AIG Israel Insurance Company Ltd

Interim Financial Report

(Unaudited)

As of September 30, 2024

Contents

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Directors' report AIG Israel Insurance Company Ltd ("the Company") for the period ended September 30, 2024

The directors' report on the business of the Company as of June 30, 2024 ("the directors' report"), reviews the Company and developments in its business in the first three quarters of 2024("the reported period"). The information in this report is as of September 30, 2024 ("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 2023 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 of the Company may be different than those presented as forward-looking information 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", "expected", 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:

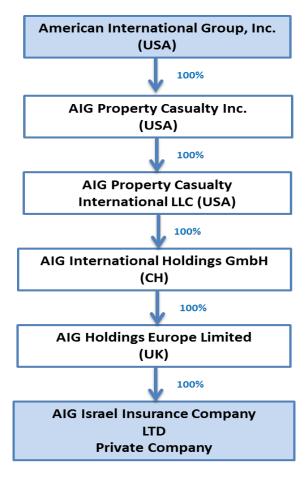
1.1 Organizational structure

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 insurance
 Health insurance: health insurance

• Life insurance: Life insurance, risk only

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 2023, insurance fees from the general insurance business amounted to NIS 27.5 billion; the share of the 6 largest insurance companies — Harel, Phoenix, Clal, Menorah, Ayalon and Migdal — was NIS 18.3 billion, or 66% 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 2023 periodic report.

Material events in the reported period

1. On October 7, 2023, a surprise attack was launched on Israel from the Gaza Strip by terrorist organizations. Consequently, the Government of Israel declared a state of war - "Swords of Iron", which initially focused primarily on fighting the Hamas terrorist organization in Southern Israel and in the Gaza Strip, but was later followed by an escalation of the security situation on Israel's northern border with Lebanon. The intense fighting persists both on the Gaza front and the northern front, and in April 2024 Israel's conflict with Iran escalated, also evolving into fighting in Lebanon, with more frequent and intense firing of rockets into additional regions in Israel (hereinafter - "War Event").

As to the effect of the War Event on the Company's results for 2023, see Section 1 to Chapter B (Board of Directors' Report) in the 2023 periodic report and Section 2 of the Board of Directors' report for the period ended June 30, 2024.



In the reported period, the War Event did not materially affect the results of the Company, with the exception of a significant reduction in overseas travel premiums in the health insurance segment as a result of the reduction in overseas travel by Israelis due to the War Event.

This is an evolving event involving significant uncertainty and financial implications on the economy as a whole. Therefore, to the date of the report, the Company is unable to assess the extent of the war's impact on its business activity and its future results. The Company continuously monitors the related developments and their effects on its activity and results.

- 2. In March 2024, the Knesset passed the Value Added Tax Order (Rate of Tax for Non-Profits and Financial Institutions) (Amendment), 2024 (hereafter "the Order"), pursuant to which, commencing on January 1, 2025, the rate of Wages Tax and Profit Tax payable for any activity of a financial institution in Israel will be 18% of the wages paid and the profit generated, instead of the current 17%. The effect on the Company's deferred taxes is immaterial.
- 3. On September 17, 2024, Mr. Thomas Lillelund stepped down from his office as a director and Chairman of the Board of Directors of the Company. Accordingly, the Company is taking actions to appoint a new chairman for the Board of Directors.
- 4. On June 24, 2024, AIG Global Corporation entered into an agreement for the sale of overseas travel insurance operations in the Group to the Zurich Group, which will take effect on December 2, 2024. At this stage, the Company will continue to act as insurer for the overseas travel insurance operations in Israel and will transfer 100% of the premiums as reinsurance premiums (through a member company of AIG Global Corporation) to Zurich Group, which will bear the full cost of the claims with the addition of reimbursement of expenses and a commission, in accordance with the account-settling mechanism that will be determined.

Developments in the Company's macro-economic environment

In 2023, the Bank of Israel interest rate was raised several times, up to a record rate of 4.75%. In January 2024, the Bank of Israel decided on a 0.25% reduction of the interest rate, and in February, April, May, July and October 2024 the Bank decided to maintain the interest rate. To the date of the report, the interest rate is 4.5%.

The latest forecast of the Bank of Israel¹ was formulated based on the assumption that the direct economic effect of the "Swords of Iron" War will persist through to the beginning of 2025. This assumption reflects more intense fighting at the end of 2024 and the beginning of 2025 compared to the underlying assumption of the Bank of Israel forecast published in July 2024 (hereinafter: "**the July Forecast**")2, and more particularly, the high intensity that has characterized the recent period is expected to persist in the near future, with a broader disruption of the economic activity on the Homefront, mainly in northern Israel. The aforesaid forecast is characterized by particularly high uncertainty. Accordingly, the Bank of Israel has updated, inter alia, the growth forecast and the forecast of the inflation and interest. According to the Bank of Israel's updated forecast, GDP is expected to grow at a rate of 0.5% in 2024 and 3.8% in 2025 (compared to 1.5% in 2024 and 4.2% in 2025 as per the July Forecast). The inflation rate in the upcoming four quarters (ending in the third quarter of 2025) is expected to reach 3.2%, inter alia due to the local inflationary environment being than anticipated in the July Forecast, among others, due to the updating of the assumptions regarding the intensity of the war. The inflation rate in 2024 is expected to reach 3.8% (compared to 3.0% as per the July Forecast) and 2.8% in 2025 (unchanged from the July Forecast). In the third quarter of 2025, the interest rate is expected to remain at 4.5%.

In 2024, three international rating agencies announced the downgrading of the State of Israel's credit rating, inter alia, on the backdrop of the escalation of the geopolitical risks as a result of the ongoing fighting. In February 2024, Moody's announced the downgrading of the credit rating from "A1" to "A2" and the downgrading of the outlook to negative, and in September 2024, Moody's announced a further downgrading of the credit rating by two brackets to "Baa1", maintaining the negative outlook. In April 2024, international rating agency, S&P, announced the downgrading of Israel's credit rating from "AA+/A-1" to "A+/A-1", maintaining the negative outlook, and in October 2024, S&P announced a further downgrading of the rating to "A", again maintaining the negative outlook. In August 2024, international rating agency, Fitch, announced the downgrading of Israel's credit rating to "A" and changing the outlook to "negative".

² For information on the July Forecast, see section 2 to the Board of Directors' Report for the period ended June 30, 2024.

¹ The macroeconomic forecast of the Research Division from October 9, 2024.



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

	Jan- Sept. 2024	Jan- Sept. 2023	July- Sept. 2024	July- Sept. 2023	2023
Government bonds indexes			_		
General government bonds Linked government bonds NIS government bonds	0.0% 0.3% (0.2%)	(0.8%) (1.0%) (0.6%)	2.3% 3.1% 1.8%	(1.7%) (2.6%) (1.0%)	0.6% (0.5%) 1.4%
Corporate bonds indexes					
Tel Bond 60 Tel Bond NIS	3.6% 2.2%	2.9% 1.4%	2.5% 1.6%	0.1% 0.4%	5.2% 5.2%
Share indexes					
Tel-Aviv 125 S&P 500	12.2% 20.8%	4.1% 11.7%	8.3% 6.7%	5.4% (3.6%)	4.8% 24.2%

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, see Section 4.3 in Chapter A (description of company's business) in the Company's 2023 periodic report.

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

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:

Circulars

- In July 2024, "Amendment to the Provisions of the Consolidated Circular Concerning the Measurement of Liabilities Updating of the Set of Demographic Assumptions in Life Insurance and in the Pension Funds" was published, which contains updated default assumptions that insurance companies are required to use in their calculation of the retirement-date annuity rates in life insurance policies and to perform quarterly calculations of the liabilities with respect to life insurance policies that allow for the receipt of annuities at guaranteed conversion rates based on up-to-date demographic assumptions.
- In August 2024, the Commissioner published a circular concerning the contesting of a payment demand for First-Shekel surgical procedures, which prescribes provisions for the contesting by an insurance company of a payment obligation to an HMO by virtue of the Supervision of Financial Services (Insurance) Law, 1981, with respect to surgical procedures performed and financed under the HMO's AHSP plan, where the policyholder holds a First-Shekel surgical insurance policy, and the insurance company believes that such insurance policy does not cover the surgical procedure that is the subject of the HMO's payment demand. According to the circular, the Capital Market Authority will review the insurance company's claim and update the HMO thereof, and, after studying the arguments, the Capital Market Authority will inform the company and the HMO of its decision.
- In September 2024, an amendment was published to the provisions of the consolidated circular, "Management of Investment Assets Rules for Investment of the Assets of an Insurance Company". The amendment, inter alia, updates definitions due to the cancellation of the Supervision of Financial Services Regulations (Insurance) (Minimum Equity Required of an Insurer), 1998, and introduces rules for the investment of the assets of an insurance company against liabilities that are not yield-dependent. These rules include, inter alia,



principles for the management of investments and assets, provisions for the management of the liquidity risk, provisions for the classification of liabilities and the holding of assets against such liabilities, quantitative limits for investment in assets in relation to various types of liabilities and in relation to equity, restrictions on the control and holding of means of control by an insurance company, restrictions on investment in an insurance company, restrictions on investments in related parties and transactions with related parties, and set a higher investment in relation to equity limit of 40% as well as provisions for investments against certain types of liabilities. In addition, the circular adjusts the provisions concerning the volume of assets that are required to be provided against certain types of liabilities and equity for insurance companies that will implement International Financial Reporting Standard (IFRS) No. 17, and establishes provisions for the holding of assets against certain types of liabilities, inter alia, due to the anticipated creation of new assets in the statement of financial position as a result of the implementation of said standard.

In November 2024, an amendment to the provisions of the consolidated circular concerning the compulsory vehicle sector was published, which updates the net insurance premiums in the managing corporation of the Pool for Compulsory Vehicle Insurance Ltd. (hereinafter" "the Pool"), this in order to adjust the net insurance premiums in the Pool to the insured risk, which is based on the recommendations of the operator of the statistical database in the compulsory vehicle insurance sector, as published in the final report for the assessment of the cost of the pure risk in the compulsory vehicle insurance sector for 2022. The aforesaid update shall apply to the net insurance premiums in the Pool for private and commercial vehicles up to 3.5 tons and for motorcycles. It also updates the net insurance premiums in the Pool, such that a rate of 0.95% will be deducted from said premiums as a result of the updating of the overall account-settlement rate between the Pool and the National Insurance Institute of Israel from 10% to 10.95% as from January 1, 2025, this pursuant to the amendment of Section 328A of the National Insurance Law [Combined Version], 1995 and the institution of a mechanism for the settling of accounts with respect to car accident claims between the National Insurance Institute of Israel and the Pool and insurance companies. The circular will apply to compulsory vehicle insurance policies that come into effect on January 1, 2025 and thereafter.

Drafts

- In October 2024, a draft amendment to the provisions of the consolidated circular concerning economic solvency regime was published, which proposes to adjust the provisions of Mark A, "Accounting Solvency Regime" in Part 2, "Equity of an Insurance Company", to Part 2 of Volume 5 of the consolidated circular concerning the new format of measurement under International Financial Reporting Standard (IFRS) NO. 17 Insurance Contracts (hereinafter: "IFRS 17" or "the Standard") by insurance companies (such as the Company) that are expected to implement the provisions of the Standard and that are not subject to the provisions of the Economic Solvency Regime, and to set the capital requirements that shall apply to them. The draft proposes, inter alia, to update the capital requirements. According to the draft, the updated circular will take effect on the effective date of IFRS 17, January 1, 2025, i.e. commencing in the financial statements as at March 31, 2025.
- In October 2024, Draft National Insurance Regulations (Capitalization), 2024, was published, which aims to update the interest rate to 3% (instead of 2%), in accordance with the Supreme Court's Ruling (CA 3751/17 Israeli Vehicle Insurance Pool Vs. John Doe et al (dated 8.8.19)).1 It is further proposed to update the actuarial life tables and to institute a mechanism for updating the actuarial life tables every four years. The draft further proposes to update the General Disability Table and to establish a separate actuarial life table for those assigned a general disability status.

For additional information on the aforesaid ruling, see Note 27(e)(d)(g) to the Company's financial statements for 2023.



Legislation/Bills/Regulations

In September 2024, an amendment was approved to the Supervision of Financial Services Regulations (Provident Funds) (Rules of Investment Applicable to Public Institutions), 2012, on the backdrop of the publication of Draft Insurance Circular 2020-106, "Rules for the Investment of the Assets of an Insurance Company Against Liabilities That Are Not Yield-Dependent" (7.6.2021) and a second draft of said circular (18.9.2022) ("the Circular Drafts") by the Commissioner in relation to rules for the investment of the assets of an insurance company against liabilities that are not yield-dependent, the provisions of which are expected to supersede part of the provisions of the aforesaid regulations as regarding an insurer's investments against liabilities that are not yield-dependent. The aforesaid amendment clarifies that regulations enacted prior to the amendment taking effect, in relation to matters for which the Commissioner has been conferred the authority to issue directives, will remain in effect unless cancelled or superseded by directives of the Commissioner.

