



Harel Insurance Investments and Financial Services Ltd.

Interim Report as at March 31, 2022

Contents

1	Description of the Company	Page
1.1	General	1
1.2	Shareholders in the Company	2
2	Financial position and results of operations, equity and cash flows	2
2.1	Material changes in the Group's business and events in the Reporting Period	3
2.2	Material changes in the Group's business and events after the Reporting Period	3
2.3	Developments in the macroeconomic environment of the Group	5
2.4	Summary of the legislative arrangements and provisions of law in the Group's operating segments	10
2.5	Condensed data from the consolidated financial statements of Harel Investments	16
2.6	Other key information and effects by segment	21
2.7	Liquidity and sources of finance	21
2.8	Dividend	22
3	Market risks - exposure and management	22
4	Corporate governance	22

5 Disclosure concerning the economic solvency ratio



Board of Directors Report

Harel Insurance Investments and Financial Services Ltd. Board of Directors Report for the three months ended March 31, 2022

The Board of Directors Report for the three months ended March 31, 2022 ("the Reporting Period"), reflects the principal changes in the state of the business of Harel Insurance Investments & Financial Services Ltd. ("Harel Investments" or "the Company") during this period, and it was prepared assuming that the reader is also in possession of the Group's full Periodic Report for 2021 which was published on March 28, 2022 ("the Periodic Report").

The Board of Directors' Report also contains forward-looking information, as defined in the Securities Law, 1968. Forward-looking information is uncertain information concerning the future based on information in the company's possession at the time of publishing the report and which includes the company's assessments or intentions at the date of the report. Actual performance may differ substantially from the results estimated or inferred from this information. In certain instances, sections can be found that contain forward-looking information, where words such as: "the Company/the Group estimates", "the Company/the Group believes", "the Company/the Group anticipates", and the like appear, and such forward-looking information may also be worded differently.

1 Description of the Company

1.1 General

Harel Insurance Investments and Financial Services Ltd. is a public company whose shares have been traded on the Tel Aviv Stock Exchange since 1982. The Company, together with its subsidiaries, ("the Group") operates principally in the following areas:

- A. In the various sectors of insurance, the Company operates through the following subsidiaries: Harel Insurance Company Ltd. (under full control) ("Harel Insurance"); Interasco Societe Anonyme General Insurance Company S.A.G.I (in which the Company holds 94%) ("Interasco" - which operates in non-life insurance in Greece; Turk Nippon Sigorta A.S. (fully controlled) ("Turk Nippon"), operating in Turkey; EMI - Ezer Mortgage Insurance Company Ltd. (fully controlled) ("EMI"); and ICIC - Israel Credit Insurance Company Ltd. (with a 50% holding) ("ICIC").
- B. In the long-term savings sector, the Company operates through the following subsidiaries that are provident fund and pension fund management companies: Harel Pension and Provident Ltd. (fully controlled) ("Harel Pension & Provident"), which manages pension and provident funds; Tzva Hakeva Savings Fund Provident Funds Management Company Ltd. (under full control) ("Tzva Hakeva Saving Fund Provident Funds Management Company Ltd. (fully controlled) ("Tzva Hakeva") which manages an education fund for IDF career soldiers and pensioners; LeAtid Pension Funds Management Company Ltd. (in which the Company has a 79% stake), which manages an old pension fund ("LeAtid").

- C. In the financial services and capital market segment the Company operates through the subsidiary Harel Finance Holdings Ltd. ("Harel Finance") (fully controlled by the Company) and its principal subsidiaries: Harel Mutual Funds Ltd. ("Harel Mutual Funds") a mutual fund management company; Harel Finance Investment Management Ltd. ("Harel Finance Investments") which is a licensed portfolio manager and manages investment portfolios; Harel Index Trade Ltd. a company involved in market making for the ETFs managed by Harel Mutual Funds; Alfa Tech Investment Management Ltd., a licensed portfolio manager which manages investments for funds issued by Harel Mutual Funds using computerized models; Harel Finance Alternative Ltd., a company that serves as a general partner in the partnership Harel Finance Alternative R.E., a limited partnership registered in the USA; Harel Exchange Traded Deposit Ltd., a company that issued bonds backed by deposits.
- D. In the credit sector- through the subsidiary Hamazpen Shutaphim Laderech Ltd. (in which the Company holds 70%) ("Hamazpen") which creates innovative financing solutions for quality entrepreneurs providing credit to small and medium businesses, including the provision of mezzanine loans; through a company fully owned by Harel Insurance, Harel 60+ Ltd. ("Harel 60+"), which provides mortgage loans, including "reverse mortgage" which is a loan provided to borrowers aged 60 or more in the form of a lien on their homes; and also within the framework of sale guarantee activity in Harel Insurance.

The Company's separate activity centers on the management, control and supervision of the subsidiaries, on-going planning of the Group's operations, and initiating activity and investments, both directly and through the Group's companies.

1.2 The Company's shareholders

Yair Hamburger, Gideon Hamburger and Nurit Manor are the principal shareholders in the Company (in this section: "the Shareholders"), holding 46.99% of the voting rights and the issued share capital of the Company.

The Shareholders hold the Company principally through G.Y.N. Financial Consulting & Management Ltd. 2017, a limited partnership fully owned and controlled by the Shareholders, which they hold, as limited partners, through private companies fully owned by them ("G.Y.N. Partnership") and they also hold the general partner in G.Y.N. Partnership.

2 Financial position and results of operations, equity and cash flow

2.1 Material changes in the Group's business and events in the Reporting Period

2.1.1 Rating for the Company and Harel Insurance by Midroog

On a Midroog rating for the Company and Harel Insurance, see Note 6C to the Financial Statements.

2.1.2 Revision of the illiquidity premium

On a revision of the illiquidity premium - see Section 2.4.1.1.2 below.

2.1.3 Expected termination of office by Corporate Counsel and appointment of a Corporate Counsel.

On March 20, 2022, Ms. Nataly Mishan-Zakai, deputy CEO of Harel Insurance and Chief Legal Counsel of Harel Group and also Chair of the Board of Directors of the Group's pension and provident companies, announced her decision to step down from her positions in Harel Group after an eight-year term of office.

The Company's Board of Directors announced the appointment of Adv. Gilad Shapira as Chief Legal Counsel of Harel Group. The appointment will enter into force on June 1, 2022.

2.1.4 Decision to distribute a dividend

On a decision from November 28, 2022, concerning a dividend distribution in the amount of NIS 300 million, that was paid on April 26, 2022, see Note 9(3) to the Financial Statements.

2.1.5 Special bonus for employees

In view of the Company's excellent performance in 2021, management decided to award all employees who have been with the Company for more than six months a bonus of NIS 10,000. This special bonus amounts to approximately NIS 50 million and is in addition to the regular bonuses that the Company pays its employees. This bonus was approved by the Company's Board of Directors on March 28, 2022.

2.2 Material changes in the Group's business and events after the Reporting Period

2.2.1 Increase of the interest rate curve

Immediately prior to the date of publication of the report, the risk-free interest rate curve rose to above its level on March 31, 2022, which could lead to a reduction of the insurance liabilities. In contrast, an increase of the interest rate curve could negatively impact the value of the financial and other assets in a manner that might reduce this aforesaid impact. Notably, the information described above should not be construed as an estimate of the Company's financial results. This information is only partial and it does not include other components of profit or loss from investments and other effects.

