the responses as well as agreed dates for a pretrial hearing.

On April 8, 2022, the respondent submitted its response to the certification petition.

The petitioners' response to the respondents' response is to be submitted by September 30, 2022.

A pretrial hearing in all cases has been scheduled for January 3, 2023.

In the opinion of the Company's management, which is based on the opinion of its legal counsel, the motion is more likely to be rejected than accepted.

A. Motions to certify class actions (cont'd)

5. On April 19, 2020, a petition to certify a class action was filed against the Company and 12 other companies (hereinafter: "the respondents"). The petition alleges that the insurance companies continue to charge full payments and/or fail to refund monies to policy holders in vehicle insurance (compulsory, comprehensive and third party) and in home contents insurance, despite the reduced risk in each of said policies as a result of the global coronavirus crisis. The remedies requested are: requiring the respondents to refund the premiums that they had charged due to the reduction in risk; and ordering the respondents to provide to the petitioners all the data and information that they hold, for the purpose of calculating the exact damage and obtaining appropriate compensation accordingly. The total amount claimed for all class members in relation to the Company is estimated at NIS 35,194 thousand.

On April 26, 2020, it was ruled that, prima facie, there is no justification for the filing of a single action against all defendants, even where the cause of claim is identical and/or similar. Accordingly, the petitioners are required to explain, by May 11, 2020, their reasons for not filing separate claims against each of the defendants. On May 7, 2020, the petitioners submitted their response to the court's question concerning the filing of separate certification petitions against each of the respondents. On May 12, 2020, the court ruled that the matter will be discussed at the pre-trial hearing.

On May 20, 2020, the petitioners in claim no. 4 above and in claim no. 6 below filed a motion for the change of venue in accordance with the provisions of Section 7(A) of the Class Actions Law, 2006. Error! Reference source not found. Error! Reference source not found. On June 3, 2020, the respondents submitted their response to the motion. On June 4, 2020, the court accepted the motion, transferring the case to the Tel Aviv Court, where this petition is now deliberated.

On June 22, 2020, the petitioners in claim no. 9 above and in claim no. 11 below filed a motion to withdraw. On July 21, 2020, the petitioners submitted a notification of their consent to a mediation proceeding.

On July 26, 2020, the respondents submitted their response to the motions of the petitioners in proceeding no. 4 above and in proceeding no. 6 below. On July 21, 2020, the petitioners in proceeding no. 4 above and in claim no. 6 below filed a motion for the setting of a single date for the submission of a response to the responses to the motion, which will not be later than August 5, 2020. On the same day, the court ruled and made a note to this effect.

On August 3, 2020, the respondents informed the court of their objection to the mediation proceeding.

On August 12, 2020, the petitioners in claim no. 4 above and in claim no. 6 below submitted their response to the responses to the motion.

Pursuant to a motion to clarify submitted by the respondents with regard to the topics that are to be discussed at the hearing scheduled for January 21, 2021. On October 12, 2020, the court responded that on the date of the scheduled hearing, the petition will be discussed in accordance with Section 7(B) of the Class Actions Law, 2006. The court also determined that responses to the certification petition are to be submitted by all the respondents within 90 days of a ruling on the petition in accordance with Section 7(B).

On January 11, 2021, in view of the increase in morbidity and the guidelines of the Courts Administration to avoid hearings with multiple participants, the court cancelled the hearing

A. Motions to certify class actions (cont'd)

5. (cont'd)

scheduled for January 21, 2021. A ruling will be issued in accordance with Section 7 of the Law - without a hearing.

On February 22, 2021, a ruling was issued by virtue of Section 7(B) of the Law, pursuant to which proceeding 4 above and proceeding 6 below will be deliberated jointly against all of the defendants that they have named in those proceedings and that were also named in this proceeding concerning vehicle insurance policies. Additionally, the claim of the plaintiff in this claim, together with the accompanying motion to certify, is dismissed in relation to the vehicle insurance policies, other than in relation to defendant 13 - Libra Insurance Company Ltd. (which has not been named in proceeding 4 above and proceeding 6 below). Additionally, it has been determined that the petitioner in this proceeding may continue to pursue the proceeding concerning home contents insurance against all of the defendants that are named in the certification petition.