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

Following are principal balance sheet data (NIS thousands):

	<u>September 30,</u> <u>2024</u>	<u>September 30, 2023</u>	<u>December 31, 2023</u>
Other assets	499,802	532,886	490,190
Deferred acquisition expenses	217,065	204,830	201,967
Financial investments and cash	2,761,852	2,274,003	2,381,308
Reinsurance assets	795,701	754,030	761,368
Total assets	4,274,420	3,765,749	3,834,833
Equity	977,995	829,783	866,204
Liabilities in respect of insurance contracts	2,809,335	2,505,086	2,500,045
Other liabilities	487,090	430,880	468,584
Total equity and liabilities	4,274,420	3,765,749	3,834,833

Following are principal comprehensive income data (NIS thousands)

	Jan-Sept. 2024	Jan-Sept. 2023	July-Sept. 2024	July-Sept. 2023	Jan- December 2023
Gross earned premiums	1,335,366	1,134,975	468,540	404,062	1,543,455
Premiums earned by reinsurers	(180,574)	(180,089)	(60,477)	(61,148)	(245,036)
Premiums earned in retention	1,145,792	954,886	408,063	342,914	1,298,419
Gains on investments, net and financing income	95,525	70,034	49,483	15,644	113,716
Income from commissions	44,230	41,857	13,153	13,912	56,028
Total revenue	1,294,547	1,066,777	470,699	372,470	1,468,163
Payments and change in liability for insurance contracts, in retention	(820,905)	(732,050)	(305,912)	(249,278)	(974,619)
Total other expenses	(303,047)	(281,646)	(103,588)	(95,422)	(384,420)
Income before taxes on income	170,595	53,081	61,199	27,770	109,124
Taxes on income	(58,804)	(18,166)	(20,836)	(9,650)	(37,788)
Income for the period and total comprehensive income for the period	111,791	34,915	40,363	18,120	71,336



Capital and capital requirements

As at September 30, 2024, equity amounted to NIS 978.0 million, as compared to NIS 866.2 million as at December 31, 2023. The change in equity in the reported period is due to a comprehensive income of NIS 111.8 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 2023. On November 19, 2024, in accordance with the directives of the Commissioner, the Company published the economic solvency ratio report for the June 30, 2024 data on its website.

Presented below are data concerning solvency ratio and MCR:

Solvency ratio (NIS thousands):

·	June 30,	December 31,
	2024	2023
Equity for purposes of solvency capital requirement	1,031,086	954,963
Solvency capital requirement	815,091	750,829
Surplus	215,995	204,314
Economic solvency ratio (%)	126%	127%

No equity transactions or material events with a direct effect on the Company's economic solvency ratio took place in the reported period. In the assessment of the Company, as of the publication date, the War Event has no material effect on the Company's solvency ratio. 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):

	June 30, 2024	December 31, 2023
Minimum capital requirement (MCR)	302,445	276,465
Equity for purposes of MCR	1,031,086	954,963

In accordance with the directives of the Commissioner, an insurance company may only distribute a dividend if, after the distribution, the company maintains a minimum solvency ratio of 100%, calculated without the transitional provisions and subject to the solvency ratio target determined by the company's Board of Directors. In addition, requirements for related reports to the Commissioner have been prescribed. In accordance with the Company's capital management policy, as approved by the Company's Board of Directors, which includes a policy for the distribution of dividends, the Company may distribute a dividend to its shareholders if its solvency ratio exceeds 130%, subject to certain conditions, as set out in the Company's procedure.



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

	June 30,	December 31,
	2024	2023
Equity for purposes of solvency capital requirement	1,031,086	954,963
Solvency capital requirement	857,991	790,346
Surplus	173,095	164,617
Economic solvency ratio (%)	120%	121%
Surplus (deficiency) in relation to the Board of Directors' target		
Board of Directors' economic solvency ratio target (%)	130%	130%
Deficiency in relation to target	(84,302)	(72,487)

The calculation performed by the Company as at June 30, 2024 has been reviewed by the independent auditors of the Company in accordance with the principles of ISAE 3000 - Assurance Engagements Other Than Audits or Reviews of Historical Financial Information. The calculation performed by the Company as at December 31, 2023 has been audited by the independent auditors of the Company in accordance with ISAE 3400. For additional information on the solvency ratio, see 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 increased by 15.8% compared to the volume of gross premiums in the corresponding period. The Company's total gross premiums amounted to NIS 1,478 million in the reported period, as compared to NIS 1,276 million in the corresponding period in 2023. The increase in gross premiums in the reported period stems mainly from the vehicle property insurance and compulsory vehicle insurance sectors.

Total premiums in retention amounted to NIS 1,297 million in the reported period, as compared to NIS 1,084 million in the corresponding period in 2023, an increase of 19.7%. The increase in premiums in retention in the reported period stems mainly from the vehicle property insurance and compulsory vehicle insurance sectors.

Premiums by principal operating segments (NIS thousands):

	Life	Health	General	
Jan-sept. 2024	insurance	insurance	insurance	Total
Gross	125,101	135,831	1,217,559	1,478,491
In retention	99,406	132,690	1,064,897	1,296,993
% of total gross	8.5	9.2	82.3	100.0
% of retention	7.7	10.2	82.1	100.0

	Life	Health	General	
Jan-Sept. 2023	insurance	insurance	insurance	Total
Gross	121,352	145,374	1,009,493	1,276,219
In retention	95,809	142,635	845,373	1,083,817
% of total gross	9.5	11.4	79.1	100.0
% of retention	8.8	13.2	78.0	100.0



	Life	Health	General	
Jan-December 2023	insurance	insurance	insurance	Total
Gross	162,323	185,922	1,301,705	1,649,950
In retention	128,474	182,220	1,092,811	1,403,505
% of total gross	9.8	11.3	78.9	100.0
% of retention	9.2	13.0	77.8	100.0

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

	Jan-Sept. 2024	Jan-Sept. 2023	July-Sept. 2024	July-Sept. 2023	Jan-Dec 2023
Income (loss) from compulsory vehicle			()		0 .
insurance	2,506	10,539	(711)	9,927	14,825
Income (loss) from vehicle property insurance	103,998	(20,431)	34,027	(2,897)	(4,158)
Income from home insurance	1,592	3,533	6,818	1,845	4,196
Income (loss) from health insurance	(10,602)	4,683	(3,711)	5,804	8,542
Income from life insurance	12,283	11,335	3,732	3,706	17,809
Income from commercial insurance	13,744	6,958	2,546	3,416	12,751
Other - Income not allocated to any segment	47,074	36,464	18,498	5,969	55,699
Income before taxes on income	170,595	53,081	61,199	27,770	109,124
Taxes on income	(58,804)	(18,166)	(20,836)	(9,650)	(37,788)
Income for the period and total comprehensive income for the period	111,791	34,915	40,363	18,120	71,336

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 income of the Company amounted to NIS 111.8 million in the reported period, as compared to income of NIS 34.9 million in the corresponding period in 2023. Pre-tax profit in the reported period amounted to NIS 170.6 million, as compared to profit of NIS 53.1 million in the corresponding period in 2023. The main contributors to the profit in the reported period are net investment gains of NIS 95.5 million and an underwriting profit of NIS 71.3 million, deriving mainly from the underwriting profit in the vehicle property insurance sector.
 - The comprehensive income of the Company amounted to NIS 40.4 million in the third quarter, as compared to a comprehensive income of NIS 18.1 million in the corresponding quarter in 2023. Pre-tax profit in the third quarter amounted to NIS 61.2 million, as compared to a profit of NIS 27.8 million in the corresponding quarter in 2023. The underwriting profit of the Company in the third quarter of 2024 amounted to NIS 12.7 million, as compared to an underwriting profit of NIS 12.1 million in the third quarter of 2023.
- b. Net investment gains amounted to NIS 95.5 million in the reported period, as compared to investment gains of NIS 70.0 million in the corresponding period in 2023. The net investment gains in the reported period derived mainly from price hikes on the financial markets, in Israel and globally, and in particular in the Israeli corporate bonds market. For additional information, see Section 2 above.
- c. The profit of the Company from vehicle property insurance in the reported period was NIS 104.0 million, as compared to a loss of NIS 20.4 million in the corresponding period in 2023. The underwriting profit of the Company from vehicle property insurance in the reported period was NIS 89.4 million, as compared to an underwriting loss of NIS 28.7 million in the corresponding period in 2023. The transition to underwriting profit in the reported period was due to a significant reduction in the claims' ratio, mainly as a result of ongoing actions taken by the Company, consisting primarily of the raising of tariffs, in order to regain profitability in the sector. Further to the improvement in the underwriting results, in the reported period the Company released the full provision for premium deficiency in an amount of NIS 26.9 million.
 - In the third quarter of 2024, the profit of the Company from vehicle property insurance was NIS 34.0 million, as compared to a loss of NIS 2.9 million in the corresponding quarter in 2023. In the third quarter of 2024, the underwriting profit of the Company from vehicle property insurance was NIS 25.6 million, as compared to an underwriting loss of NIS 5.5 million in the corresponding quarter in 2023. The transition to underwriting profit in the reported period was due to the significant reduction in the claims' ratio, as described above.
- d. The profit of the Company from compulsory vehicle insurance in the reported period was NIS 2.5 million, as compared to a profit of NIS 10.5 million in the corresponding period in 2023. The decrease in profit was due mainly to the significant rise in the claims' ratio in the reported period. This increase was counteracted by an increase of NIS 7.0 million in investment gains in the reported period compared to the corresponding period. The pool losses, excluding the effect of the interest curve, amounted to NIS 11.9 million in the reported period, as compared to NIS 12.4 million in the corresponding period last year.
 - In the third quarter, the loss of the Company from compulsory vehicle insurance totaled NIS 0.7 million, as compared to a profit of NIS 9.9 million in the corresponding period in 2023. The transition to loss was due to a significant increase in the claims' ratio in the reported period.
- e. The profit of the Company from home insurance in the reported period was NIS 1.6 million, as compared to profit of NIS 3.5 million in the corresponding period in 2023. The underwriting loss of the Company from home insurance in the reported period was NIS 2.2 million, as compared to an underwriting profit of NIS 0.6 million in the corresponding period in 2023. The transition to an underwriting loss in the reported period was due to an increase in the claims' ratio, mainly as a result of the increased coverage cost of earthquake reinsurance and the reduced retention ratio.
 - In the third quarter of 2024, the profit of the Company from home insurance was NIS 6.8 million, as compared to a profit of NIS 1.9 million in the corresponding period in 2023. In the third quarter, the underwriting profit of the Company from home insurance was NIS 4.8 million, as compared to an underwriting profit of NIS 1.0 million in the corresponding period in 2023. The increase in the underwriting profit in the third quarter was due to the reduced claims' ratio.



- f. The loss of the Company from health insurance amounted to NIS 10.6 million in the reported period, as compared to a profit of NIS 4.7 million in the corresponding period in 2023. The underwriting loss from health insurance in the reported period was NIS 13.6 million, as compared to a profit of NIS 2.7 million in the corresponding period in 2023. The transition to loss in the reported period was due mainly to an increase in the claims' ratio in the overseas travel insurance and personal accidents sectors, as well as to a reduction in premiums in the overseas travel insurance sector as a result of the War Event (see Section 2 above).
 - The loss from health insurance in the third quarter amounted to NIS 3.7 million, as compared to a profit of NIS 5.8 million in the corresponding period last year. The underwriting loss from health insurance in the third quarter was NIS 5.4 million, as compared to a profit of NIS 5.2 million in the corresponding quarter in 2023. The transition to loss in the third quarter of 2024 was due mainly to the increase in the claims' ratio in the overseas travel insurance and personal accidents sectors, as well as to a reduction in premiums in the overseas travel insurance sector as a result of the War Event (see Section 2 above).
- g. The profit of the Company from life insurance in the reported period was NIS 12.3 million, as compared to a profit of NIS 11.3 million in the corresponding period in 2023.
 - In the third quarter of 2024, the profit of the Company from life insurance was NIS 3.7 million, similar to the corresponding period last year.
- h. The profit of the Company from professional liability insurance in the reported period was NIS 12.5 million, as compared to a profit of NIS 6.5 million in the corresponding period in 2023. The increase in profit in the reported period was due both to the increase in the underwriting profit as a result of the reduction in the claims' ratio.
 - In the third quarter of 2024, the profit from professional liability insurance was NIS 3.4 million, as compared to a profit of NIS 2.5 million in the corresponding quarter last year. The increase in profit in the third quarter of 2024 was due to the increase in investment gains.
- i. The loss of the Company from other property insurance in the reported period was NIS 1.2 million, as compared to a profit of NIS 0.9 million in the corresponding period in 2023. The transition to loss in the reported period was due mainly to the higher underwriting loss in the reported period as a result of an increase in the expenses' ratio.
 - The loss of the Company from other property insurance in the third quarter of 2024 was NIS 0.8 million, as compared to a profit of NIS 0.7 million in the corresponding quarter last year.
- j. The profit of the Company from other liability insurance amounted to NIS 2.5 million in the reported period, as compared to a loss of NIS 0.4 million in the corresponding period in 2023. The transition to profit in the reported period was due mainly to the increase in the underwriting profit, mainly as a result of the reduction in the claims' ratio.
 - In the third quarter of 2024, the loss from other liability sectors was NIS 0.1 million, as compared to a profit of NIS 0.3 million in the corresponding quarter last year.