On the effect of the rising interest rate curve on the solvency of Harel Insurance, see Section 5E below.

2.2.2 Full early redemption of bonds (Series 8) of Harel Finance & Issues

On a decision concerning the full early redemption of Series 8 bonds issued by Harel Finance & Issues, see Note 6C to the Financial Statements.

2.2.3 Expected termination of office by an officer in a subsidiary

On the expected termination of office by an officer in a subsidiary, see Note 10 to the Financial Statements.

2.3 Developments in the macroeconomic environment of the Group

The Group's performance is significantly affected by the yields attained in the capital market and by the economic, political and security situation in Israel and worldwide. Following are the key factors in the macroeconomic environment that affect the Group's activity:

2.3.1 General

The war in Ukraine and slowdown of economic activity in China are aggravating disruptions to the global production chain, increasing inflationary pressure and slowing down global economic activity. Forecasts for growth have therefore been revised downwards, although global output is expected to continue to expand in light of the decrease in morbidity attributed to COVID-19 and the lifting of restrictions in most of the developed markets.

Inflation around the world continues to rise in the wake of shocks in supply alongside increasing domestic demand, particularly in the western economies. In most countries, inflation is significantly higher than the targets set by the central banks and tighter monetary policy therefore continues the world over.

2.3.2 Developments in the Israeli economy

According to initial estimates, Israel's GDP shrank by an annual rate of 1.6% in Q1 2022. Nonetheless, during the quarter unemployment continued to fall, revenues from taxes were high and the deficit as a percentage of GDP continued to decrease.

2.3.3 Stock market

In Q1 2022, share prices fell on most of the world's leading stock markets. Contributory factors were the expectation that central bank interest rates would rise more rapidly and the outbreak of the war between Russia and Ukraine.

At the end of Q1 2022, the MSCI World Index was down 5% and the corresponding MSCI Emerging Markets Index fell by 7%. In Israel, the TA-125 Index rose by 2% during the period.

2.3.4 Bond market

In the bond markets, yields rose sharply in the government bond curves against the backdrop of inflation and expectations of tighter monetary policy.

At the end of Q1 2022, the general bond index was 3.4% down, where the government bond index was 4.3% down and the corporate bond index was 2.3% down.

2.3.5 Mutual funds

At the end of Q1 2022, the mutual funds recorded net redemptions of NIS 2.6 billion. Particularly noticeable were redemptions of NIS 2.3 billion in the bond funds, compared with net raisings of NIS 1.8 billion in funds specializing in shares.

2.3.6 ETFs

At the end of Q1 2022, net redemptions of NIS 30 million were recorded. Particularly prominent were net redemptions of NIS 1.1 billion in the bond ETFs in contrast with net raisings of NIS 1.3 billion in the ETFs specializing in shares.

2.3.7 Foreign exchange market

At the end of Q1 2022 the shekel was 0.6% weaker against the Bank of Israel's basket of currencies, with 2.1% depreciation against the US dollar and almost no change against the

Euro.

2.3.8 Inflation

According to the last known index published at the end of Q1 2022 (February index), the CPI rose by 1.2% in Q1 2022 (December - February) and by 3.5% in the last 12 months.

2.3.9 Bank of Israel interest

In Q1 2022, the Bank of Israel left the interest rate unchanged at 0.1%.

2.3.10 Events after the Reporting Period

Since the beginning of Q2 2022, the Bank of Israel has raised the interest rate twice in succession and at the date of publication of this report, the interest rate is 0.75%. A press release noted that the Bank will continue to gradually increase the interest rate.

Inflation in April 2022 rose to 4%.

The government has lifted most of the COVID-19 restrictions.

2.4 Summary of the legislative arrangements and provisions of law in the Group's operating segments

Following is a summary of the principal legislative arrangements and provisions of law published in the Reporting Period - up to the date of publication of this report:

2.4.1 General

2.4.1.1 Circulars

2.4.1.1.1 On April 13, 2022, a circular was published concerning an amendment to the provisions of the Consolidated Circular on the Management of Investment Assets (Designated Bonds), which, among other things, prescribed provisions relating to investment packages. These provisions include the following: a stipulation that in addition to investment tracks, investments performed as part of a yield-guaranteed track can also be managed in investment packages; an option is offered to transfer securities to a marketable package in certain cases; it was stipulated that an investment package for the management of investments risks in foreign currency will, under certain conditions, be considered a marketable package; an option is provided to manage money in the yield-guaranteed track through an investment package designated for such funds; it was determined that in any package, government bonds redeemable within one year may be held and used as collateral for the package assets; permission was granted to hold cash and cash equivalents in an index-tracking investment track at a rate of no more than 40% even in a bank operating outside Israel, and provided that the bank has a rating of at least AA-; it was determined that an investment by a financial institution or group of investors in a real-estate corporation, according to its definition in the Consolidated Circular, at a rate of between 20% and 49% of a particular category of means of control, will be permitted only in a real-estate corporation in which the means of control are not marketable.

- 2.4.1.1.2 On February 17, 2022, a circular was published concerning an amendment to the provisions of the Consolidated Circular on the Measurement of Liability illiquidity premium, which prescribed a revised method of estimating the illiquidity premium to be used in calculating the LAT. This method will be based, with certain changes, on the methodology for calculating the Volatility Adjustment component which is currently applied within the framework of the Solvency II Economic Solvency Regime and will replace the QIS5 method which has been used until now.
- 2.4.1.1.3 On January 5, 2022, a letter of principles and an amendment to the Consolidated Circular were published on the subject of implementing an Own Risk and Solvency Assessment (ORSA) by insurance companies, which determined that insurance companies must report to the Commissioner about ORSA once a year, in the month of January. The application will be gradual starting on January 1, 2023, with supplements on January 1, 2024.
- 2.4.1.1.4 On January 2, 2022, the Commissioner published an amendment to a number of circulars on the investigation and settlement of claims and handling of complaints from the public; service to the customers of financial institutions; enrollment in insurance; and regulation of the way in which supervised entities must investigate complaints from the public regulating how the financial institution or marketing entity, as applicable, shall provide the service to senior citizens (aged 67 and above). Furthermore, with respect to enrolment in the insurance, provisions were added for all candidates for insurance, including the addition of a comparison clause and cancellation of an original policy in the non-life insurance sectors, and amendment of an appendix listing those practices that are not to be used at the time of enrollment in the insurance.
- 2.4.1.2 Draft circulars

On May 23, 2022, the Commissioner published several regulatory provisions on the method of adopting International Financial Reporting (IFRS) 17 in Israel ("the Standard" or "IFRS 17"), as detailed below.

A final and binding version of the roadmap for the adoption of IFRS 17 concerning insurance contracts, setting out the time schedules and measures for deployment by the insurance companies towards application of the Standard in Israel on January 1, 2024, including a reporting requirement, within the framework of a special note in the financial statements, key proforma reports that will include, at the very least, the statement of financial position and statement of comprehensive income (without comparison figures), prepared in accordance with IFRS 17 and IFRS 9 in the financial reports for Q2 2023 and for 2023 annual; a sixth draft updating the provisions of the Consolidated Circular on Measurement - Appendix of professional issues in application of the Standard and which proposes, among other things, updating the method of estimating and calculating a liquidity premium for the purpose of setting a discounting interest rate and also providing several clarifications on the following: inclusion of insurance contracts, allocation of insurance contracts into portfolios, adjusting the risk for non-financial risk and classifying liabilities for insurance contracts in which payment of the claim involves the presence of two insurance risks; a draft updating the provisions of the Consolidated Circular on the subject of issuing reports to the public,

and which proposes defining provisions with respect to the disclosure required in the quarterly reports of insurance companies from the date of application of the Standard; a third draft of questions and answers file for application of the Standard in Israel, which updates several non-binding Capital Market Authority positions and interpretations on issues arising from the application of IFRS 17 and IFRS 9.