On April 6, 2021, a joint motion was filed for the certification of the claim as a class action. In April 2021, the respondents submitted their responses to the amendment of the motion to certify the class action.

On April 28, 2021, the petitioners submitted their response to the respondents' responses to the motion for permission to amend the motion to certify the class action.

On June 8, 2021, the court rejected the motion to amend the certification petition and ruled that the petitioners will bear the respondents' expenses in a total amount of NIS 39 thousand.

On August 30, 2021, the respondents in proceeding 3510-04-20 filed a consensual motion for the suspension of hearings until the issue of a peremptory ruling in proceeding 25472-04-20 that is being deliberated at the Haifa District Court, which addresses similar issues to those of the aforesaid proceeding or, to the extent that the ruling is appealed to the Supreme Court - until a ruling is given in the appeal.

On September 15, 2021, a consensual motion was filed by the parties for a suspension of proceedings.

On October 19, 2021, the court ruled on the motion, ordering the suspension of proceedings in the case.

On April 5, 2022, a consensual notification was submitted, pursuant to which, since the certification petition does not include a petitioner that had purchased a home contents insurance from the Company, the arguments in said proceeding concerning home contents insurance are not addressed at the Company and therefore it is not obligated to submit a response to the certification petition.

A pretrial hearing in all cases has been scheduled for January 3, 2023.

In the opinion of the Company's management, which is based on the opinion of its legal counsel, the motion is more likely to be rejected than accepted.

A. Motions to certify class actions (cont'd)

6. On April 20, 2020, a claim and a petition to certify it as a class action were filed against the Company and 7 other companies. These allege that the insurance companies continue to charge full payments and/or fail to refund monies to policy holders in vehicle insurance (compulsory, comprehensive and third party), while many vehicle owners are unable to use their vehicles as a result of the coronavirus crisis. The remedy requested is to order the respondents to refund to the class members the premiums overpaid by them to the respondents, and to order the respondents to refund to the class members the proportion of premiums that would be over paid by them in relation to the actual insurance risk that will apply after the filing of the petition through to the issue of a final ruling. The total amount claimed for all class members in relation to the Company is estimated at NIS 37,285 thousand.

On May 20, 2020, the petitioners filed a motion for the change of venue in accordance with the provisions of Section 7(A) of the Class Actions Law, 2006. On June 3, 2020, the respondents submitted their response to the motion. On June 4, 2020, the court accepted the motion, transferring the case to the Tel Aviv Court.

Pursuant to a motion to clarify submitted by the respondents with regard to the topics that are to be discussed at the hearing scheduled for January 21, 2021. On October 12, 2020, the court responded that on the date of the scheduled hearing, the petition will be discussed in accordance with Section 7(B) of the Class Actions Law, 2006. The court also determined that responses to the certification petition are to be submitted by all the respondents within 90 days of a ruling on the petition in accordance with Section 7(B).

On January 11, 2021, in view of the increase in morbidity and the guidelines of the Courts Administration to avoid hearings with multiple participants, the court cancelled the hearing scheduled for January 21, 2021.

On February 22, 2021, a ruling was issued by virtue of Section 7(B) of the Law, pursuant to which proceeding 4 above and this proceeding will be deliberated jointly against all of the defendants that they have named and that were also named in claim 5 above concerning vehicle insurance policies. Additionally, claim 5 above, together with the accompanying motion to certify, is dismissed in relation to the vehicle insurance policies, other than in relation to defendant 13 - Libra Insurance Company Ltd., which has not been named in claim 4 above and in this claim. Additionally, it has been determined that the plaintiff in claim 5 above may continue to pursue his claim concerning home contents insurance against all of the defendants that are named in his statement of claim.

On August 30, 2021, the respondents in proceeding 3510-04-20 filed a consensual motion for the suspension of hearings until the issue of a peremptory ruling in proceeding 25472-04-20 that is being deliberated at the Haifa District Court, which addresses similar issues to those of the aforesaid proceeding or, to the extent that the ruling is appealed to the Supreme Court - until a ruling is given in the appeal.