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

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

	Jan-Sept. 2024	Jan- Sept. 2023	July- Sept. 2024	July- Sept. 2023	Jan-Dec 2023
Vehicle property	89,386	(28,738)	25,583	(5,457)	(18,016)
Home	(2,239)	640	4,793	1,007	(249)
Other property sectors	(1,616)	501	(1,095)	468	903

b. Principal data regarding the claims' ratio¹ (Loss Ratio "LR") and the claims' and expenses' ratio (Combined Ratio "CR"):

	Jan-Sep	Jan-Sept. 2024		Jan- Sept. 2023		ec 2023	
	LR%	CR%	LR%	CR%	LR%	CR%	
Vehicle property:							
Gross	68%	85%	88%	107%	83%	103%	
In retention	68%	85%	88%	107%	83%	103%	
Property ² :							
Gross	45%	75%	47%	76%	45%	75%	
In retention *	63%	104%	60%	99%	59%	99%	

	Apr-Jui	ne 2024	Apr- June 2023		
	LR%	CR%	LR%	CR%	
Vehicle property:					
Gross	71% 88%		86%	103%	
In retention	71%	88%	86%	103%	
Property ² :					
Gross	35% 63%		53%	81%	
In retention *	50%	89%	57%	95%	

5. Cash flows and liquidity

Net cash provided by operating activities in the reported period was NIS 22.9 million, compared to NIS 86.3 million in the corresponding period in 2023.

Net cash used in investing activities in the reported period amounted to NIS 22.5 million, compared to NIS 19.7 million in the corresponding period in 2023.

Net cash used in financing activities in the reported period amounted to NIS 4.3 million, as compared to NIS 4.2 million in the corresponding period in 2023.

As a result of the above, the balance of cash and cash equivalents in the reported period decreased by NIS 4.5 million and amounted to NIS 139.2 million as at September 30, 2024.

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.

¹ 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.

² Home and other property sectors.



7. <u>Material events subsequent to the date of the financial statements:</u>

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 September 30, 2024, 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 employees and managers of the Company for their dedication and contribution to the business results of the Company.

Roberto Nard	Yfat Reiter
Director	CEO
November 19, 2024	



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 September 30, 2024 (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.



November 19, 2024



Declaration

I, Usher Gray hereby declare that:

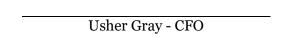
- I reviewed the interim report of AIG Israel Insurance Company Ltd. (hereafter "the insurance company") for the quarter ended September 30, 2024 (hereafter "the report").
- 2. Based on my knowledge, the report does not include any misstatement of a material fact or omit to disclose a material fact the 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:
 - a. 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.



November 19, 2024



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 September 30, 2024, 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 September 30, 2024 the internal control of the Insurance Company over financial reporting is effective.

Usher Gray	Yifat Reiter	Roberto Nard
CFO	CEO	Director

Date of approval of financial statements: November 19, 2024

AIG Israel Insurance Company Ltd.

Interim Financial Information (Unaudited) As at September 30, 2024

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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 September 30, 2024 and the condensed statements of profit or loss and other comprehensive income, changes in equity and cash flows for the nine- 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 directives prescribed by the Commissioner of the Capital Market, Insurance and Savings in conformity with the Supervision of Financial Services (Insurance) Law, 1981, as described in Note 2. 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, concerning '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 the directives prescribed by the Commissioner of the Capital Market, Insurance and Savings in conformity with the Supervision of Financial Services (Insurance) Law, 1981, as described in Note 2 to the financial information.

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.)

November 19, 2024

	September 30, 2024	September 30, 2023	December 31, 2023
	(Unaudited)	(Unaudited)	(Audited)
	NIS thousands	NIS thousands	NIS thousands
Assets:			
Intangible assets	36,932	27,341	29,623
Deferred acquisition costs	217,065	204,830	201,967
Property and equipment	13,373	21,242	18,623
Reinsurance assets	795,701	754,030	761,368
Premiums collectible	373,726	333,419	301,932
Current tax assets	-	70,400	72,696
Deferred tax assets, net	-	11,296	-
Other receivables	75,771	69,188	67,316
	1,512,568	1,491,746	1,453,525
Financial investments:			
Marketable debt instruments	2,348,278	1,946,105	1,989,353
Non-marketable debt instruments	121,295	103,630	116,969
Other	153,123	126,653	131,371
Total financial investments	2,622,696	2,176,388	2,237,693
Cash and cash equivalents	139,156	97,615	143,615
Total assets	4,274,420	3,765,749	3,834,833

Roberto Nard	Yfat Reiter	Usher Gray
Director	C.E.O	C.F.O

Date of approval of the interim financial information by the Board of Directors of the Company: November 19, 2024

	September 30, 2024 (Unaudited) NIS thousands	September 30, 2023 (Unaudited) NIS thousands	December 31, 2023 (Audited) NIS thousands
Equity and liabilities:			
Equity:			
Share capital	6	6	6
Share premium	250,601	250,601	250,601
Capital reserves	15,708	15,708	15,708
Retained earnings	711,680	563,468	599,889
Total equity attributable to the equity holders of the			
Company	977,995	829,783	866,204
Liabilities:			
Liabilities in respect of insurance contracts and			
investment contracts that are not yield dependent	2,809,335	2,505,086	2,500,045
Liabilities for deferred taxes, net	23,318	-	4,501
Retirement benefit obligation, net	2,098	3,569	2,830
Liabilities to reinsurers	328,355	306,723	312,346
Liabilities for current taxes	3,765	-	-
Other payables	129,554	120,588	148,907
Total liabilities	3,296,425	2,935,966	2,968,629
Total equity and liabilities	4,274,420	3,765,749	3,834,833

Condensed Interim Statements of Profit or Loss and Comprehensive Income

	9-month pe Septem			3-month period ended September 30	
	2024	2023	2024	2023	December 31, 2023
	(Unaudited)	(Unaudited)	(Unaudited)	(Unaudited)	(Audited)
	NIS thousands	NIS thousands	NIS thousands	NIS thousands	NIS thousands
Gross earned premiums Premiums earned by	1,335,366	1,134,975	468,540	404,062	1,543,455
reinsurers	(180,574)	(180,089)	(60,477)	(61,148)	(245,036)
Premiums earned in retention	1,154,792	954,886	408,063	342,914	1,298,419
Gains on investments, net	, ,	Ź	,	,	, ,
and financing income	95,525	70,034	49,483	15,644	113,716
Commission income	44,230	41,857	13,153	13,912	56,028
Total income	1,294,547	1,066,777	470,699	372,470	1,468,163
Payments and change in liabilities with respect to insurance contracts, gross Share of the reinsurers in increase of insurance	(923,135)	(834,325)	(351,062)	(288,497)	(1,118,143)
liabilities and in payments for insurance contracts Payments and change in liabilities with respect to	102,230	102,275	45,150	39,219	143,524
insurance contracts, in retention	(820,905)	(732,050)	(305,912)	(249,278)	(974,619)
Commissions, marketing expenses and other acquisition costs General and administrative	(223,904)	(211,855)	(74,449)	(71,983)	(292,652)
expenses	(82,889)	(70,426)	(27,195)	(23,459)	(93,764)
Financing income (expenses)	3,746	635	(944)	20	1,996
Total expenses	(1,123,952)	(1,013,696)	(409,500)	(344,700)	(1,359,039)
Income before taxes on					
income	170,595	53,081	61,199	27,770	109,124
Taxes on income	(58,804)	(18,166)	(20,836)	(9,650)	(37,788)
Income for the period and total comprehensive income for the period	111,791	34,915	40,363	18,120	71,336
Basic earnings per share:					
Basic earnings per share					
(NIS thousands)	19.51	6.09	7.04	3.16	12.45
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
Nine-month period ended September 30, 2024 Balance as of January 1, 2024 (Audited) Total comprehensive income for the period (Unaudited)	6	250,601	15,708	599,889 111,791	866,204 111,791
Balance as at September 30, 2024 (Unaudited)	6	250,601	15,708	711,680	977,995
Nine-month period ended September 30, 2023 Balance as of January 1, 2023 (Audited) Total comprehensive income for the period (Unaudited)	6	250,601	15,708	528,553 16,795	794,868 16,795
Balance as at June 30, 2023 (Unaudited)	6	250,601	15,708	563,468	829,783
Three-month period ended September 30, 2024 Balance as at July 1, 2024 (unaudited) Total comprehensive income for the period (Unaudited)	6	250,601	15,708	671,317 40,363	937,632 40,363
Balance as at September 30, 2024 (Unaudited)	6	250,601	15,708	711,680	977,995

Condensed Interim Statements of Changes in Equity

	Share capital	Share premium	Other reserves NIS thousands	Retained earnings	Total
Three-month period ended September 30, 2023 Balance as at July 1, 2023 (unaudited) Total comprehensive income for the period (Unaudited)	6	250,601	15,708	545,348 18,120	811,663 18,120
Balance as at September 30, 2023 (Unaudited)	6	250,601	15,708	563,468	829,783
Year ended December 31, 2023 Balance as at January 1, 2023 (audited)	6	250,601	15,708	528,553	794,868
Total comprehensive income for the year (Audited) Balance as of				71,336	71,336
December 31, 2023 (audited)	6	250,601	15,708	599,889	866,204

	9-month period ended September 30			eriod ended mber 30	Year ended December 31,
	2024	2023	2024	2023	2023
	(Unaudited)	(Unaudited)	(Unaudited)	(Unaudited)	(Audited)
	NIS	NIS	NIS	NIS	NIS
	thousands	thousands	thousands	thousands	thousands
Cash flows from operating					
activities:					
Net cash provided by (used in)					
operations (Appendix A)	(42,725)	(13,427)	(6,709)	(38,790)	29,430
Interest paid	(57)	(142)	(12)	(40)	(176)
Interest received	29,213	33,282	10,276	11,007	44,091
Income taxes paid	(28,833)	(5,803)	(10,810)	(2,163)	(7,280)
Income taxes received	65,315	72,344	-	-	72,344
Net cash provided by (used in)					
operating activities	22,913	86,254	(7,255)	47,594	138,409
Cash flow from investing activities: Acquisition of property and	42.42.6	(- - 04)		<i>(</i> 1.2.1)	(7.02.1)
equipment	(2,656)	(5,701)	(717)	(1,261)	(5,934)
Investment in intangible assets	(19,885)	(14,014)	(7,194)	(4,367)	(19,805)
Net cash used in investing activities	(22,541)	(19,715)	(7,911)	(5,628)	(25,739)
Cash flow from financing activities: Repayment of principal of lease					
liability	(4,285)	(4,200)	(1,436)	(1,407)	(5,614)
Net cash used in financing activities	(4,285)	(4,200)	(1,436)	(1,407)	(5,614)
Impact of exchange rate fluctuations on cash and cash equivalent					
balances	(546)	(445)	501	(783)	838
Increase (decrease) in cash and cash equivalents	(4,459)	61,894	(16,101)	39,776	107,894
Cash and cash equivalents at beginning of period	143,615	35,721	155,257	57,839	35,721
Cash and cash equivalents at end of period	139,156	97,615	139,156	97,615	143,615

	9-month period ended September 30		3-month period ended September 30		Year ended December 31,
	2024	2023	2024	2023	2023
	(Unaudited)	(Unaudited)	(Unaudited)	(Unaudited)	(Audited)
	NIS	NIS	NIS	NIS	NIS
	thousands	thousands	thousands	thousands	thousands
Appendix A - cash flows from operating activity:	444 =04	24.04.5	10.252	40.440	-1.00 ¢
Income for the period	111,791	34,915	40,363	18,120	71,336
Adjustments for: Income and expenses not involving cash flows: Change in liabilities for insurance					
contracts that are not yield dependent	309,290	244,042	134,235	97,720	239,001
Change in reinsurance assets	(34,333)	(42,274)	(39,565)	(21,619)	(49,612)
Change in deferred acquisition costs	(15,098)	(20,133)	(7,088)	(9,245)	(17,270)
Taxes on income	58,804	18,166	20,836	9,650	37,788
Change in retirement benefit	30,004	10,100	20,030	7,030	37,700
obligations, net	(732)	(90)	_	_	(829)
Depreciation of property and	(102)	(50)			(02))
equipment	7,906	8,039	2,688	2,775	10,891
Amortization of intangible assets	12,576	13,298	4,305	4,495	16,807
Gains, net, on financial investments:	12,6.0	10,200	1,5 00	.,	10,007
Marketable debt instruments	(42,092)	(15,622)	(32,101)	(2,240)	(43,686)
Non-marketable debt instruments	(6,699)	(10,755)	(5,160)	(3,976)	(24,108)
Marketable ETNs	(21,752)	(21,339)	(6,282)	(2,218)	(26,057)
Impact of fluctuation in exchange rate	,		,	, ,	
on cash and cash equivalents	546	445	(501)	783	(838)
-	268,416	173,777	71,367	76,125	142,087
Changes in assets and liabilities:					
Liabilities to reinsurers	16,009	27,230	20,958	20,173	32,853
Investments in financial assets, net	(314,461)	(112,117)	(93,902)	(32,829)	(127,287)
Premiums collectible	(71,794)	(94,334)	(23,735)	(41,735)	(62,847)
Other receivables	(8,455)	9,592	(8,163)	5,073	11,464
Other payables	(15,075)	(19,350)	(3,333)	4,830	5,739
	(393,776)	(188,979)	(108,175)	(44,488)	(140,078)
Adjustments for interest and dividend:	(1112)	())	(12)		
Interest paid	57	142	12	40	176
Interest received	(29,213)	(33,282)	(10,276)	(11,007)	(44,091)
111010011001100	(29,156)	(33,140)	$\frac{(10,264)}{(10,264)}$	$\frac{(10,967)}{(10,967)}$	(43,915)
Net cash provided by (used in) operations	(42,725)	(13,427)	(6,709)	38,790	29,430
-					

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.
- 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:

1. On October 7, 2023, terror organizations launched a surprise attack on the State of Israel from the Gaza Strip. Consequently, the Government of Israel declared a state of war - "Swords of Iron", which initially focused primarily on fighting the Hamas terrorist organization in Southern Israel and in the Gaza Strip, but was later followed by an escalation of the security situation on Israel's northern border with Lebanon. The intense fighting persists both on the Gaza front and the northern front, and in April 2024 Israel's conflict with Iran escalated, also evolving into fighting in Lebanon, with more frequent and intense firing of rockets into additional regions in Israel (hereinafter - "War Event").