On January 5, 2022, the Commissioner published several drafts on additional topics relating to application of the Standard:

A second draft which updates the provisions of the Consolidated Circular on reporting to the public, which proposes provisions concerning the disclosure required in the annual financial reports of insurance companies from the date of application of the Standard; a draft updating the provisions of the Consolidated Circular on the management of investment assets for insurers applying the Standard which proposes provisions for defining categories of liability and the method of holding the investments to cover the liabilities.

2.4.1.3 Instructions and clarifications

- 2.4.1.3.1 On January 31, 2022, a Commissioner's position was published for public comment on formulation of the desired policy regarding a members' investment committee: functions and duties of the committee, composition and appointments, which details the changes required in defining the goals, functions and activity of the members' investments fund, including focus of the committee's functions as a supervisory rather than an involved entity.
- 2.4.1.3.2 On January 9, 2022, the Commissioner published a policy paper on investing in insuretech corporations and investment corporations focusing on innovative financial technology. The paper sets out guidelines and conditions for the Commissioner to grant approval to requests from financial institutions under Regulation 33(B) of the Supervision of Financial Services (Provident Funds) (Investment Rules applicable to Financial Institutions) Regulations, 2012, for investing in companies that invest in insuretech ventures and companies whose objective is to invest in innovative financial technologies.
- 2.4.2 Life assurance and long-term savings
 - 2.4.2.1 Provisions of law
 - 2.4.2.1.1 On May 24, 2022, regulations were published the purpose of which is to make adjustments and amendments to the Supervision of Financial Services (Provident Funds) (Investment Rules applicable to Financial Institutions) Regulations, 2012, the Supervision of Financial Services (Provident Funds) (Recognition of a new comprehensive pension fund yield) Regulations, 2017, and the Supervision of Financial Services (Provident Funds) (Transfer of Money between Provident Funds), 2008, for the purpose of implementing the Economic Efficiency (Legislative Amendments to Achieve the Budget Targets for the 2021 and 2022 fiscal years), 2021, Chapter C: Guaranteeing Stability of the Pension Fund Yields, which was published on November 15, 2021. Among other things, this law prescribes that the mechanism for designated bonds for the new and old pension

funds will be replaced by a new mechanism to guarantee the yield supplement.

- 2.4.2.1.2 On April 10, 2022, draft Supervision of Financial Services (Provident Funds) (Direct Expenses for Performing Transactions) (Amendment no. ____) Regulations, 2022, were published. The draft regulations extend until December 31, 2022, the temporary order prescribed in Section 3A of these Regulations, define additional categories of direct expenses for performing transactions in provident fund assets, exclude from the scope other categories of expenses, and limit certain direct expenses to 0.25% of the total revalued amount of the institutional investor's assets. Additionally, the draft proposes that from January 1, 2023, the maximum rate of direct expenses that institutional investors may collect in any calendar year will be determined by the institutional investor for each investment track it manages, and the rate shall be published on its website. The draft was published further to the recommendations of the Yaffe Committee from October 29, 2021, which was appointed by the Commissioner in order to review the direct expenses.
- 2.4.2.1.3 On April 6, 2022, Supervision of Financial Services (Insurance) (Group Work Disability Insurance) Provisions, 2022, were published. These provisions amended the Supervision of Financial Services (Insurance) (Group Work Disability Insurance) Regulations, 2006 and prescribed additional provisions relating to group work disability insurance plans. Among other things, an obligation was prescribed to obtain the insured's consent for his enrollment in the group policy and for increasing the premium, and limitations were placed on the conditions of the follow-on policy proposed when the group policy ends, including the premium that may be collected on the policy.
- 2.4.2.1.4 On January 24, 2022, Supervision of Financial Services (Provident Funds) (Management Fees) (Amendment) Regulations, 2021, were published which prescribe setting an upper limit on management fees that will not exceed 0.3% per annum payable by annuity recipients in insurance policies to be sold after February 1, 2022, and by those receiving an annuity from a comprehensive or general pension fund, to be applicable from February 1, 2022.

2.4.2.2 Circulars

On March 30, 2022, the Commissioner published a circular concerning an amendment to the circular on the procedure for locating members and beneficiaries. The amended circular postpones by two years application of the obligation to report to the Guardian General the existence of the money of members which whom contact has been severed and of deceased members, so that the reporting will moved to the beginning of the quarter after the quarter in which 11 years have passed since the date on which contact with the member was severed, provided that the member has reached the age of 70, or to the beginning of the quarter after the quarter in which 11 years have passed from the time that the financial institution was informed of the member's death, and the termination condition as defined in the circular and in the Supervision of Financial Services (Provident Funds) (Locating Members and Beneficiaries) Regulations, 2012, was not satisfied.

2.4.2.3 Draft circular

On May 19, 2022, the Commissioner published a draft circular concerning the management of investment tracks in a provident fund, that proposes establishing rules regarding investment tracks that a financial institution may manage in provident funds and life assurance policies that are not insurance funds under its management. Among other things, the draft circular proposes that new members who have not chosen an investment track, will be enrolled in defined target tracks for retirement (cohorts) which will serve as default option tracks. Additionally, the draft circular prescribes a list of specialist investment tracks that can be managed in savings products, including actively managed in accordance with Jewish (religious) law or in environmental and sustainability sectors. It is also proposed that financial institutions shall be obligated to offer an integrated marketable securities investment track and a flexible index-tracking investment track, as well as limiting the period of investment in a monetary investment track to just two years.

2.4.3 Health insurance

2.4.3.1 Circular

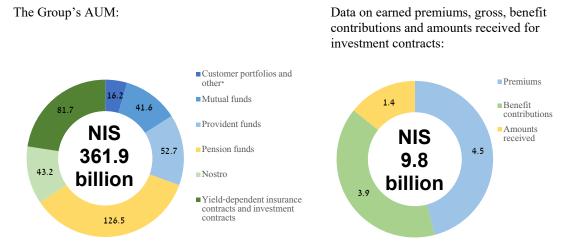
On March 28, 2022, the Commissioner published a circular amending the provisions of the Consolidated Circular - Section 6, Part 3, Chapters 1, 2, 3, 4 and 6 "Drawing up a health insurance plan". The circular sets out provisions which include a new structure for health insurance the main points of which provide a definition of a standard basic health policy, where only after such a policy has been purchased, from the same company or another company, may additional health coverages and riders be purchased that were also defined in the circular. The circular also prescribes provisions concerning how a personal lines health policy should be marketed and how to present the premium to the candidate for insurance; the sale of double insurance in personal-lines indemnity policies is prohibited; and a discount on the premiums may be offered to the insured at a fixed rate only and for a period of at least ten years.