On October 19, 2021, the court ruled on the motion, ordering the suspension of proceedings in the case.

On November 5, 2021, the court issued a ruling, cancelling the hearing that had been scheduled for February 28, 2022, and determining that by said date the parties will submit a notice concerning the outcome of the parallel proceeding (concerning CamaMia).

A. Motions to certify class actions (cont'd)

6. (cont'd)

On December 6, 2021, the petitioners in the aforesaid proceeding (Nachum petition) and in proceeding PC 16971-04-20 (Nir petition) submitted a notice, informign the court that the representatives of the petitioners, who are also the petitioners in the CamaMia petition, have decided not to appeal the ruling in the CamaMia petition, which eeliminates the need for the stay of proceedings in the Nir and Nachum petitions.

On April 7, 2022, the respondent submitted its response to the certification petition. The petitioners' response to the respondents' response is to be submitted by September 30, 2022.

A pretrial hearing in all cases has been scheduled for January 3, 2023.

In the opinion of the Company's management, which is based on the opinion of its legal counsel, the motion is more likely to be rejected than accepted.

7. On January 17, 2021, a petition to certify a class action was filed against the Company.

The petition alleges that the Company, as an insurance company that markets, inter alia, structural home insurance, automatically renews the home insurance policies of policy holders without obtaining their consent to the increased insurance premium.

In the petition, the petitioner estimates his personal damage at NIS 1,890 and the amount of the class action against the Company for all class members at more than NIS 2.5 million.

The petitioner is requesting a mandatory injunction for the Company to desist from unilaterally issuing insurance policies that contain a change compared to the previous policy that has been approved by the policy holder and/or where the policy holder has not approved the automatic renewal of the policy, ordering the Company to reimburse to its customers the amounts paid in excess as a result of the unilateral premium and/or deductible rises, unless they have received the policy holder's consent to the change in the policy.

The petitioner also requests that the Company be ordered to compensate the class members by an amount equal to its enrichment from the changes made to the policies of the class members and that the amount of enrichment will reflect the profits derived by the Company, less the reimbursement of amounts collected in excess, and would be linearly distributed among the class members.

On June 15, 2021, the respondent submitted its response to the certification petition. On July 19, 2021, a statement of response was submitted to the response on the certification petition.

On August 2, 2021, the respondent filed a motion, requesting that the court order the petitioner to amend (shorten) his response to the respondent's response in accordance with Regulation 2(G) of the Class Actions Law, 2010. On August 3, 2021, the court ruled on the motion, ordering the petitioner to submit an amended statement of response by September 12, 2021. On September 13, 2021, the petitioner submitted an amended statement of response.

In a hearing held on October 18, 2021 it was determined that, in the event that the parties are unable to reach understandings within 60 days, i.e. by December 19, 2021, the petitioner's representative would be permitted to file a discovery motion within another 30 days.

A. Motions to certify class actions (cont'd)

7. (cont'd)

After several motions to extend, on March 8, 2022 the parties submitted an update notification, pursuant to which they are holding discussions in an attempt to conclude the proceeding outside the court.

On May 12, 2022, the petitioner submitted a list of requests.

On June 23, 2022, the respondent submitted a response to the list of requests.

A pre-trial hearing has been scheduled for October 31, 2022. The requests will be deliberated at the pre-trial hearing.

In the opinion of the Company's management, which is based on the opinion of its legal counsel, at this stage the motion is more likely to be rejected than accepted.

8. On August 5, 2021, a claim and a motion to certify the claim as a class action have been filed against the Company.

The petitioner is a vehicle third party, whose car has been damaged by a vehicle that is insured by the Company. The claim alleges that, in instances where the damage is not actually repaired by the third party, the Company does not indemnify the third party for the full amount of the damage, as specified in the third party's appraiser's report.

The alleged personal damages amount is NIS 662.1, to which the petitioner requested to add cost of wasted time, trouble etc. The petitioner estimates the total class damages at more than NIS 2.5 million (district court jurisdiction).