As to the effect of the War Event on the Company's results for 2023, see Section 1c of Chapter C (Financial Statements) in the 2023 periodic report.

In the reported period ended September 30, 2024, the War Event did not materially affect the results of the Company, with the exception of a significant reduction in overseas travel premiums in the health insurance segment due to the reduction in overseas travel by Israelis.

This is an evolving event that involves a significant degree of uncertainty and financial impact on the economy as a whole. Accordingly, as at the reporting date, the Company is unable to assess the extent of the War's impact on the volume of its business activity and its future results. The Company continues to currently monitor the related developments and examine the impact on its activity and results.

- 2. In March 2024, the Knesset passed the Value Added Tax Order (Rate of Tax for Non-Profits and Financial Institutions) (Amendment), 2024 (hereafter "the Order"), pursuant to which, commencing on January 1, 2025, the rate of Wages Tax and Profit Tax payable for any activity of a financial institution in Israel will be 18% of the wages paid and the profit generated, instead of the current 17%. The effect on the Company's deferred taxes is immaterial.
- **3.** On September 17, 2024, Mr. Thomas Lillelund stepped down from his office as a director and Chairman of the Board of Directors of the Company. Accordingly, the Company is taking actions to appoint a new chairman for the Board of Directors.
- 4. On June 24, 2024, AIG Global Corporation entered into an agreement for the sale of overseas travel insurance operations in the Group to the Zurich Group, which will take effect on 2.12.2024. At this stage, the Company will continue to act as insurer for the overseas travel insurance operations in Israel and will transfer 100% of the premiums as reinsurance premiums (through a member company of AIG Global Corporation) to Zurich Group, which will bear the full cost of the claims with the addition of reimbursement of expenses and a commission, in accordance with the account-settling mechanism that will be determined.

Note 2 - Basis of Preparation of Financial Statements

A. Financial Reporting Framework

Until December 31, 2022, the financial statements of the Company were prepared in accordance with IFRSs. As described below, the condensed interim financial statements as at September 30, 2024 and for the 9-month and 3-month periods ended on that date (hereinafter: "the interim financial information") have been prepared in accordance with the directives prescribed by the Commissioner of the Capital Market, Insurance and Savings in conformity with the Supervision of Financial Services (Insurance) Law, 1981 (hereinafter: "the Insurance Law") and do not include all of the information required for full annual financial statements. The interim financial information should be read in conjunction with the annual financial statements as at December 31, 2023 and for the year ended on that date (hereinafter – "the annual financial statements of the Company").

Further to the stated in Note 2(w)(1) to the annual financial statements, concerning the Draft Roadmap for the Adoption of International Financial Reporting Standard No. 17 - Insurance Contracts, published by the Capital Market, Insurance and Savings Authority in December 2022 (hereinafter: "the Roadmap"), on August 12, 2024 the Capital Market, Insurance and Savings Authority published the "Roadmap for the Adoption of International Financial Reporting Standard No. 17 - Insurance Contracts – Fourth Update" (hereinafter: "the Current Roadmap").

According to the Current Roadmap, the date of initial implementation of IFRS 17 and IFRS 9 by the insurance companies in Israel (which pursuant to IFRSs would have been required to be implemented by the Company on January 1, 2023) has been updated and shall apply starting in the quarterly and annual periods commencing on January 1, 2025. Hence, the transition date will be January 1, 2024. The Current Roadmap determines that there will be no early adoption of IFRS 17 in Israel.

Accordingly, commencing on January 1, 2023 to the initial implementation date of IFRS 17 and IFRS 9 by the insurance companies in Israel, as aforesaid, the Company continues to implement the provisions of International Accounting Standard No. 4, "Insurance Contracts", and International Accounting Standard No. 39, "Financial Instruments: Recognition and Measurement" that had been applied by the Company up to said date and which were superseded by IFRS 17 and IFRS 9, respectively. The remaining IFRSs are implemented by the Company on the dates stipulated therein.

Consequently, commencing on January 1, 2023, the financial statements of the Company are not fully compliant with IFRSs, but rather are prepared in accordance with the directives prescribed by the Commissioner of the Capital Market, Insurance and Savings in conformity with the Supervision Law.

The interim financial information was approved for publication by the Board of Directors of the Company on November 19, 2024.

B. Use of estimates and judgments

The preparation of condensed interim financial statements in conformity with the directives prescribed by the Commissioner of the Capital Market, Insurance and Savings in conformity with the Supervision of Financial Services (Insurance) Law, 1981 requires management of the Company to make judgments, estimates and assumptions that affect the application of accounting policies and the amounts of assets, liabilities, income and expenses. It is hereby clarified that actual results may differ from these estimates.

Note 2 - Basis of Preparation of Financial Statements (cont'd)

B. Use of estimates and judgments (cont'd)

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 2023.

Note 3 - Material Accounting Policies

Except as stated above, 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 2022.

New standards and interpretations not yet adopted:

1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9")

In May 2017, the International Accounting Standards Board (IASB) published International Financial Reporting Standard No. 17, "Insurance Contracts". In addition, in June 2020 and December 2021, the IASB published amendments to the Standard (hereafter - "IFRS 17").

IFRS 17 establishes rules for the recognition, measurement, presentation and disclosure of insurance contracts, superseding the relevant existing provisions of IFRS 4 and the directives of the Capital Market, Insurance and Savings Authority. The new standard is expected to cause material changes in the Company's financial reporting. The date of first-time implementation prescribed in IFRS 17 is January 1, 2023. However, as aforementioned, the requirements published by the Commissioner in the Current Roadmap postpones the date of first-time implementation of IFRS 17 in Israel to the quarterly and annual periods commencing on January 1, 2025, with January 1, 2024 set as the transition date.

In July 2014, the IASB published International Financial Reporting Standard 9, "Financial Instruments" (hereafter - "IFRS 9"), which supersedes IAS 39 and sets new rules for the classification and measurement of financial instruments, with emphasis on financial assets. The date of first-time implementation prescribed in IFRS 9 is January 1, 2018. In September 2016, an amendment to IFRS 4 was published, which permitted entities that issue insurance contracts and meet certain prescribed criteria to postpone the adoption of IFRS 9 to January 1, 2023 (the date of first-time implementation of IFRS 17), to avoid the accounting mismatch that could ensue from the implementation of IFRS 9 prior to the implementation of IFRS 17. The Company met the aforesaid criteria and postponed the implementation of IFRS 9 accordingly. Upon the deferral of the first-time implementation date of IFRS 17 to January 1, 2025, the Commissioner also postponed the first-time implementation date of IFRS 9 to January 1, 2025, accordingly.

Note 3 - Material Accounting Policies (cont'd)

New standards and interpretations not yet adopted (cont'd):

- 1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9") (cont'd)
 - a) The Company's preparations for the implementation of IFRS 17 and IFRS 9

As part of the adoption of the standards, the Company is in the process of deploying and integrating IT systems that are necessary for the implementation of the provisions. To the date of the report, the Company is reviewing and mapping the necessary controls and the flow of information into the financial statements. In January 2024, the Company submitted to the Authority a list of the key controls designed by the end of 2023. In addition, in accordance with the Roadmap, in August 2023 the Company reported to the Authority on the results of the first Quantitative Impact Study (hereafter - "QIS") examining the effect of first-time implementation of IFRS 17. The Company's first QIS included quantitative testing of the methodology used to calculate the opening balances, based on the balances as at January 1, 2023, of certain insurance contracts provided for in the third update of the Roadmap. The Company submitted to the Authority an updated version of the RA calculation methodology in Q4 2023.

In addition, in March 2024, the Company submitted to the Authority an updated draft of the complete accounting policy for the implementation of IFRS 17 and IFRS 9, in accordance with the guidelines of the Roadmap. The Company has duly reported to the Authority the results of the second QIS examining the effects of first-time implementation of IFRS 17 and IFRS 9 and the results for the first quarter of 2024. The Company is currently preparing to submit its third QIS report by December 31, 2024, as prescribed in the Current Roadmap.

For the purpose of the Israeli insurance companies' preparation for the adoption of IFRS 17, the Commissioner published an appendix to the draft insurance circular, "Professional Issues Relating to the Implementation of International Financial Reporting Standard No. 17 in Israel" (hereafter - "Professional Issues Circular"), the most recent draft update of which was published on August 12, 2024. The accounting policy described below is based, inter alia, on said Circular.

In accordance with the Road Map, the companies are permitted to provide a disclosure of the opening balances' data as at the transition date (1.1.2024), including separate disclosure of the CSM and RA for each of the operating segments and disclosure of the balance of the provision for credit losses. The Company has elected not to provide such disclosure, at this stage, since it is still examining the manner of implementation of various topics in IFRS 17, and the data as at the transition date are not yet final and are subject to change. Accordingly, the Company has decided that they are not ready for publication.

As aforementioned, the Company is in advanced stages of preparation for the implementation of the standard, as regarding the setting of an accounting policies, the deployment of IT systems and internal controls.

New standards and interpretations not yet adopted (cont'd):

- 1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9") (cont'd)
 - b) Principal changes in the accounting policy

Presented below are the principals of the requirements and the accounting policies selected by the Company to date:

Scope of the standard

IFRS 17 applies to standards that meet the definition of an insurance contract.

In the assessment of the Company, the implementation of IFRS 17 is not expected to materially affect the classification of contracts as insurance contracts compared to IFRS 4. In addition, the Company does not expect to separate from the insurance contracts elements that would be accounted for under another standard.

Measurement model

According to the new Standard, the Company will recognize and measure groups of insurance contracts at the risk-adjusted present value of the future cash flows from the contracts that takes into account all of the information available for the cash flows in a manner that is consistent with observable market input; with the addition of (for a liability) or less (for an asset) the amount representing the unrealized profit from the group of contracts (the contractual service margin).

Income from insurance contracts, for each reporting period, is derived from changes in the liabilities for future coverage relating to the various components of the consideration that the insurance company demands for the contract, such as: insurance contract acquisition costs, risk adjustment, allocation of the contractual service margin to the period, anticipated claims and expenses for the period.

Nevertheless, a company may apply a simplified measurement model to contracts with an insurance coverage period of up to one year or if it is not probable that a liability will materially differ from the liability that would be derived under the general model, according to which the amount attributed to services not yet provided will be measured by allocating the premium over the coverage period (Premium Allocation Approach - PAA).

The standard contains three models for the measurement of the liability in respect of insurance contracts. In its policy, the Company addresses the 2 models that apply to its activity:

New standards and interpretations not yet adopted (cont'd):

- 1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9") (cont'd)
 - b) Principal changes in the accounting policy (cont'd)

Measurement model (cont'd)

1. General Model - GMM Model

This model is the Standard's default model.

The main products that will be measured under the GMM Model, both in insurance contracts issued by the Company and in reinsurance contracts held by the Company, are life insurance and health insurance, including personal accidents insurance.

2. Premium Allocation Approach - PAA Model

The Company has elected to implement the Premium Allocation Approach (PAA) where possible, in accordance with the provisions of the standard, this in order to simplify the measurement of a group of insurance contracts issued by it and of the reinsurance contracts that it holds. The standard permits the implementation of the Premium Allocation Approach where the following criteria are met at the inception of the group:

- The coverage period of each contract in the group is one year or less. or
- The Company reasonable expects that the result of the measurement of the liability or the asset in respect of the remaining coverage using the PAA Model would not materially differ from the result of the measurement of the liability or the asset in respect of the remaining coverage using the GMM Model, as appropriate (hereinafter -"PAA Eligibility Criterion").

The Company has elected to apply the PAA Model to the measurement of the following groups of insurance contracts:

General insurance

In most general insurance portfolios, the coverage period of all contracts is up to one year. These groups of insurance contracts are automatically eligible for PAA measurement. For the remaining groups of contracts, the Company will apply the test of eligibility for PAA measurement. The Company expects that all of its general insurance contracts will meet the PAA eligibility criteria. The measurement of the insurance contracts using the PAA Model is similar to the measurement of general insurance contracts under the Company's existing policy pursuant to IFRS 4, with certain adjustments.

Health insurance

Overseas travel insurance contracts in the health insurance sector.

New standards and interpretations not yet adopted (cont'd):

- 1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9") (cont'd)
 - b) Principal changes in the accounting policy (cont'd)

Level of Aggregation

IFRS 17 requires the aggregation of insurance contract into groups for recognition and measurement purposes. The Company will determine the groups upon initial recognition and will not change the composition of the groups subsequently.

Initially, the Company needs to identify portfolios of insurance contracts. A portfolio is comprised of contracts that are subject to similar risks and are managed jointly. Once it has identified a portfolio, the Company will divide it, at minimum, into the following groups, based on the expected profitability upon initial recognition:

- a group of contracts that are onerous at initial recognition;
- a group of contracts that at initial recognition have no significant possibility of becoming onerous subsequently; and
- a group of the remaining contracts in the portfolio.

In accordance with the standard, for insurance contracts for which the Company applies the PAA Model, the Company will assume that there are no contracts in the portfolio that are onerous at initial recognition, unless there are facts and circumstances indicating otherwise. IFRS 17 determines that contracts issued more than one year apart will not be included in the same group, such that each underwriting year will be associated with a separate group of insurance contracts.