On the same date, draft provisions of the Supervision of Financial Services (Insurance) (Conditions in an Insurance Contract for a Basic Health Policy) Regulations, 2021, were published. Accordingly, standard conditions are proposed for the basic health policy which will consist of three standard policies: a policy for transplants and special treatment abroad, a policy for medications which are not in the health services basket, and a policy for surgery and non-surgical treatment abroad. The draft provisions also propose that insurers may only change the wording of the proposed conditions with the Commissioner's approval.

2.4.3.2 Draft circular

On February 28, 2022, a draft circular was published concerning revised tariffs in updated health policies. Among other things, the draft circular sets out conditions according to which insurance companies may update the premium in personal lines medical expenses insurance plans sold after the onset of the final circular without incurring an obligation to inform the Commissioner of the update in advance. The draft circular also proposes allowing insurance companies to offer insureds to reduce the amount of the premium increase by increasing the deductible or reducing the coverage, subject to the Commissioner's approval.

2.5 Condensed data from the consolidated financial statements of Harel Investments



The assets managed by the provident funds, pension funds, mutual funds and in customers' portfolios are not included in the Company's consolidated financial statements.

Amounts received in respect of investment contracts are not included within premiums but are recognized directly in liabilities for insurance contracts and investment contracts. In the Reporting Period, the amounts received for investment contracts recognized directly in the reserves for investment contracts amounted to NIS 1,383 million, compared with NIS 687 million in the corresponding period last year.

2.5.1 Comprehensive income by segment (NIS million):

		For the t months o March 3	ended	-	<u>For the year</u> <u>ended</u> December 31
	<u>Notes</u>	2022	2021	change in %	2021
Life assurance and long-term savings					
Life assurance	А	(218)	189	-	750
Pension	В	15	18	(17)	91
Provident	В	10	15	(33)	68
Total life assurance and long-term savings segment		(193)	222		909
Non-life insurance	С				
Compulsory motor		5	(18)	-	(69)
Motor property		(70)	18	-	(61)
Property and other lines of business		26	21	24	119
Other liabilities lines of business		85	6	-	69
Mortgage insurance		8	15	(47)	53
Total non-life insurance segment		54	42	29	111
Health insurance	D	592	(99)	-	535
Insurance companies overseas	Е	(30)	(5)	-	(68)
Financial services	F	12	17	(29)	78
Not attributed to segments of operation		22	165	(87)	598
Total before tax		457	342	34	2,163
Tax expenses		130	87	49	642
Other comprehensive income after tax		327	255	28	1,521
Return on Equity in annual terms		15%	13%		18%

The Group's activity and results are considerably affected by the capital markets, both through management of the Group's Nostro investments and through the management fees collected on the management of members' assets in profit-sharing policies, pension fund members and provident funds. In the Reporting Period, against the backdrop of the recent conflict between Russia and Ukraine and rising inflation worldwide which has increased the prospect of higher interest rates, prices on the capital markets dropped, adversely affecting the results of the Company's activity. Capital market yields in the Reporting Period were lower than the yields in the corresponding period last year

Additionally, the Group's results are also affected by changes in the risk-free interest rate curve, changes in the difference between the fair value and book value of the non-marketable assets, and by actuarial studies. In the Reporting Period, there was a sharp increase in the risk-free interest rate curve, which led to a reduction of the insurance liabilities in personal lines long-term care, compulsory motor and liabilities lines of business. In the corresponding period last year, the risk-free interest rate curve decreased, leading to an increase of the insurance liabilities in these lines of business.

For additional information in connection with special effects on comprehensive income, see Section 2.5.2.

A. Life assurance - results in the Reporting Period were mainly affected by capital market yields as described above, and by the non-collection of variable management fees due to real negative yields on the assets held to cover yield-dependent liabilities.

Income from management fees amounted to NIS 131 million in the Reporting Period, compared with NIS 258 million in the corresponding period last year. Most of the decrease in management fees is attributable to the non-collection of variable management fees in the period as against the collection of variable management fees in the corresponding period last year in the amount of NIS 140 million.

Pursuant to the mechanism for collecting management fees as set out in the legislative arrangement, variable management fees will not be collected in respect of yield-dependent policies that were sold between 1991 and 2003, until investment profits are attained in respect of assets held to cover yield-dependent liabilities, which will cover the accrued investment losses. At March 31, 2022, the non-collection of management fees due to the negative yield until a cumulative positive yield is attained was estimated at NIS 82 million. Notably, immediately prior to the date of publication of the financial statements, as prices on the capital markets continued to fall, it is estimated that management fees in the amount of NIS 257 million will not be collected.

B. Pension and provident - on September 30, 2021, the agreement between Harel Pension & Provident and Psagot was completed, according to which Harel Pension & Provident acquired from Psagot the activity of several provident funds and pension funds ("the Acquired Activity"). Commencing October 1, 2021, these funds will be managed by Harel Pension & Provident.

The results were affected by capital market yields as described above and by an increase in the asset portfolio, in part due to completion of the transaction mentioned above.

- C. Non-life insurance
 - 1. Compulsory motor and liabilities sectors the results were affected by capital market yields as described above.

Results in the Reporting Period were affected by an increase of the risk-free interest rate curve and by changes in the difference between the fair value and book value of the non-marketable assets which reduced the insurance liabilities.

Results in the corresponding period last year were affected by a decrease of the risk-free interest rate curve and by changes in the difference between the fair value and book value of the non-marketable assets which led to an increase of the insurance liabilities. For additional information, see Section 2.5.2(C).

2. Motor property (CASCO), property and other sectors - the results were affected by capital market yields as described above.

Motor property (CASCO) - results in the Reporting Period were mainly affected by an increase in the number of claims and cost of the average claim which caused a premium deficiency to be recorded.

The corresponding period last year was characterized by a reduction in the frequency of claims due to the reduced volume of traffic and travel resulting from the COVID-19 crisis.

- D. Health insurance the results were affected by capital market yields as described above.
 - 1. Personal lines long-term care results were affected by changes in the LAT reserve. The change in the LAT reserve is attributable, among other things, to changes in the risk-free interest rate curve, changes in the difference between the fair value and book value of the non-marketable assets, and other changes.

Results in the Reporting Period were affected by an increase of the risk-free interest rate curve, by changes in the difference between the fair value and book value of the non-marketable assets which reduced the insurance liabilities. Results in the corresponding period last year were affected by a decrease of the risk-free interest rate curve, by changes in the difference between the fair value and book value of the non-marketable assets which led to an increase of the insurance liabilities. For additional information, see Section 2.5.2(A).

- 2. Health insurance results in the Reporting Period compared with the corresponding period last year, were affected by a worsening of group policies mainly due to an increase in the number of claims in the cover for medications, surgery and ambulatory care.
- E. Insurance companies overseas the results were affected by capital market yields as described above.

Turk Nippon - in Q1 2022, inflation in Turkey continued to rise (reaching an annual rate of 61% in the Reporting Period) accompanied by further erosion in the Turkish lira exchange rate. These macroeconomic factors significantly impacted results in the Reporting Period, among other things causing a hike in the price of spare parts which in turn directly affects the rising cost of claims in the motor property sector and also pushing up the minimum wage, leading to an increase in the cost of material claims and bodily injuries claims which are paid on the basis of this wage.

F. Financial services segment - the results were affected by capital market yields as described above. Additionally, the value of the AUM decreased due to redemptions and loss of value in the markets.