The parties have agreed to perform a sample in order to assess the potential scope of the class. Within this framework, an external auditor was appointed to audit the data that would be presented by the Company in the sample. The Company has received from the auditor a list of files for review and is currently studying them.

The final date for the submission of a response to the certification motion is September 11, 2022. A court hearing in the case has been scheduled for December 27, 2022.

The findings of the review performed by the Company suggest that the scope of cases, if any, is negligible. Therefore, subject to the confirmation of the findings by the expert appointed by the parties, the assessment is that an arrangement can be reached for compensated withdrawal in a monetary amount that is immaterial to the Company.

9. On April 11, 2022, a civil appeal was filed on the ruling of the District Court that rejects a motion to certify a class action that had been submitted on January 16, 2018 against the Company and other insurance companies by the Civic Trust organization, alleging that the insurers refrain from paying their policyholders and/or third parties the VAT component that applies to the cost of the damages where the claimed damages have not been repaired in practice.

A. Motions to certify class actions (cont'd)

9. (cont'd)

The appeal argues that the court was wrong to determine that the existence of a phenomenon of non-payment of VAT has not been proven; that the court was wrong in not giving weight to the respondents', including the Company, failure to respond with regard to vehicle insurance; that the court was wrong to determine that it is difficult to deliberate the arguments in a class action proceeding; that the court was wrong to determine that the appellant is not suitable as a named plaintiff; and that the court was wrong with regard to the period of limitations, where, according to the appellant, the relevant period is from the date of issue of the Supreme Court's ruling in Civil Appeal 17229/99 Zlucin vs. Diur La'Ole Ltd., issued on June 4, 2001, which determined that, even if no repairs were performed, the respondent (the injurer in that matter) is required to bear the VAT payment.

In accordance with the court's ruling, the case is scheduled to be heard by the Supreme Court on March 13, 2023.

In the opinion of the Company's management, which is based on the opinion of its legal counsel, the appeal is more likely to be rejected than accepted.

	Number of claims	The amount claimed - NIS thousands
Pending petitions for certification of class actions:		
Amount of claim specified	6	141,648
Amount of claim not specified	3	-
Total	9	141,648

B. Pending Claims - claims resolved during the reported period:

1. On September 14, 2017, a petition for the certification of a class action was filed against 13 insurance companies, including the Company (hereinafter: "the respondents"). The petitioners claim that the respondents refrain from adding linkage differences and/or interest to amounts adjudicated by a judiciary instance, this in violation of Section 5(B) of the Adjudication of Interest and Linkage Law, 1961 (hereinafter: "the Law"). They argue that the Law determines that, where the debtor fails to pay it dent on time, the linkage differences, the regular interest and the arrears interest is to be added to such amount commencing on the date on which the debtor is obligated to pay the adjudicated debt through to the actual payment date.

The personal damage of the plaintiff against the Company is negligible. The petitioners, in the absence of precise data regarding the total damage relating to the Company, estimated it at tens of millions of shekels.

On October 10, 2018, the petitioners submitted their response to the Respondents' response to the motion to certify the claim as a class action.

On March 13, 2019, some of the respondents submitted their response, expressing their consent to the court's suggestion to refer the case to mediation. Several mediation sessions have been held since June 26, 2019.

B. Pending Claims - claims resolved during the reported period (cont'd)

1. (cont'd)

On August 4, 2020, the parties submitted an update, informing the court that they have reached understandings concerning the remaining point of contention with respect the arrangement and requesting it to grant the parties a stay to formulate and submit the arrangement, which has been extended from time to time.

In a hearing held on March 7, 2021, the parties have been required to submit their position on several matters that were raised in the hearing.

On May 5, 2021, the parties submitted a notification concerning the amendment of the compromise arrangement. On the same day, the court ordered the parties to publish the notice on the submission of the motion to approve the compromise arrangement in three widely distributed newspapers and to deliver the notice to the Commissioner of the Capital Market, Insurance and Savings and to the Attorney General.