The smallest measurement unit for the purposes of IFRS 17 is the insurance contract, on all of the insurance coverages contained therein. Therefore, as a rule, the Company will assign the insurance contract in its entirety to a single group of insurance contracts. This approach materially differs from the Company's policy pursuant to IFRS 4, which generally provides for the separate recognition and measurement of each coverage.

IFRS 17 permits the inclusion of contracts under the same group if they belong to different groups only since the practical ability of the Company to set a different price or a different level of benefits for a policyholder with different characteristics is limited by law or regulation. The Company's proportionate share in compulsory vehicle insurance policies issued by the Pool corporation meets this requirement. Accordingly, the Company has elected to include its proportionate share of these policies in the same group as the ordinary compulsory insurance policies sold by the Company.

New standards and interpretations not yet adopted (cont'd):

- 1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9") (cont'd)
 - b) Principal changes in the accounting policy (cont'd)

Level of Aggregation (cont'd)

In some sectors within general insurance (such as vehicle property), the level of aggregation may be lower than that currently applied pursuant to IFRS 4, which could increase the scope of contracts recognized as onerous. In other insurance sectors (e.g. business and home) containing property and liability coverages that are currently sold and measured separately, these will be accounted for as a single insurance contract under IFRS 17. This change is expected to reduce the loss in respect of onerous contracts in those sectors.

Contract boundaries

For insurance contracts, cash flows are within the boundaries of the contract if they arise from substantive rights and obligations that exist during the reporting period in which the Company can compel the policyholder to pay premiums or has a substantive obligation to provide services. A substantive obligation ends when the Company has the practical ability to reassess the risks of the policyholder (a singly policyholder) or of the portfolio of the insurance contracts. At that point, the Company has the practical ability to set a new price or change the terms of the benefits that fully reflects those risks, provided that the pricing at the portfolio level did not include a future cost risk in the overall premium.

The Company's practical ability to determine a price at a future date that fully reflects the risks in the contract as from that date exists when there are no limitations that prohibit the Company to reprice the contract in an identical manner to that applied in pricing a new contract with the same characteristics.

For insurance policies issued commencing in 2016 and thereafter

According to the Commissioner's position provided in Draft 8 of the Professional Issues Circular, on the fixed date of renewal it cannot be argued that there is a practical ability to reassess the risks of the portfolio and, accordingly, set a new price that fully reflects those risks. Consequently, periods subsequent to the fixed renewal date will be included within the contract boundaries.

Allocation of expenses

In accordance with the provisions of IFRS 17, the Company includes within the contract boundaries cash flows that are directly attributable to the insurance contract, including insurance acquisition cash flows. Accordingly, the Company will not allocate to the insurance contract product development costs and qualification costs as well as investment management costs.

Insurance acquisition cash flows will be allocated to renewals of insurance contracts only if the Company expects to recover the related cash flows through the renewal of those contracts and based on the manner in which the Company expects to recover them.

New standards and interpretations not yet adopted (cont'd):

- 1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9") (cont'd)
 - b) Principal changes in the accounting policy (cont'd)

Interest curves:

The Company determines the interest curves for all groups of insurance contracts using the Bottom-Up approach. According to this approach, the discount rate is derived by adding an illiquidity premium (that reflects the illiquidity rate of the liability) to the risk-free interest curve.

The coverage units and release of the contractual service margin (CSM for groups of contracts measured under the GMM Model)

The CSM represents the liability for the unrealized profit from future services. According to the standard, the CSM will be recognized in profit or loss over the coverage period in a pattern that reflects the insurance service provided by the Company in connection with the contracts included in the group of insurance contracts. This pattern is determined based on the rate of the coverage units provided in the period to the total coverage units that are expected to be provided in the future in connection with the group of insurance contracts.

The coverage units and release of the contractual service margin (CSM for groups of contracts measured under the GMM Model) (cont'd)

The number of coverage units in a group is the quantity of insurance contract services provided by the contracts in the group, determined by considering for each contract the quantity of the benefits provided under a contract and its expected coverage period.

In life insurance, severe illness insurance and personal accidents insurance, the coverage units are determined based on the insurance amounts specified in the policy, and in medical expenses insurance the units are determined based on the number of coverages in effect.

Transitional provisions:

IFRS 17is to be applied retrospectively (hereafter - "full retrospective implementation"), unless this is not practicable. When applying the full retrospective implementation approach, the Company will identify, recognize and measure each group of insurance contracts, as well as any assets in respect of insurance acquisition cash flows, as if IFRS 17 has been implemented from the outset. In addition, the Company will derecognize any balances that would not have existed had IFRS 17 been implemented from the outset. The resulting net difference will be carried to equity.

New standards and interpretations not yet adopted (cont'd):

- 1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9") (cont'd)
 - b) Principal changes in the accounting policy (cont'd)

Transitional provisions (cont'd):

If full retrospective implementation of a group of insurance contracts and/or an asset in respect of insurance acquisition cash flows is not practicable, the Company will implement one of the following approaches:

- a. Modified retrospective approach The objective of this approach is to achieve the closest outcome to retrospective application as possible, using certain exemptions prescribed in the standard, applying reasonable and supportable information available without undue cost or effort; or
- b. Fair value approach To apply this approach, the Company will determine the contractual service margin or loss component of the liability for remaining coverage at the transition date as the difference between the fair value of a group of insurance contracts at that date and the contract fulfilment cash flows measured at that date.

The Company will fully apply the provisions of the standard retrospectively to general insurance contracts, whereas in relation to life and health insurance contracts (particularly those with long boundaries - GMM), the Company expects to implement the fair value approach on the transition date.

IFRS 9 - Principal changes in the accounting policy

Classification and measurement:

In implementing IFRS 9, the Company will classify financial assets based on their subsequent measurement at amortized cost, at fair value through other comprehensive income or at fair value through profit or loss, based on the Company's business model for managing financial assets, as well as on the characteristics of the contractual cash flow from the financial asset.

IFRS 9 also introduces a new model for recognizing credit losses that supersedes the existing impairment model included in the expected credit loss model of IAS 39. The model is applicable to financial assets measured at amortized cost and to investments in debt instruments measured at fair value through other comprehensive income; it does not apply to investments in equity instruments.

A financial asset will be measured at amortized cost if the two following conditions are fulfilled:

a) The financial asset is held within the framework of a business model that is designated to hold the assets for the purpose of collecting the contractual cash flows deriving from them; and

New standards and interpretations not yet adopted (cont'd):

- 1) International Financial Reporting Standard No. 17, Insurance Contracts (hereinafter: "the Standard" or "IFRS 17") and International Financial Reporting Standard No. 9, Financial Instruments (hereinafter: "IFRS 9") (cont'd)
 - b) Principal changes in the accounting policy (cont'd)

IFRS 9 - Principal changes in the accounting policy (cont'd)

Classification and measurement (cont'd):

b) The contractual terms of the financial asset create eligibility, at specified dates, to cash flows that consist solely of payments of principal and interest on the unpaid principal amount (hereafter - "the principal and interest criterion").

A financial asset will be measured at fair value through other comprehensive income if the two following conditions are fulfilled:

- a) The financial asset is held within the framework of a business model that is designated to collect contractual cash flows and to sell financial assets; and
- b) The principal and interest criterion is fulfilled.

A financial asset will be measured at fair value through profit or loss unless it is measured at amortized cost or at fair value through other comprehensive income. Despite the aforesaid, on the date of initial recognition, the Company may designate a financial asset as measured at fair value through profit or loss if doing so eliminates or significantly reduces a measurement or recognition inconsistency that would otherwise be created from the measurement of assets or liabilities or from recognition of gains and losses thereon using other bases.

The Company intends to designate to fair value through profit or loss all of its investments in debt assets against the insurance liabilities.

Additionally, the Company does not expect to designate financial investments in equity instruments to measurement at fair value through other comprehensive income. Consequently, these investments will be measured at fair value through profit or loss.

The Company will also review the business model for the management of its investments in the remaining debt assets counteracting the equity and other liabilities, and to the extent that the business model for the management of those investments is fair-value-based with exclusively incidental collection of the cash flows - those assets will also be measured at fair value through profit or loss.

In view of the aforesaid, the Company expects to apply measurement at fair value through profit or loss to substantially all of its financial assets. Accordingly, the Company's provision for expected credit losses is not expected to be material.

New standards and interpretations not yet adopted (cont'd):

2) IFRS 18, Presentation and Disclosure in Financial Statements (hereinafter - "the Standard" or "IFRS 18")

This Standard supersedes IAS 1, Presentation of Financial Statements. The Standard introduces improved structure and content for the financial statements, particularly as regarding the statement of profit or loss.

The Standard contains new disclosure and presentation requirements as well as requirements carried over from IAS 1, Presentation of Financial Statements, with limited changes.

As part of the new disclosure requirements, companies will be required to present two subtotals within the statement of profit or loss: operating profit and profit before financing and income taxes. In addition, for most companies, the results in the statement of profit or loss will be classified into three categories: operating profit, investment profit and financing profit.

Alongside the changes in the structure of the statements of profit or loss, the Standard also prescribes the separate disclosure in the financial statements of the use of performance measures defined by management ("Non-GAAP Measures").

3) Amendments to IFRS 9, Financial Instruments, and IFRS 7, Financial Instruments: Disclosures: Amendments to the Classification and Measurement of Financial Instruments

The amendments cover the following topics:

- Additional clarifications concerning the timing of recognition and derecognition of financial instruments, and introduction of an exception concerning the timing of derecognition of financial liabilities settled by way of electronic transfer of cash;
- Classification of financial assets:
 - Updating of the implementation guidelines concerning the method used to assess
 whether the contractual cash flows of a financial asset are solely payments of
 principal and interest (SPPI), where the contractual terms of the asset contain
 contingent elements (such as linkage to ESG indices), and introduction of related
 examples;
 - Clarification of the conditions for the classification of a financial instrument as contractually linked or as a non-recourse financial instrument for the purpose of determining whether it include solely payments of principal and interest (SPPI);

New standards and interpretations not yet adopted (cont'd):

- 3) Amendments to IFRS 9, Financial Instruments, and IFRS 7, Financial Instruments: Disclosures: Amendments to the Classification and Measurement of Financial Instruments (cont'd)
 - Updating of the disclosure requirements for financial instruments containing contingent elements that are not directly related to basic lending risks and costs; and
 - Updating of the disclosure requirements for investments in equity instruments measured at fair value through other comprehensive income (FVOCI).

The amendments are effective for annual reporting periods commencing on January 1, 2026. Early adoption is permitted. Early adoption may be applied to all of the amendments or solely to the amendments concerning the classification of financial assets (including the amendment to IFRS 7, with the related disclosure requirements). The amendment to IFRS 9 is to be applied retrospectively, without requiring the restatement of comparative data. The implementation of the amendment to IFRS 7 does not require disclosures on periods preceding the date of the first-time implementation of the amendments.

As stated in (1) above, the Company has not yet fully implemented the provisions of IFRS 9. The Company is considering the implications of the amendments on the financial statements and has not opted for early adoption.

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

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.

Note 4 - Segment Information (cont'd)

9-month period ended September 30, 2024 (unaudited) attributed Life Health General to operating Insurance * insurance insurance segments **Total** NIS thousands Gross earned premiums 125,002 131,993 1,078,371 1,335,366 (25,694)(3,141)(151,739)(180,574)Premiums earned by reinsurers 99,308 128,852 Premiums earned in retention 926,632 1,154,792 Gains on investments, net, and financing 627 2,953 46,480 45,465 95,525 income 544 9,417 34,269 44,230 Commission income 109,352 132,349 1,007,381 45,465 1,294,547 **Total income** Payments and change in liabilities with respect (106,769)to insurance contracts, gross (65,812)(750,554)(923,135)Share of reinsurers in increase of insurance liabilities and payments with respect to 15,463 8,008 78,759 102,230 insurance contracts Payments and change in liabilities with respect to insurance contracts, in retention (50,349)(98,761)(671,795)(820,905)(30,880)(223,904)Commissions and other acquisition costs (28,705)(164,319)(15,840)(51,564)(82,889)General and administrative expenses (15,485)1,609 3,746 2,137 Financing income, net Total comprehensive income (loss) before 12,283 (10,602)121,840 47,074 170,595 taxes on income Liabilities for insurance contracts, gross, as at 91,854 145,207 2,572,274 2,809,335 30.09.2024

9-month period ended September 30, 2023 (unaudited) Not attributed Life Health General to operating Insurance * **Total** insurance insurance segments NIS thousands Gross earned premiums 121,399 142,229 871,347 1,134,975 (151,806)(25,544)(2,739)(180,089)Premiums earned by reinsurers Premiums earned in retention 95,855 139,490 719,541 954,886 Gains on investments, net, and financing 2,027 70,034 income 185 30,007 37,815 497 34,801 41,857 6,559 Commission income 142,014 Total income 102,599 784,349 37,815 1,066,777 Payments and change in liabilities with respect to insurance contracts, gross (53,280)(90,155)(690,890)(834, 325)Share of reinsurers in increase of insurance liabilities and payments with respect to 3,627 90,215 8,433 102,275 insurance contracts Payments and change in liabilities with respect to insurance contracts, in retention (44,847)(86,528)(600,675)(732,050)Commissions and other acquisition costs (32,261)(34,418)(145, 176)(211,855)General and administrative expenses (14,156)(70,426)(16,385)(39,885)1,986 (1,351)635 Financing income (expenses), net Total comprehensive income before taxes on 11,335 4,683 599 36,464 53,081 income Liabilities for insurance contracts, gross, as at 115,497 80,685 2,308,904 2,505,086 30.09.2023

^{*} The health insurance segment primarily comprises the results of the personal accidents and overseas travel sectors.