For the year For the period ended ended March 31 December 31 2022 2021 2021 Notes Change Comprehensive income for the period as published in the financial statement 327 255 72 1,521 Health insurance LAT - personal lines long-term care А (154)(157)764 918 Completion of a study relating to the cost of claims in personal lines health В 300 Non-life insurance С Effects of the interest rate 167 (63) 230 (202) Total effects, before tax 931 (217) 1,148 (59) (19) Effect of tax 318 (74) 392 Total effects, after tax 613 (143) 756 (40) Total comprehensive income (loss) after (286) 398 (684) adjustment for special effects 1,561

2.5.2 Special effects on comprehensive income in the Reporting Period (NIS million):

A. Health segment - personal lines long-term care - as described above, the results were affected by changes in the LAT reserve.

The change in the LAT reserve in the Reporting Period and in the corresponding period last year was affected, among others, by changes in the risk-free interest rate curve, changes in the difference between the fair value and book value of non-marketable assets and by other changes.

The change in the LAT reserve in 2021 was affected, in part, by a sharp decrease of the risk-free interest rate curve and changes in the difference between the fair value and book value of the non-marketable assets. This effect was partially offset by the application of a circular on the updated formula for calculating the illiquidity premium added to the risk-free interest rate curve. For additional information, see Note 3C(1)(g)(5) to the 2021 annual financial statements.

See the information in the following table:

	For the period ended March 31		For the year ended December 31	
	2022	2021	2021	
Increase (decrease) in the LAT reserve The change in the reserve also includes the following effects:	(764)	154	157	
Changes in the risk-free interest rate curve and changes in the difference between the fair value and book value of the non-marketable assets. Effect of the application of circulars	(764)	86	936 (863)	

- B. In 2021, a study relating to the cost of claims in the personal lines health sector was completed. The effect of the foregoing led to a reduction of the insurance liabilities by NIS 300 million before tax (the study was completed in the third quarter last year).
- C. Non-life segment, compulsory motor sector and liabilities sectors results in the Reporting Period and in the corresponding period last year were affected by changes in the risk-free interest rate curve and changes in the difference between the fair value and book value of non-marketable assets.

2021 was affected by a sharp decrease in the risk-free interest rate curve, by changes in the difference between the fair value and book value of the non-marketable assets. This effect was partially offset as a result of the application of a circular on the updated formula for calculating the illiquidity premium added to the risk-free interest rate curve. For additional information, see Note 3C(1)(g)(5) to the 2021 annual financial statements.

See the information in the following table, according to sector:

	For the period ended March 31		For the year ended December 31	
	2022	2021	2021	
Increase (decrease) in the insurance liabilities	(167)	63	202	
Compulsory motor:				
Changes in the risk-free interest rate curve and changes in the difference between the fair value				
and book value of the non-marketable assets.	(64)	33	111	
Effect of the application of circulars	-	-	(21)	
Total compulsory motor	(64)	33	90	
Labilities sectors:				
Changes in the risk-free interest rate curve and changes in the difference between the fair value				
and book value of the non-marketable assets.	(103)	30	151	
Effect of the application of circulars	-	-	(39)	
Total labilities sectors	(103)	30	112	

2.6 Other key information and effects by segment

2.6.1 Assets managed for the Group's members and policyholders in the life assurance and long-term savings segment (NIS billion):



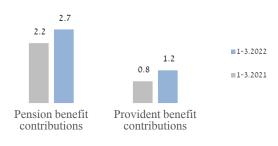
The assets managed by the provident funds and pension funds are not included in the Company's consolidated financial statements.

Commencing October 1, 2021, with the completion of the Psagot transaction, the assets managed by the pension and provident funds increased by NIS 26 billion.

* Reclassified

** Provident funds, education funds, central and personal severance pay funds, provident fund for sick pay, and a fund for noncontributory pension

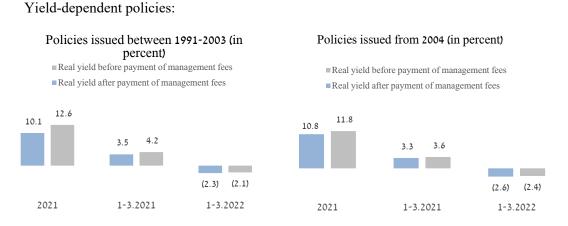
2.6.2 Data on benefit contributions (NIS billion):



The benefit contributions in the provident funds and pension funds are not included in the Company's consolidated financial statements.

2.6.3 Life assurance:

Redemptions as a percentage of the average reserve in the Reporting Period amounted to 4.5%, compared with 4.2% in the corresponding period last year and 4.3% in 2021.



Following is the estimated amount of investment profit (loss) and management fees included in the consolidated income statement, which were credited to or debited from insureds in yield-dependent policies, and are calculated according to the Commissioner's instructions, on the basis of the quarterly yield and balances of the average insurance reserves (NIS million):

	For the period ended March 31		For the year ended December 31
	2022	2021	2021
Profit (loss) after management fees	(1,113)	2,025	7,860
Total management fees	131	258	916

2.6.4 Pension funds:

Income from management fees collected from the pension funds managed by the Group amounted to NIS 103 million in the Reporting Period, compared with NIS 84 million in the corresponding period last year.

2.6.5 Provident funds:

Income from management fees collected from the pension funds managed by the Group amounted to NIS 71 million in the Reporting Period, compared with NIS 62 million in the corresponding period last year.

2.6.6 Health insurance:

Harel Insurance is the insurer in the group LTC policy for members of Clalit Health Services. In addition to the group LTC policy for members of Clalit Health Services, Harel provides long-term care insurance for several other groups.

2.6.7 Non-life insurance:

For information about additional financial data relating to the non-life insurance segment, by sector, see Note 4B to the Financial Statements. For information about a change in the

mechanism for the settlement of accounts between the National Insurance Institute ("NII") and the insurance companies regarding road accidents, see Note 3C(2)(j) to the 2021 annual financial statements.

Change in the quantity of policies in terms of exposure:

	month	e three s March	For the year ended December <u>31</u>	
	2022	2021	2021	
Compulsory motor	11%	5%	14%	Number of policies in terms of exposure - non-life
Motor property (CASCO)	(1%)	11%	13%	insurance activity typically involves policies for a period of up to a year. In view of the nature of the policies, quantity is a multiple of the number of
Property and other lines of business	10%	6%	10%	policies within the policy period during the year. In other words, if underwriting is carried out for a policy with a period of less than a year, it is
Other liabilities lines of business	12%	(3%)	5%	multiplied by the relative part of the period so that a policy for six months is half a unit.

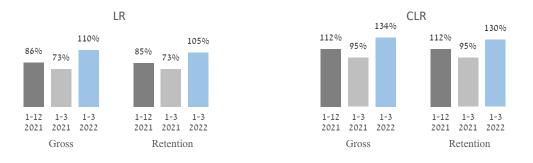
2.6.7.1 Compulsory motor

For additional information about the results of compulsory motor insurance, see Sections 2.5.1 and 2.5.2 above.