On May 11, 2021, notification was given of the filing of a affidavits by the respondents in support of the arrangement. On May 20, 2021, the court accepted the motion to approve the format of the notification concerning the approval of the compromise arrangement. On July 20, 2021, the parties submitted a notification to the court concerning the publication of the notice regarding the filing of the motion to approve a compromise arrangement in three newspapers.

On December 27, 2021, a hearing was held in a motion to approve a compromise arrangement, in which the court requested supplementary amendments to be made to the compromise arrangement, in the spirit of other amendments that had previously been requested.

On January 6, 2022, the parties submitted a notice on the submission of an amended compromise arrangement.

After several rounds of amendments and corrections to the proposed compromise arrangement, on February 6, 2022, a ruling was issued in approval of the compromise arrangement.

The compromise requires the respondents to take the following actions:

- (1) Amend the wording of the settlement notes to include a provision concerning the date of payment not exceeding 30 days;
- (2) Accept lawyers' confirmations as a substitute for transferring the original signed settlement note i.e., the combination of a clear and legible scanned copy of the signed settlement note + a lawyer's confirmation on the settlement deed + the power of attorney signed by the injured party will serve as a substitute for an original copy of the settlement note.

In addition, as prescribed by the court in the ruling, the definition of the class will be amended such that it will exclude anyone to whom monetary amounts have been adjudicated by a judicial authority based on a judicial ruling on the merits of the claim.

B. Pending Claims - claims resolved during the reported period (cont'd)

1. (cont'd)

As regarding the compensation of the named plaintiff and its representatives, the Company will pay a total amount of NIS 47 thousand, of which NIS 4 thousand as compensation to claimant 13 and NIS 43 thousand as fees to the claimant's representatives.

In accordance with the ruling, the parties had an ad published in the newspapers concerning the approval of the compromise arrangement and on July 6, 2022 the respondent submitted a notification concerning the execution of the compromise arrangement.

This claim did not have a material effect on the financial statements of the Company.

2. On December 31, 2019, a petition to certify a class action was filed against the Company and IMA. The petitioner, who had purchased an AIG Travel insurance policy from the Company and was injured during a ski vacation in France, alleges that the Company is in breach of its duties of disclosure to the customers, by failing to disclose that the policy does not include coverage for follow-up treatment in Israel; the petitioner argues that this is not specified in the policy (as an exclusion) and was also not disclosed to him verbally in his conversations with the IMA emergency call center operating on behalf of the Company. It is also alleged that the Company does not deliver the complete terms of the insurance policy to its policyholders.

The petitioner estimates his personal damage at NIS 35 thousand and the damage for all class members (based on an estimated 20 cases per year, over seven years) at NIS 4,900 thousand (alternatively, compensation of NIS 5 per day overseas for each of the policyholders – NIS 8,750 thousand). It has further been requested that the Company be required to provide proper disclosure regarding this coverage and to deliver the complete insurance policy to policyholders.

On November 18, 2020, the court approved a consensual procedural arrangement between the parties. Pursuant to the arrangement, the petitioner was permitted to add several documents to his claim and on December 15, 2020 the insurer submitted a supplementary response that addresses several of the claims raised in the petitioner's response. Within this framework, the parties also agreed to schedule a brief one-hour examination of each of the declarants.

In November 2021, before the evidentiary stage, an agreement has been reached, pursuant to which the petitioner withdraws the motion to certify a class action, with no adjudication of costs. On January 6, 2022, the court approved the withdrawal.

Note 8 - Additional Events in the Reporting Period

The Company operates in an economic environment that is affected, inter alia, by the change in the risk-free interest rate curve. The increase in the interest curve during the reporting period has reduced the insurance liabilities in those general insurance segments in which the liabilities are calculated in accordance with the Commissioner's position as to the best practice.

The negative interest curve in the reporting period reduced the insurance liabilities by NIS 46.5 million, stemming mainly from the compulsory vehicle insurance segment (NIS 41.6 million). The negative interest curve in the second quarter of 2022 reduced the insurance liabilities by NIS 28.1 million, stemming mainly from the compulsory vehicle insurance segment (NIS 25.2 million).