Note 4 - Segment Information (cont'd)

	3-month period ended September 30, 2024 (unaudited)					
	Life insurance	Health Insurance *	General insurance NIS thousands	Not attributed to operating segments	Total	
Gross earned premiums	42,151	50,704	375,685		468,540	
Premiums earned by reinsurers	(8,421)	(1,068)	(50,988)		(60,477)	
Premiums earned in retention	33,730	49,636	324,697		408,063	
Gains on investments, net, and financing						
income	257	1,723	27,312	20,191	49,483	
Commission income	2,112	180	10,860		13,153	
Total income	36,099	51,539	362,870	20,191	470,699	
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance	(24,257)	(41,391)	(285,414)		(351,062)	
liabilities and payments with respect to insurance contracts	6,490	2,519	36,141		45,150	
Payments and change in liabilities with respect to insurance contracts, in retention Commissions and other acquisition costs General and administrative expenses	(17,767) (9,548) (5,052)	(38,872) (11,308) (5,070)	(249,273) (54,593) (17,073)		(305,912) (75,449) (27,195)	
Financing income (expenses), net			749	(1,693)	(944)	
Total comprehensive income (loss) before taxes on income	3,732	(3,711)	42,680	18,498	61,199	

^{*} The health insurance segment primarily comprises the results of the personal accidents and overseas travel sectors.

	3-month period ended September 30, 2023 (unaudited)					
	Life insurance	Health Insurance *	General insurance NIS thousands	Not attributed to operating segments	Total	
Gross earned premiums	41,007	53,553	309,502		404,062	
Premiums earned by reinsurers	(8,367)	(946)	(51,835)		(61,148)	
Premiums earned in retention	32,640	52,607	257,667		342,914	
Gains on investments, net, and financing						
income	84	592	8,300	6,668	15,644	
Commission income	2,134	175	11,603		13,912	
Total income	34,858	53,374	277,570	6,668	372,470	
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance	(19,080)	(31,106)	(238,311)		(288,497)	
liabilities and payments with respect to insurance contracts	3,609	1,683	33,927		39,219	
Payments and change in liabilities with respect to insurance contracts, in retention	(15,471)	(29,423)	(204,384)		(249,278)	
Commissions and other acquisition costs	(10,948)	(12,586)	(48,449)		(71,983)	
General and administrative expenses	(4,733)	(5,561)	(13,165)		(23,459)	
Financing income (expenses), net	<u> </u>		719	(699)	20	
Total comprehensive income before taxes on income	3,706	5,804	12,291	5,969	27,770	

Note 4 - Segment Information (cont'd)

Year ended December 31, 2023 (audited) Not attributed Life Health General to operating Insurance * Total insurance insurance segments NIS thousands Gross earned premiums 162,740 187,891 1,192,824 1,543,455 (3,702)Premiums earned by reinsurers (33,851)(207,483)(245,036)Premiums earned in retention 128,889 184,189 985,341 1,298,419 Gains on investments, net and financing income 268 3,692 54,067 55,689 113,716 8,620 46,730 Commission income 678 56,028 **Total income** 137,777 188,559 1,086,138 55,689 1,468,163 Payments and change in liabilities with respect to insurance contracts, gross (73,770)(124,985)(919,388)(1,118,143)Share of reinsurers in increase of insurance liabilities and payments with respect to 7,942 143,524 11,515 124,067 insurance contracts Payments and change in liabilities with respect to insurance contracts, in retention (62,255)(795, 321)(974,619) (117,043)Commissions and other acquisition costs (41,771)(46,003)(204,878)(292,652)General and administrative expenses (15,942)(16,791)(60,851)(93,764)1,986 10 1,996 Financing income, net Total comprehensive income before taxes 55,699 17,809 8,542 27,074 109,124 on income Liabilities for insurance contracts, gross, as at 77,415 114,753 2,307,877 2,500,045 31.12.2023

^{*} The health insurance segment primarily comprises the results of the personal accidents and overseas travel sectors .

Additional information relating to general insurance segment:

	9-month period ended September 30, 2024 (unaudited)						
	Compulsory motor vehicle	Motor vehicle property	Home	Professional liability NIS thousands	Other property sectors*	Other liability sectors**	Total
Gross premiums Reinsurance premiums	251,221 (3,333)	699,125	138,266 (28,713)	68,662 (62,591)	34,176 (35,093)	26,109 (22,932)	1,217,559 (152,662)
Premiums in retention	247,888	699,125	109,553	6,071	(917)	3,177	1,064,897
Change in balance of unearned premiums, in retention	(30,253)	(97,010)	(10,469)	(436)	4	(101)	(138,265)
Premiums earned in retention	217,635	602,115	99,084	5,635	(913)	3,076	926,632
Gains on investments, net, and financing income Commission income	21,731	13,457	2,862 1,030	4,967 19,752	434 7,835	3,029 5,652	46,480 34,269
Total income	239,366	615,572	102,976	30,354	7,356	11,757	1,007,381
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance liabilities and	(222,854)	(407,236)	(63,823)	(26,364)	(9,254)	(21,023)	(750,554)
payments with respect to insurance contracts	23,734	-	2,904	26,637	8,115	17,369	78,759
Payments and change in liabilities with respect to insurance contracts, in retention	(199,120)	(407,236)	(60,919)	273	(1,139)	(3,654)	(671,795)
Commissions and other acquisition costs	(26,569)	(81,233)	(28,269)	(16,779)	(6,411)	(5,058)	(164,319)
General and administrative expenses	(11,171)	(24,260)	(13,165)	(1,404)	(988)	(576)	(51,564)
Financing income, net	<u> </u>	1,155	969	10	<u> </u>	3	2,137
Total expenses	(236,860)	(511,574)	(101,384)	(17,900)	(8,538)	(9,285)	(885,541)
Total comprehensive income (loss) before taxes on income	2,506	103,998	1,592	12,454	(1,182)	2,472	121,840
Liabilities for insurance contracts, gross, as at 30.09.2024	1,106,842	634,507	146,130	347,901	107,883	229,011	2,572,274
Liabilities for insurance contracts, retention, as of 30.09.2024	952,108	634,507	139,814	37,590	2,978	37,876	1,804,873

Other property sectors reflect mainly the results of the property insurance sector, which accounts for aprx. 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 aprx. 42% of the total premiums attributable to these sectors.

Liabilities for insurance contracts, retention, as of 30.09.2023

Note 4 - Segment Information (cont'd)

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

9-month period ended September 30, 2023 (unaudited) Compulsory Motor Other Other motor vehicle **Professional** liability property vehicle Home liability sectors* sectors** **Total** property NIS thousands Gross premiums 202,741 533,058 125,988 78,489 43,487 25,730 1,009,493 (2,741)(23,150)(72.196)(43.423)(22.610)(164, 120)Reinsurance premiums Premiums in retention 200,000 533,058 102,838 6.293 64 3.120 845,373 (10,441)(4) (13,377)(101,558)(67)(385)(125,832)Change in balance of unearned premiums, in retention 60 Premiums earned in retention 186,623 431,500 92,397 6,226 2,735 719,541 Gains on investments, net, and financing income 14,719 1,991 3,500 318 2,236 30,007 7,243 902 21,915 6,947 5,037 34,801 Commission income 201,342 438,743 95,290 31,641 7,325 10.008 784,349 **Total income** Payments and change in liabilities with respect to insurance (169,006)(380,420)(57,103)(44,308)(14,691)(25,362)(690,890)contracts, gross Share of reinsurers in increase of insurance liabilities and 13,518 2,913 39,724 13,784 20,276 90,215 payments with respect to insurance contracts Payments and change in liabilities with respect to insurance contracts, in retention (155,488)(380,420)(54,190)(907)(600,675)(4,584)(5,086)Commissions, marketing expenses and other acquisition costs (25,821)(63,110)(26,968)(19,304)(4.981)(4,992)(145, 176)General and administrative expenses (9,494)(16,708)(11,501)(1,301)(518)(363)(39,885)1.064 902 12 1.986 Financing income, net (190,803)(459,174)(91,757)(25,177)(6,405)(10,434)(783,750)**Total expenses** 10,539 (20,431)3,533 6,464 920 (426)599 Total comprehensive income (loss) before taxes on income 960,219 131,971 2,308,904 545,131 337,833 107,617 226,133 Liabilities for insurance contracts, gross, as at 30.09.2023

824,157

545,131

126,555

38,421

2,789

37,825

1,574,878

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

Note 4 - Segment Information (cont'd)

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

3-month period ended September 30, 2024 (unaudited) Compulsory Motor Other Other liability motor vehicle **Professional** property sectors** vehicle liability sectors* Total property Home NIS thousands Gross premiums 86,587 233,137 48,299 23,994 17,723 10,805 420,545 (18,891)Reinsurance premiums (1,156)(9,756)(21,173)(9,410)(60,386)85,431 233,137 38,543 2,821 (1,168)1,395 360,159 Premiums in retention (4,732)(10,139)(20,189)(331)Change in balance of unearned premiums, in retention (64)(35,462)Premiums earned in retention 2,757 (1,175)1,064 324,697 75,292 212,948 33,811 249 Gains on investments, net, and financing income 12,673 8,052 1,674 2,901 1,763 27,312 6,279 1,571 10,861 Commission income 367 2,644 35,852 11,937 4,398 87,965 221,000 1,718 362,870 **Total income** Payments and change in liabilities with respect to insurance contracts, gross (89,641)(151,480)(16,558)(12,001)(3.089)(12,645)(285,414)Share of reinsurers in increase of insurance liabilities and 13,334 933 9,392 2,541 9,941 36,141 payments with respect to insurance contracts Payments and change in liabilities with respect to insurance contracts, in retention (76,307)(151,480)(15,625)(2,609)(548)(2,704)(249,273)Commissions and other acquisition costs (8,696)(27,757)(9,470)(5,421)(1,690)(1,559)(54,593)General and administrative expenses (4,290)(326)(190)(17,073)(3,673)(8,128)(466)749 392 351 Financing income, net (88,676)(186,973)(29,034)(8,492)(2,564)(4,451)(320,190)**Total expenses** 6,818 3,445 (846)(711)34,027 (53)42,680 Total comprehensive income (loss) before taxes on income

^{*} Other property sectors reflect mainly the results of the property insurance sector, which accounts for aprx. 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 aprx. 44% of the total premiums attributable to these sectors.

Note 4 - Segment Information (cont'd)

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

3-month period ended September 30, 2023 (unaudited) Compulsory Motor Other Other liability motor vehicle **Professional** property sectors** vehicle Home liability sectors* Total property NIS thousands Gross premiums 72.255 195,734 44,143 28,386 18,834 8,058 367,410 (26,103)(18,805)(6,903)Reinsurance premiums (966)(8,738)(61,515)29 71,289 195,734 35,405 2,283 1,155 305,895 Premiums in retention (4,474)(100)(37,993)(9)(48,228)Change in balance of unearned premiums, in retention (5,769)117 Premiums earned in retention 65,520 30,931 2,400 20 1.055 157,741 257,667 958 103 Gains on investments, net, and financing income 3,950 2,147 532 610 8,300 305 7,256 2,394 11,603 Commission income 1,648 69,470 31,768 10,614 2,517 3,313 159,888 277,570 **Total income** Payments and change in liabilities with respect to insurance contracts, gross (56,971)(135,939)(18,092)(10,416)(9,702)(7,191)(238,311)Share of reinsurers in payments and change in liabilities with 971 9,050 8,733 9,333 5,840 33,927 respect to insurance contracts Payments and change in liabilities with respect to insurance contracts, in retention (47,921)(135,939)(17,121)(1.683)(369)(1,351)(204,384)Commissions, marketing expenses and other acquisition costs (8,534)(21,756)(9,263)(6,009)(1,305)(1,582)(48,449)General and administrative expenses (3,088)(5,490)(3,852)(439)(174)(122)(13,165)719 400 313 Financing income, net (59,543)(162,785)(29,923)(8,127)(1,848)(3,053)(265,279)**Total expenses** 9,927 (2,897)1,845 2,487 669 260 12,291 Total comprehensive income (loss) before taxes on income

^{*} Other property sectors reflect mainly the results of the property insurance sector, which accounts for aprx. 95% of the total premiums attributable to these sectors.

^{**} Other liability sectors reflect mainly the results of the third-party insurance sector, which accounts for aprx. 49% of the total premiums attributable to these sectors.