Given that car owners must insure their vehicles in accordance with the Motor Vehicle Insurance Ordinance, the owners of vehicles (usually motorcycles) who were rejected by the insurance companies may purchase insurance through the Pool (Israel pool for vehicle insurance), which operates as an insurance company to all intents and purposes. All the insurance companies which operate in the compulsory motor sector are partners in the Pool, and each company bears a share of the Pool's losses pro rata to its share of the compulsory motor insurance market for the previous year. In a letter from the Pool's CEO, the Company's temporary share of Harel Insurance in the net premiums for 2022 was set at 14.06% (compared with 13.58% which was the Company's temporary share for 2021).

2.6.7.2 Motor property

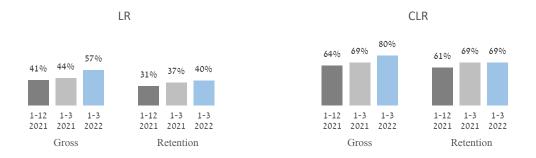
For information about results for the motor property sector, see Section 2.5.1 above. Loss ratio (LR) and combined loss ratio (CLR) in motor property insurance:



2.6.7.3 Property and other lines of business

For additional information about results for the motor property and other sector, see Section 2.5.1 above.

Loss Ratio and Combined Loss Ratio in property and other sectors:



2.6.7.4 Other liabilities lines of business

For information about the results for other liabilities sectors, see Sections 2.5.1 and 2.5.2 above.

2.6.7.5 Credit insurance for residential mortgages

The premiums earned in credit insurance for residential mortgages are not for new sales, but in respect of sales made in the past and for which the premiums are recognized as earned premiums based on the period of coverage. EMI has no reinsurance agreements in this sector.

2.6.8 Insurance companies overseas

The Company is the controlling shareholder (with a 94% stake) in Interasco, an insurance company operating in Greece, and it also fully controls Turk Nippon - an insurance company which operates in Turkey ("insurance companies overseas"). The insurance companies overseas operate in the non-life insurance and health insurance sectors.

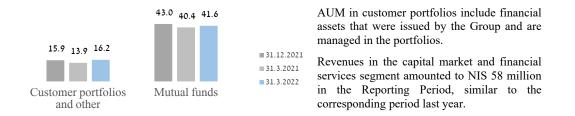
On an injection of capital into Turk Nippon, see Section 2.5.8 in Chapter 2 of the Periodic Report.

2.6.9 Credit sector

AUM at March 31, 2022, and March 31, 2021, in relation to the credit sector, amount to NIS 2.37 billion and NIS 1.74 billion, respectively.

2.6.10 Capital market and financial services

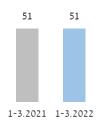
Assets managed for the Group's members and policyholders (NIS billion):



AUM in the mutual funds and in customer portfolios are not included in the Company's consolidated financial statements.

Mutual fund assets include mutual funds, ETFs and certificates of deposit (CDs)

Management fees in the financial services segment (NIS million):



2.7 Liquidity and sources of financing

2.7.1 Cash flows

Net cash flows used in operating activity were NIS 1,147 million in the Reporting Period. Net cash flows used in investment activity amounted to NIS 174 million. Net cash flows used in financing activity were NIS 93 million. The fluctuating exchange rates affected the cash balances by a positive NIS 50 million. The outcome of all the above activity is a reduction of NIS 1,364 million in the cash balances.

2.7.2 Liquidity and financing of operations

The Company and its subsidiaries generally finance their ongoing operations from their own sources.

An assessment of the liquidity risk found that the COVID-19 crisis did not significantly affect the Company's liquidity, financial robustness and the sources of finance available to it.

2.8 Dividend

For information about a dividend in the amount of NIS 300 million, that was paid in April 2022, see Note 9(3) to the Financial Statements.

3 Market risks - exposure and management

During the Reporting Period, there were no material changes in the Company's exposure to and management of market risks compared with the Periodic Report.

4 Corporate governance

On the planned replacement of the Corporate Counsel, see Section 2.1.3 above.

5 Disclosure concerning the economic solvency ratio

Provisions concerning application of an economic solvency regime:

An economic solvency regime based on Solvency II applies to Harel Insurance, and this pursuant to the implementation provisions published in June 2017 and revised in October 2020 ("Provisions of the Economic Solvency Regime").

The provisions of the economic solvency regime include transitional provisions which allow the reserves to in respect of long-term insurance products that were sold in the past, to be increased gradually until 2032. Based on the transitional provisions, insurance companies may, after obtaining the Commissioner's approval, include in the calculation of the insurance reserves in the transitional period, a deduction from the insurance reserve ("the Deduction"). The Deduction is calculated in accordance with the instructions in the Deduction principles letter and it is gradually reduced from a rate of 100% on the calculation of the insurance reserves at December 31, 2019, to 0% on the calculation of the insurance reserves at December 31, 2032. On May 18, 2022, the Commissioner's approval was received for recalculating the Deduction, which is performed at least once in two years. Additionally, in the transitional period a reduced capital requirement will be calculated which will gradually increase until 2023, for certain categories of investments, and a higher maximum recognition limitation will apply to Tier-2 capital.

On May 30, 2022, Harel Insurance published on its website a report on its economic solvency ratio in respect of data at December 31, 2021: <u>https://www.harel-group.co.il/about/harel-group/harel/investor-relations/Pages/repayment-ability.aspx</u>.

Based on the transitional provisions, at December 31, 2021, Harel Insurance has a capital surplus of NIS 7,637 million and without taking the transitional provisions into account, the capital surplus is NIS 2,028 million.

Notably, the model in its current format is extremely sensitive to changes in market and other variables, such as changes in the interest rate, changes in investment profits, revised actuarial assumptions and changes relating to the activity of Harel Insurance.

Calculations of the present economic capital and required capital are based on forecasts and assumptions that rely principally on past experience, and they do not necessarily reflect future performance.

The Best Estimate was determined on the basis of forecasts, assessments and estimates of future events, the materialization of which is uncertain and that are beyond the Company's control, and they should be treated as "forward looking information", according to its definition in Section 32A of the Securities Law, 1968. It is possible that all or part of these forecasts, assessments and

estimates will not materialize or they may materialize differently from the manner assumed in calculating the Solvency Report. Actual performance may therefore differ from the forecast.

Economic solvency ratio and MCR:

Following is information about the solvency ratio and minimum capital requirement (MCR) at December 31, 2021, in accordance with the provisions of the economic solvency regime. The economic solvency ratio is calculated in accordance with the transitional provisions which prescribe the transitional period.

A. Economic solvency ratio

	As at Dece	mber 31	
	2021	2020	
	(Audited)		
	NIS million		
Equity for the purpose of SCR	17,873	15,478	
Solvency capital requirement (SCR)	10,236	9,717	
Surplus	7,637	5,761	
Economic solvency ratio	175%	159%	

Effect of material capital transactions that took place in the period between the date of the calculation and the publication date of the solvency ratio report:

Redemption of capital (*)	-	(46)
Equity for the purpose of SCR	17,873	15,432
Capital surplus	7,637	5,715
Economic solvency ratio	175%	159%

(*) On May 31, 2022, an early redemption of Series 8 bonds is expected in the amount of NIS 239 million. This redemption will not affect the capital surplus and economic solvency ratio since at December 31, 2021 there is an unutilized tier-2 capital balance of NIS 360 million over and above the limitation for tier-2 capital.

The capital position of Harel Insurance is influenced by its ongoing business development, changes in market variables, revised demographic and operating assumptions, continuous updates of models and capital transactions. For information about key changes which took place in 2021 in contrast with comparison figures, see Section 2 in the Economic Solvency Report.