Note 4 - Segment Information (cont'd)

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

	Year ended December 31, 2023 (audited)						
	Compulsory Motor Vehicle	Motor vehicle Property	Home	Professional liability	Other property sectors*	Other liability sectors**	Total
				NIS thousands			
Gross premiums Reinsurance premiums	262,348 (3,548)	693,630	160,263 (31,940)	93,840 (86,355)	57,302 (56,967)	34,322 (30,084)	1,301,705 (208,894)
Premiums in retention	258,800	693,630	128,323	7,485	335	4,238	1,092,811
Change in balance of unearned premiums, in retention	(6,687)	(94,354)	(6,565)	561	(7)	(418)	(107,470)
Premiums earned in retention	252,113	599,276	121,758	8,046	328	3,820	985,341
Gains on investments, net, and financing income Commission income	26,764	12,792	3,542 1,208	6,360 28,925	585 9,501	4,024 7,096	54,067 46,730
Total income	278,877	612,068	126,508	43,331	10,414	14,940	1,086,138
Payments and change in liabilities with respect to insurance contracts, gross Share of reinsurers in increase of insurance liabilities and	(234,392)	(495,094)	(74,136)	(70,497)	(16,959)	(28,310)	(919,388)
payments with respect to insurance contracts	18,146	-	3,399	63,072	16,245	23,205	124,067
Payments and change in liabilities with respect to insurance contracts, in retention	(216,246)	(495,094)	(70,737)	(7,425)	(714)	(5,105)	(795,321)
Commissions, marketing expenses and other acquisition costs General and administrative expenses Financing income	(35,080) (13,266)	(93,201) (28,995) 1,064	(37,511) (14,966) 902	(25,273) (1,717) 12	(7,006) (1,206) 1	(6,807) (701) 7	(204,878) (60,851) 1,986
Total expenses	(264,592)	(616,226)	(122,312)	(34,043)	(8,925)	(12,606)	(1,059,064)
Total comprehensive income (loss) before taxes on income	14,285	(4,158)	4,196	8,928	1,489	2,334	27,074
Liabilities for insurance contracts, gross, as at December 31, 2023	983,018	518,429	129,270	345,109	107,719	224,332	2,307,877
Liabilities with respect to insurance contracts, in retention, as at 31.12.2023	843,536	518,429	124,175	40,075	2,577	37,313	1,566,105

^{*} Other property sectors reflect mainly the results of the property loss insurance sector, which accounts for aprx. 98% of the total premiums attributable to these sectors.

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

Gross risk premiums

insurance contracts, gross

Payments and change in liabilities with respect to

4.1 Additional information relating to life insurance segment:

9-month period ended September 30, 2024 (unaudite	ed):
	Policies not containing savings element
	Risk sold as single policy
	Private
	NIS thousands
Gross risk premiums	125,101
Payments and change in liabilities with respect to insurance contracts, gross	65,812
9-month period ended September 30, 2023 (unaudite	ed):
y month period ended september 60, 2026 (diamant	Policies not containing savings element
	Risk sold as single policy
	Private
	NIS thousands
Gross risk premiums	121,352
Payments and change in liabilities with respect to	•
insurance contracts, gross	53,280
, C	
3-month period ended September 30, 2024 (unaudite	ed):
•	Policies not
	containing
	Risk sold as
	single policy
	Private
	NIS thousands
Gross risk premiums	42,375
Payments and change in liabilities with respect to	
insurance contracts, gross	24,257
3-month period ended September 30, 2023 (unaudite	,
	Policies not
	containing savings element
	Risk sold as
	single policy

Private
NIS thousands

40,823

19,080

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

Year ended December 31, 2023 (audited):

Tear ended December 31, 2023 (addited).	Policies not containing savings element
	Risk sold as single policy
	Private
	NIS thousands
Gross risk premiums	162,323
Payments and change in liabilities with respect to	
insurance contracts, gross	73,770

4.2 Additional information relating to healthcare segment:

9-month period ended September 30, 2024 (unaudited):

	Long-term	Short-term	Total
	NIS thousands	NIS thousands	NIS thousands
Gross premiums	97,307	38,524	* 135,831
Payments and change in liabilities with respect to insurance contracts, gross	81,881	24,888	106,769
* Consists primarily of individual insurance policies			

Consists primarily of individual insurance policies.

9-month period ended September 30, 2023 (unaudited):

	Long-term	Short-term	Total
	NIS thousands	NIS thousands	NIS thousands
Gross premiums	97,772	47,602	* 145,374
Payments and change in liabilities with respect to insurance contracts, gross	65,567	24,588	90,155
* Consists primarily of individual insurance policies			

Consists primarily of individual insurance policies.

3-month period ended September 30, 2024 (unaudited):

	Long-term	Short-term	Total
	NIS thousands	NIS thousands	NIS thousands
Gross premiums	32,328	19,308	* 51,636
Payments and change in liabilities with respect to			
insurance contracts, gross	29,603	11,788	41,391

Consists primarily of individual insurance policies.

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

3-month period ended September 30, 2023 (unaudited):

•	Long-term	Short-term	Total
	NIS thousands	NIS thousands	NIS thousands
Gross premiums	32,711	22,813	* 55,524
Payments and change in liabilities with respect to			
insurance contracts, gross	20,959	10,147	31,106
* C			

^{*} Consists primarily of individual insurance policies.

Year ended December 31, 2023 (audited):

	Long-term	Short-term	Total
	NIS thousands	NIS thousands	NIS thousands
Gross premiums	130,535	55,387	* 185,922
Payments and change in liabilities with respect to insurance contracts, gross	93,844	31,141	124,985

^{*} Consists primarily of individual insurance policies.

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.

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

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

- 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.
- 5. On November 19, 2024, in accordance with the directives of the Commissioner, the Company published the economic solvency ratio report for the June 30, 2024 data on its website. According to the solvency ratio reports as at June 30, 2024 and December 31, 2023, the Company has surplus capital independent of the transitional provisions.

The calculation performed by the Company, as above, as at June 30, 2024 has been reviewed by the independent auditors of the Company in accordance with the principles of ISAE 3000 - Assurance Engagements Other Than Audits or Reviews of Historical Financial Information. The calculation performed by the Company as above as at December 31, 2023 has been audited by the independent auditors of the Company in accordance with ISAE 3400 – The Examination of Prospective Financial Information. These standards apply to the examination and review of the Solvency calculations and are 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.

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

Α. Fair value hierarchy (cont'd):

Pursuant to the aforesaid, during the 9 months ended September 30, 2022, 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.

\mathbf{C}

fai	Septem sured at	ber 30, 2024 (unaud	lited)
fai	sured at		
	ir value		
	through	Loans and receivables	Total
	t or loss ousands	NIS thousands	NIS thousands
		1415 tilousalius	
Marketable debt instruments (1) 2,34	48,278	-	2,348,278
Non-marketable debt instruments (2)	-	121,295	121,295
Other (3) 15	53,123	-	153,123
Total 2,50	01,401	121,295	2,622,696
	Septem	ber 30, 2023 (unaud	lited)
Meas	sured at	,	
fai	ir value		
	through	Loans and	m . 1
	t or loss	receivables	Total
NIS tho	ousands	NIS thousands	NIS thousands
Marketable debt instruments (1) 1,94	46,105	-	1,946,105
Non-marketable debt instruments (2)	-	103,630	103,630
Other (3)	26,653	-	126,653
Total 2,07	72,758	103,630	2,176,388
	Decen	nber 31, 2023 (audit	red)
Meas	sured at		
	ir value		
	through	Loans and	
	t or loss	Receivables	Total
NIS tho	ousands	NIS thousands	NIS thousands
Marketable debt instruments (1) 1,98	39,353	-	1,989,353
Non-marketable debt instruments (2)	-	116,969	116,969
Other (3) 13	31,371	-	131,371
Total 2,12	20,724	116,969	2,237,693

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):

 Sentember 30, 2024

September 30, 2024	
(Unaudited)	
Carrying	Amortized
amount	Cost
NIS thousands	NIS thousands
1,259,878	1,276,340
1,088,400	1,109,020
2,348,278	2,385,360
September	30, 2023
(Unaudited)	
Carrying	Amortized
	Cost
NIS thousands	NIS thousands
829,814	850,004
829,814	850,004
829,814 1,116,291	850,004 1,159,245
,	ŕ
1,116,291	1,159,245 2,009,249
1,116,291 1,946,105	1,159,245 2,009,249 31, 2023
1,116,291 1,946,105 December	1,159,245 2,009,249 31, 2023
1,116,291 1,946,105 December (Audi Carrying	1,159,245 2,009,249 31, 2023 ted) Amortized
1,116,291 1,946,105 December (Audi Carrying amount	1,159,245 2,009,249 31, 2023 ted) Amortized Cost
1,116,291 1,946,105 December (Audi Carrying amount NIS thousands 875,655	1,159,245 2,009,249 31, 2023 ted) Amortized Cost NIS thousands 886,167
1,116,291 1,946,105 December (Audi Carrying amount NIS thousands	1,159,245 2,009,249 31, 2023 ted) Amortized Cost NIS thousands
	Carrying amount NIS thousands 1,259,878 1,088,400 2,348,278 September (Unaud

(2) Composition of non-marketable debt instruments:

	September 30, 2024 (Unaudited)	
	Carrying	
	amount	Fair value
	NIS thousands	NIS thousands
Bank deposits	442	442
Other non-convertible debt assets	120,853	120,853
Total non-marketable debt assets	121,295	121,295

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):

	September 30, 2023 (Unaudited)	
	Carrying amount	Fair value
	NIS thousands	NIS thousands
Bank deposits	569	576
Other non-convertible debt assets	103,061	102,941
Total non-marketable debt assets	103,630	103,517
	December 31, 2023 (Audited)	
	Carrying amount	Fair value
	NIS thousands	NIS thousands
Bank deposits	579	585
Other non-convertible debt assets	116,390	116,317
Total non-marketable debt assets	116,969	116,902

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

	September 30, 2024	
	(Unaudited)	
	Carrying amount	Cost
	NIS thousands	NIS thousands
Marketable financial investments	153,123	95,837
	September 30, 2023	
	(Unaudited)	
	Carrying	
	amount	Cost
	NIS thousands	NIS thousands
Marketable financial investments	126,653	95,837
	December 31, 2023 (Audited)	
	Carrying	
	amount	Cost
	NIS thousands	NIS thousands
Marketable financial investments	131,371	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.

The following motions for the approval of a class action are in various stages of litigation.

With respect to motions for the approval of a class action listed below for which, in management's opinion, which is based on legal opinion obtained by management, it is more likely than not that the Company's defense arguments would be accepted and the motion to approve a class action would be rejected, no provision was included in the financial statements. With respect to motions for the approval of a class action for which it is more likely than not that the Company's defense arguments would be rejected, in full or in part, provisions have been included in the financial statements to cover the amount of exposure estimated by the Company. For proceedings that are at a preliminary stage and their chances cannot be estimated, no provision was included in the financial statements. Where the Company is willing to reach a compromise in any such proceeding, a provision was included in the amount of compromise that is acceptable to the Company.

A. Contingent liabilities - 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.

On February 12, 2018, a first pretrial hearing was held in the case. On July 15, 2018, the court ruled on the stay of proceedings pending a ruling on an appeal that was filed with the High Court of Justice regarding a ruling by the National Court in another case (HCJ 5148/18, Or Shacham et al. - National Labor Court and Castro Model Ltd., hereafter: "Castro HCJ"), on the issue of overtime.

A. Contingent liabilities - motions to certify class actions (cont'd)

1. (cont'd)

On July 11, 2022, a ruling was issued in Castro HCJ, pursuant to which it is permissible to certify a class action for the payment of overtime on commissions or incentives. The ruling further determined 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 Castro HCJ.

On March 7, 2023, the petitioners submitted an update notice to the court, stating that, in view of the ruling in the Castro matter, the proceedings in the case should have been renewed. Nevertheless, the petitioners requested to maintain the stay of proceedings, in anticipation of a ruling in another proceeding that is pending in the National Labor Court against I.D.I Insurance Company (hereinafter: "the IDI Matter"). The Company's response was that the IDI Matter differs materially from that of the Company (in light of the collective relations at the Company) and that, therefore, the Company maintains all of its arguments in the matter and is not bound by rulings that will be given in the IDI Matter. The Company left the decision concerning the stay of proceedings to the court.

On March 13, 2023, by virtue of a court decision, the proceeding was transferred to a different panel at the District Labor Court. On April 23, 2023, the court ordered to reinstate the stay of proceedings in the case. On April 23, 2023, the court ordered to reinstate the stay of proceedings in the case, pending the issue of a ruling in the matter of Direct Insurance by the National Court. On August 20, 2024, the National Court issued a ruling in the matter of Direct Insurance.

On November 5, 2024, the petitioners filed a motion to renew the proceedings. An evidentiary hearing in the motion to certify the class action has been scheduled for March 17, 2025.

2. On April 19, 2020, a motion 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. The amount of the personal damage claimed from the Company is negligible.

On April 20, 2020, a ruling was given, pursuant to which perusal of the motion 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 motion 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 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.

A. Contingent liabilities - motions to certify class actions (cont'd)

2. (cont'd)

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 motion 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.

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 5 below will jointly deliberate the claim against all of the defendants that they have named and that were also named in CA 17072-04-20 Manirav et. Al. vs. Harel (hereinafter: "the Manirav Matter") concerning vehicle insurance policies.

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 motion.

On December 1, 2022, the petitioners submitted their response to the Respondents' response to the motion to certify the class action.

A pretrial hearing in all cases was held on January 3, 2023. In the hearing, it was ruled that the parties will refer to mediation and will update the Court on the status of their discussions by February 12, 2023.

A. Contingent liabilities - motions to certify class actions (cont'd)

2. (cont'd)

It was also ruled that the Manirav Matter will be deliberated and conducted separately from the proceeding – to which the Company is not a party.

On February 12, 2023, the respondents submitted an update notice, pursuant to which they believe that there is no room for mediation in this case and that the court should issue a ruling on the certification motion based on the materials that are available in the case. On April 23, 2023, the parties submitted a joint motion for the validation as a ruling of a procedural arrangement, pursuant to which they relinquish the examination of the declarants and the experts in the case.

On June 29, 2023, the petitioners submitted their summations and a motion to include evidence. The response of the respondents to the motion to include evidence was submitted on July 24, 2023. The respondents are required to submit their summations by October 23, 2023; the petitioners are required to submit their response summations by December 24, 2023.

On October 15, 2023, the court issued a ruling that allows the inclusion as evidence in the case of the actuarial report of Manbara that had been drawn up for the Capital Market, Insurance and Savings Authority.

On March 13, 2024, the respondents submitted their summations. On May 23, 2024, the petitioners submitted their response summations.

On June 2, 2024 and July 9, 2024 supplementary oral summations were heard. On June 21, 2024, the petitioners submitted a motion for the inclusion of evidence. On September 8, 2024, the respondents submitted joint responses to the motions to include evidence; on September 23, 2024, the Company submitted its response to new arguments that were raised by the petitioners in the recent summations hearing.

3. On April 20, 2020, a claim and a motion 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 were 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 overpaid 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. The amount of the personal damage claimed from the Company is negligible.

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 motion are to be submitted by all the respondents within 90 days of a ruling on the petition in accordance with Section 7(B).

A. Contingent liabilities - motions to certify class actions (cont'd)

3. (cont'd)

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 the Manirav Matter concerning vehicle insurance policies.

On August 30, 2021, the respondents filed a consensual motion for the suspension of hearings until the issue of a peremptory ruling in 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 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).

On December 6, 2021, the petitioners in the aforesaid proceeding (Nachum petition) and in proceeding PC 16971-04-20 (Nir 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.

On April 7, 2022, the respondent submitted its response to the certification motion.

On December 1, 2022, the petitioners submitted their response to the Respondents' response to the motion to certify the class action.

A pretrial hearing in all cases was held on January 3, 2023. In the hearing, it was ruled that the parties will refer to mediation and will update the Court on the status of their discussions by February 12, 2023.

It was also ruled that the Manirav Matter will be deliberated and conducted separately from the proceeding – to which the Company is not a party.

On February 12, 2023, the respondents submitted an update notice, pursuant to which they believe that there is no room for mediation in this case. On April 23, 2023, the parties submitted a joint motion for the validation as a ruling of a procedural arrangement, pursuant to which they relinquish the examination of the declarants and the experts in the case.

On June 29, 2023, the petitioners submitted their summations and a motion to include evidence. The response of the respondents to the motion to include evidence was submitted on July 24, 2023. On October 15, 2023, the court issued a ruling that allows the inclusion as evidence in the case of the actuarial report of Manbara that had been drawn up for the Capital Market, Insurance and Savings Authority.

On March 13, 2024, the respondents submitted their summations. On May 23, 2024, the petitioners submitted their response summations.

On June 2, 2024 and July 9, 2024 supplementary oral summations were heard.

A. Contingent liabilities - motions to certify class actions (cont'd)

3. (cont'd)

On June 21, 2024, the petitioners submitted a motion for the inclusion of evidence.

On September 8, 2024, the respondents submitted joint responses to the motions to include evidence; on September 23, 2024, the Company submitted its response to new arguments that were raised by the petitioners in the recent summations hearing.

4. On January 17, 2021, a motion 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.

The amount of the class action against the Company for all class members is estimated at more than NIS 2.5 million. The amount of the personal damage claimed from the Company is negligible.

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 motion. On July 19, 2021, a statement of response was submitted to the response on the certification motion.

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 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. 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.

On January 5, 2023, a pretrial hearing was held in the case, in which it was ruled that the respondent will submit its response to the discovery motion and to the questionnaires submitted by the petitioner, by January 15, 2023.

A. Contingent liabilities - motions to certify class actions (cont'd)

4. (cont'd)

On January 13, 2023, the respondent submitted a notice and a motion, informing the Court that it has delivered to the petitioner a list of all of the documents and questionnaires that it has consented to furnish. However, according to the respondent, at the conclusion of the discussions between the parties, there are still disagreements between the parties concerning the discovery of documents and the completion of the questionnaires, which will be addressed at a later date.

On February 20, 2023 and March 13, 2023, the petitioner submitted notices concerning the preliminary proceedings and the continuation of the proceeding.

On March 30, 2023, the petitioner submitted an update notice, requesting the court to schedule an evidentiary hearing in the case and approve the submission of documents that had been received as part of disclosure; and on May 8, 2023 the petitioner submitted the documents that were received as part of the disclosure.

On January 8, 2024, an evidentiary hearing in the case was held.

The petitioner submitted its summations on April 8, 2024; the respondent submitted its summations on August 19, 2024.

On November 7, 2024, the parties filed a notice informing the court of the referral of the case to mediation and requesting the deferral of the date for the submission of response summations by the petitioner. On November 13, 2024, the court approved the request of the parties and ordered them to submit an update regarding the date of the first mediation session.

5. 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 petitioner estimates the total class damages at more than NIS 2.5 million (district court jurisdiction). The amount of the personal damage claimed from the Company is negligible.

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.

On May 9, 2023, the parties received the draft report of the external auditor and conducted negotiations based thereon. On February 25, 2024, a motion was filed with the court for the approval of a compromise arrangement, pursuant to which the respondent will give its representatives that handle third-party vehicle claims instructions with regard to the handling of claims; in addition, it has been agreed on a payment of compensation and professional fees in a total amount of NIS 120 thousand. The court ordered the publication of the motion and set a period of 45 days for the filing of objections, if any. As the set period has elapsed with no objections submitted, the parties have filed a motion for the issue of a ruling. The parties have submitted clarifications to the Attorney General, who gave his position in November 2024. A discussion in the case with a representative of the Attorney General has been scheduled for December 8, 2024.

A. Contingent liabilities - motions to certify class actions (cont'd)

6. On November 30, 2022, a motion to certify a class action was filed against the Company, alleging wrongful collection by the Company in overseas travel insurance policies.

The motion alleges that in instances where the policyholder purchases an overseas travel insurance policy and cuts short his stay overseas or cancels his trip, the Company does not reimburse to the policyholder the full amount of insurance premiums to which he is entitled for the expansions that he had purchased and that the Company retroactively raises the insurance premiums without notifying the policyholder and obtaining his consent.

The overall damages attributed to the Company are in excess of NIS 2.5 million. The amount of the personal damage claimed from the Company is negligible.

On April 13, 2023, the Company submitted its response to the certification motion; on June 8, 2023, the petitioner submitted its response to the response of the Company.

On January 2, 2024, a preliminary hearing was held in the proceeding and the parties were given the option to submit a notice, within thirty days, of whether or not they were able to reach understandings in relation to the proceeding.

On March 7, 2024, the respondent submitted a consensual notice in which it requests to inform the court, within 30 days, whether the parties were able to reach understandings; on April 8, 2024, the Company filed a notice stating that the parties were unable to reach understandings and requesting the scheduling of an evidentiary hearing in the motion to certify the claim as a class action.

An evidentiary hearing in the case has been scheduled for November 14, 2024. Following the transfer of the certification motion to a different panel, on September 9, 2024 a preliminary hearing was held, further to which the petitioner announced that he will not be demanding the holding of an evidentiary hearing in the case. The Company has also consented not to hold an evidentiary hearing.

Accordingly, the court ruled that the petitioner is required to submit its summations by December 15, 2024; the Company is required to submit its summations by February 27, 2025; and the petitioner may submit its response summations by April 1, 2025.

7. On January 12, 2023, a motion to certify a class action was filed against the Company concerning personal accidents insurance.

The motion alleges that the Company does not compensate its policyholder for days of hospitalization at a rehabilitation facility (in the case of the petitioner - Loewenstein Hospital), since a rehabilitation facility is excluded in the insurance policy from the definition of "hospital" and therefore does not create entitlement to compensation. The motion further alleges that the definition of "hospital", as presented in the policy, does not coincide with the increased disclosure requirement that applies to insurers, pursuant to which the Company is obligated to provide greater clarity and disclosure in formulating the insurance contract.

The personal damage of the petitioner against the respondent is NIS 800 per day of hospitalization over a duration of 100 days, totaling a nominal NIS 80,000. The cumulative class damage is estimated NIS 2.5 million, but cannot be accurately assessed at the certification motion stage. On July 6, 2023, the respondent submitted its response to the certification motion.

A. Contingent liabilities - motions to certify class actions (cont'd)

7. (cont'd)

A pre-trial hearing in the case was held on September 11, 2023. In the hearing it was determined, inter alia, that the respondent shall be required to submit its position on the referral of the case to mediation. On February 6, 2024, the petitioner submitted an update notice, pursuant to which the respondent believes that the proceeding should not be referred to mediation, hence requesting the court to schedule a hearing in the case. On April 16, 2024, a pretrial hearing in the case was held. An evidentiary hearing in the case has been scheduled for November 26, 2024.

8. On September 12, 2023, a motion was filed for the certification of a class action against the Company and against another insurance company, alleging that the Company is acting contrary to the law by charging the payment for overseas travel insurance policies based on the exchange rate on the day preceding the payment date, whereas according to the terms of the policy the charge should be based on the exchange rate as of the payment date.

The overall amount of damages attributed to the Company is NIS 2.1 million. The amount of personal damages sought of the Company is negligible.

On March 6, 2024, the Company submitted its response to the certification motion. On May 15, 2024, the parties submitted a notice, stating their interest in conducting negotiations for the petitioner's withdrawal of the certification motion. Accordingly, the preliminary hearing scheduled for June 10, 2024 was cancelled and the Court granted the parties 30 days to advance the negotiations.

On July 2, 2024, the petitioner informed the court that the parties were unable to reach an understanding and requested that a date be set for the submission of a response to the response to the certification motion and a preliminary hearing be scheduled. On October 5, 2024, the petitioner submitted a response to the response to the certification motion.

A preliminary hearing in the case has been scheduled for January 1, 2025.

9. On September 14, 2023, a motion was filed for the certification of a class action against the Company and 7 other insurance companies, alleging that the respondents refuse to include flatbed towing in the towing terms of service, requiring the vehicle owners to pay an additional separate charge where flatbed towing is required.

The overall amount of damages attributed to all the companies named in the claim is NIS 80 million. The amount of personal damages sought of the Company is negligible.

On November 9, 2023, the petitioners submitted a motion to amend the certification motion by way of addition of two petitioners and two respondents. On the same day, the court ruled against the motion to amend, inter alia, due to the additional and increased workload that this would create for the court.

On May 5, 2024, the respondent filed a motion for the striking in limine of the motion. The court ordered the parties to inform it on the progress of the mediation proceeding by September 8, 2024 and required petitioner 1 to submit its response thereafter.

On June 27, 2024, the court ordered the transfer of the case to a different panel. A hearing in the case has been scheduled for February 19, 2025.

A. Contingent liabilities - motions to certify class actions (cont'd)

10. On June 5, 2024, a motion to certify a class action was filed against the Company, alleging overcharging in the use of the Just Drive application, as a result of an erroneous and excessive calculation of the travel distances due to the GPS disruptions taking place since the breaking out of the Swords of Iron war.

The overall amount of damages estimated by the petitioner for the class is NIS 30 million. The amount of personal damages sought of the Company is negligible.

The respondent is required to submit its response to the certification motion by November 28, 2024. The petitioner is required to submit its response to the response to the certification motion by December 30, 2024.

A pretrial hearing of the case has been scheduled for June 10, 2025.

11. On September 9, 2024, a motion to certify a class action against the Company was filed, alleging that the Company unduly extends and renews "Protected Driver" insurance policies.

The overall amount of damages estimated by the petitioner for the class is NIS 1.8 million. The amount of personal damages sought of the Company is negligible.

The Company is required to submit a response to the certification motion by December 17, 2025.

	Number of claims	The amount claimed - NIS thousands
Pending petitions for certification of class actions:		
Amount of claim specified	7	128,074
Amount of claim not specified	4	-
Total	11	128,074

B. Contingent liabilities - claims that were concluded in the reported period:

1. On January 8, 2017, a motion 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 in relation to the Company is estimated at NIS 12,250 thousand. The amount of personal damages sought of 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 through November 2020 and in March through May 2021.

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.

Motions to certify class actions (continued):

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

B. Contingent liabilities - claims that arose after the reported period (cont'd)

1. (cont'd)

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 (hereinafter: "the Litvinov Matter"), rejecting the motion to certify a class action. The notice also stated that the named plaintiff in the Litvinov Matter 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 Matter.

On March 10, 2022, the respondents submitted their response to the petitioners' notice.

The evidentiary hearing that was scheduled for March 20, 2022 was converted into a pre-trial hearing in which the issue of the suspension of proceedings was discussed.

The court issued a ruling, suspending the proceedings in the case pending the issue of a ruling on the appeal in the Litvinov Matter. 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 25, 2022, an appeal was filed with the Supreme Court regarding the Central District Court's ruling in the Litvinov Matter. On March 10, 2024, a ruling was issued, rejecting the appeal in the Litvinov Matter.

A pre-trial hearing was held on June 16, 2024. The court ruled, following the rejection of the appeal in the Litvinov Matter, that the petitioners will file a motion to withdraw the certification motion. On July 1, 2024, the petitioners filed a motion to withdraw the certification motions.

On July 16, 2024, a ruling was issued, accepting the petitioners' withdrawal. The court adjudicated expenses of NIS 10 thousand in favor of the Company.

2. 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 windowpanes 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 reason 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

B. Contingent liabilities - claims that arose after the reported period (cont'd)

2. (cont'd)

on the motions concerning the discovery of documents and questionnaires and a motion to subpoena 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.

On September 7, 2022, a pretrial hearing was held, in which dates have been set for the submission of summations by the parties.

On September 14, 2022, the respondents submitted their answers to the questionnaire that they had been requested to fill out.

The petitioner submitted its summations on November 15, 2022; the respondent submitted its summations on March 29, 2023; the petitioner submitted its response summations on May 29, 2023.

On July 4, 2024, a ruling was issued, rejecting the motion to certify the claim as a class action. The court adjudicated expenses of NIS 12 thousand in favor of the Company.