This information concerning the solvency ratio, taking into account the capital activity, as specified above, does not include the effect of the business activity of Harel Insurance after December 31, 2021, changes in the mix and size of the insurance investments and liabilities, exogenous effects and regulatory changes which affect the business environment.

B. Minimum Capital Requirement (MCR)

	As at D	December 31	
	2021	2020	
	(A	(Audited)	
	NIS	S million	
MCR	2,73	2,429	
Own funds for the purpose of MCR	13,30	11,105	

C. Limitations on the distribution of dividends

According to the letter published by the Commissioner in October 2017 ("the Letter"), insurance companies may distribute a dividend only if after the distribution is made, the company has a solvency ratio of at least 100% according to the economic solvency regime, which is calculated without taking the transitional provisions into account and subject to the solvency ratio target set by the Company's Board of Directors. This ratio will be calculated without providing any relief in respect of the original difference attributed to the purchase of provident fund activity and management companies.

It is the policy of Harel Insurance to hold a robust capital base so as to guarantee its solvency and ability to meet its liabilities to insureds, to maintain its ability to continue its business activity and so that it is able to produce a yield for its shareholders. Harel Insurance is subject to the capital requirements and defined regulations with respect to the distribution of dividends.

On November 30, 2020, the Board of Directors of Harel Insurance approved the revised capital management plan and at this stage, threshold conditions were determined for the distribution of a dividend, which include a minimum economic solvency ratio of 135%, taking the transitional provisions into account, and a minimum solvency ratio without taking the transitional provisions into account, of 105%.

On February 28, 2021, the Company's Board of Directors approved a dividend distribution policy whereby the Company will distribute a dividend of at least 30% of comprehensive income according to its annual consolidated financial statements. Additionally, on February 28, 2021, the board of directors of Harel Insurance approved a dividend distribution policy in which the Company will distribute a dividend of at least 35% of comprehensive income according to the annual consolidated financial statements of Harel Insurance, and this as long as Harel Insurance is in compliance with the minimum targets for solvency based on Solvency II.

The threshold conditions are intended to allow Harel Insurance to cope with crises without significantly compromising its operations and its compliance with the applicable capital requirements. Nonetheless, the foregoing is not intended to ensure that Harel Insurance will remain in compliance with the threshold conditions determined at all times.

D. Solvency ratio without application of the transitional provisions to the transitional period and without adjustment for equity risk:

Information about the economic solvency ratio of Harel Insurance, calculated without the transitional provisions and based on the solvency target determined by the board of directors of Harel Insurance with reference to the solvency ratio calculated without taking the provisions in the

transitional period into account and after adjustment for equity risk, as required in the letter. This ratio is in compliance with the solvency ratio required according to the letter.

-	As at December 31	
-	2021	2020
-	(Audi	ited)
_	NIS m	illion
Equity for the purpose of SCR	14,336	12,206
Solvency capital requirement (SCR)	12,308	11,583
Surplus	2,028	623
Solvency ratio (in percent)	116%	105%
Effect of material capital transactions that took place in the period between the date of the calculation and the publication date of the solvency ratio report:		
Raising (redemption) of capital instruments (*)	-	-
Equity for the purpose of SCR	14,336	12,206
Surplus	2,028	623
Solvency ratio (in percent)	116%	105%
Capital status after capital transactions in relation to the Board of Directors target:		
Economic solvency ratio target set by the Board of Directors	105%	105%
Capital surplus in relation to the target (NIS million)	1,412	44

(*) On May 31, 2022, an early redemption of Series 8 bonds is expected in the amount of NIS 239 million. This redemption will not affect recognized tier-2 capital.

E. Increase of the interest rate curve

The increase in the risk-free interest rate curve from the beginning of the year through April 30, 2022 is expected to increase by 24% the solvency ratio taking into account the transitional provisions in the transition period (impact of NIS 1.2 billion on the capital surplus) and by 20% based on a full calculation, without taking into account the transitional provisions in the transition period (impact of NIS 1.8 billion on the capital surplus). Notably, the information described above should not be construed as an estimate of the results of the solvency ratio of Harel Insurance. This information is only partial and it does not include other components and other effects.

The Board of Directors wishes to express its thanks to the Group's employees and agents for its achievements

Yair Hamburger Chairman of the Board of Directors Michel Siboni CEO

May 30, 2022



HAREL INSURANCE INVESTMENTS & FINANCIAL SERVICES LTD

CONDENSED CONSOLIDATED INTERIM FINANCIAL STATEMENTS

As at March 31, 2022

Condensed consolidated interim statements of financial position at

	31 March		December 31	
	2022	2021	2021	
	(Unaudited)	(Unaudited)	(Audited)	
	NIS million	NIS million	NIS million	
Assets				
Intangible assets	2,257	1,837	2,244	
Deferred tax assets	26	9	18	
Deferred Acquisition Costs	2,768	2,597	2,667	
Fixed assets	1,385	1,368	1,380	
Investments in equity accounted investees	1,574	1,314	1,385	
Investment property for yield-dependent contracts	1,995	1,814	1,963	
Other investment property	2,331	2,071	2,269	
Reinsurance assets	5,456	4,453	5,242	
Current tax assets	5	74	2	
Trade and other receivables	1,084	1,387	1,251	
Premium due	1,741	1,529	1,452	
Financial investments for yield-dependent contracts	74,771	67,701	73,850	
Other financial investments				
Marketable debt assets	13,141	11,625	13,579	
Non-marketable debt assets	17,682	15,731	16,629	
Shares	2,757	1,697	2,508	
Other	3,868	3,091	3,595	
Total other financial investments	37,448	32,144	36,311	
Cash and cash equivalents for yield-dependent contracts	4,430	2,602	5,012	
Other cash and cash equivalents	1,843	2,079	2,625	
Total assets	139,114	122,979	137,671	
Total assets for yield-dependent contracts	81,726	73,110*	81,548	

* Reclassified

Condensed consolidated interim statements of financial position at (Contd.)

	March 31		December 31	
	2022	2021	2021	
	(Unaudited)	(Unaudited)	(Audited)	
	NIS million	NIS million	NIS million	
Equity and liabilities				
Equity				
Share capital and share premium	359	359	359	
Treasury stock	(175)	(123)	(163)	
Capital reserves	1,077	1,075	1,373	
Retained earnings	7,620	6,421	7,292	
Total equity attributed to shareholders of the Company	8,881	7,732	8,861	
Non-controlling interests	33	31	32	
Total equity	8,914	7,763	8,893	
Liabilities				
Liabilities for non yield-dependent insurance contracts and investment contracts	31,152	29,596*	31,127	
Liabilities for yield-dependent insurance contracts and investment contracts	80,659	72,244*	80,516	
Deferred tax liabilities	1,294	1,208	1,450	
Liabilities for employee benefits, net	289	274	301	
Current tax liabilities	89	15	46	
Trade and other payables	5,267	3,694	4,893	
Financial liabilities	11,450	8,185	10,445	
Total liabilities	130,200	115,216	128,778	
Total equity and liabilities	139,114	122,979	137,671	

* Reclassified

Yair Hamburger
Chairman of the Board of
Directors

Michel Siboni CEO Arik Peretz CFO

Date of approval of the financial statements: May 30, 2022

Condensed Consolidated Interim Statements of Income

	For the three 1 March 31	months ended	For the year ended
	2022	2021	2021
	(Unaudited)	(Unaudited)	(Audited)
	NIS million	NIS million	NIS million
Premiums earned, gross	4,511	3,671	15,272
Premiums earned by reinsurers	524	432	1,858
Earned premiums in retention	3,987	3,239	13,414
Profit (loss) from investments, net, and financing income	(433)	2,995	11,912
Income from management fees	357	457	1,790
Income from commissions	95	83	347
Other income	7		
Total income	4,013	6,774	27,474
Payments and changes in liabilities for insurance contracts and investment contracts, gross	2,378	5,784	23,127
Reinsurers' share of payments and change in liabilities for insurance contracts	438	356	1,507
Payments and changes in liabilities for insurance contracts and investment contracts in retention	1,940	5,428	21,620
Commissions, marketing expenses and other acquisition costs	739	652	2,731
General and administrative expenses	378	310	1,310
Other expenses	8	1	, 14
Financing expenses, net	94	70	281
Total expenses	3,159	6,461	25,956
Company's share of profits of equity accounted investees	58	20	180
Profit before taxes on income	912	333	1,698
Income tax	291	89	486
Profit for the period	621	244	1,212
Attributed to:			
Shareholders of the Company	620	243	1,209
Non-controlling interests	1	1	3
Profit for the period	621	244	1,212
Basic and diluted earnings per share (NIS)	2.89	1.13	5.65

Condensed Consolidated Interim Statements of Comprehensive Income

	For the three 1 March 31	nonths ended	For the year ended	
	2022	2021	2021	
	(Unaudited)	(Unaudited)	(Audited)	
	NIS million	NIS million	NIS million	
Profit for the period Other items of comprehensive income (loss) that after initial recognition as part of comprehensive income were or will be transferred to profit or loss	621	244	1,212	
Net change in the fair value of financial assets classified as available-for- sale Net change in fair value of financial assets classified as available-for-sale	(459)	161	920	
transferred to income statement Loss from impairment of available-for-sale financial assets transferred to	(68)	(176)	(461)	
income statement	19	8	51	
Foreign currency translation differences for foreign activity	22	17	(77)	
Tax benefit (income tax) attributable to available-for-sale financial assets	173	7	(166)	
Tax benefit (income tax) for other items of comprehensive income that after initial recognition as part of comprehensive income were or will be transferred to profit or loss Total other comprehensive income for the year that after initial	(5)	(6)	19	
recognition as part of comprehensive income was or will be transferred to profit or loss, net of tax Other items of comprehensive income (loss) that will not be transferred to profit or loss	(318)		286	
Revaluation reserve for fixed asset items	19	4	29	
Re-measurement of a defined benefit plan	12	(5)	3	
Tax benefit (income tax) for other items of comprehensive income that will not be transferred to profit or loss	(7)	1	(9)	
Other comprehensive income for the period that will not be transferred to profit or loss, net of tax	24	-	23	
Total other comprehensive income (loss) for the period	(294)	11	309	
Total comprehensive income for the period	327	255	1,521	
Attributed to:				
Shareholders of the Company	326	254	1,518	
Non-controlling interests	1	1	3	
Total comprehensive income for the period	327	255	1,521	

	Attributed to shareholders of the Company										
For the three months ended I Balance as at January 1,	Share capital and premium <u>NIS million</u> Warch 31, 2022 (Capital reserve for available- <u>for-sale assets</u> <u>NIS million</u> (Unaudited)	Translation reserve for foreign activity <u>NIS million</u>	Capital reserve for share- based payment NIS million	Treasury stock NIS million	Capital reserve for transactions with non- controlling interests NIS million	Capital reserve for revaluation of fixed assets NIS million	Retained earnings NIS million	Total NIS million	Non- controlling interests NIS million	Total equity NIS million
2022 Comprehensive income (loss) for period	359	1,347	(252)	6	(163)	(49)	321	7,292	8,861	32	8,893
Profit for the period Other comprehensive income	-	-	-	-	-	-	-	620	620	1	621
(loss)	-	(335)	17	-	-	-	16	8	(294)	<u>*</u> *	(294)
Total comprehensive income (loss) for period	-	(335)	17	-	-	-	16	628	326	1	327
Transactions with shareholders recognized directly in equity											
Dividends distributed	-	-	-	-	-	-	-	(300)	(300)	-	(300)
Share-based payment	-	-	-	6	-	-	-	-	6	-	6
Purchase of Treasury stock	-	-	-	-	(12)	-	-	-	(12)	_	(12)
Balance as at March 31, 2022	359	1,012	(235)	12	(175)	(49)	337	7,620	8,881	33	8,914

* Less than NIS 1 million

	Share capital and premium NIS million	Capital reserve for available- for-sale assets NIS million	Translation reserve for foreign activity NIS million	Capital reserve for share- based payment NIS million	Treasury stock NIS million	Capital reserve for transaction s with non- controlling interests NIS million	Capital reserve for revaluation of fixed assets NIS million	Retained earnings NIS million	<u>Total</u> NIS million	Non- controlling interests NIS million	Total equity NIS million
For the three months ended	March 31, 2021	(Unaudited)									
Balance as at January 1, 2021 Total comprehensive income (loss) for period	359	1,003	(194)	1	(123)	(49)	300	6,438	7,735	19	7,754
Profit for the period	-	-	-	-	-	-	-	243	243	1	244
Other comprehensive income (loss)	-	-	11	-	-	-	3	(3)	11	_*	11
Total comprehensive income for period Transactions with shareholders recognized directly in equity							3	_240	254	_1	255
Dividend distributed Non-controlling interests in a newly established	-	-	-	-	-	-	-	(257)	(257)	-	(257)
consolidated subsidiary	-	-	-	-	-	-	-	-	-	11	11
Balance as at March 31, 2021	359	1,003	(183)	1	(123)	(49)	303	6,421	7,732	31	7,763

Attributed to shareholders of the Company

* Less than NIS 1 million

	Share capital and premium	Capital reserve for available- for-sale assets	Translation reserve for foreign activity	Capital reserve for share-based payment	Treasury stock	Capital reserve for transactions with non- controlling interests	Capital reserve for revaluation of fixed assets	Retained earnings	Total	Non- controlling interests	Total equity
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million
For the year ended December Balance as at January 1,	: 31, 2021 (Audi	ted)									
2021 Total comprehensive income (loss) for year	359	1,003	(194)	1	(123)	(49)	300	6,438	7,735	19	7,754
Profit for year Total other comprehensive	-	-	-	-	-	-	-	1,209	1,209	3	1,212
income (loss)	-	344	(58)		-	-	21	2	309	-	309
Total comprehensive income (loss) for year Transactions with shareholders recognized directly in equity	-	344	(58)		-		21	1,211	1,518	3	1,521
Dividend distributed	-	-	-	-	-	-	-	(357)	(357)	-	(357)
Share-based payment	-	-	-	5	-	-	-	-	5		5
Purchase of Treasury stock Non-controlling interests in a newly established	-	-	-	-	(40)	-	-	-	(40)	-	(40)
consolidated subsidiary Dividend to non-controlling	-	-	-	-	-	-	-	-	-	11	11
interests	-	-	-		-	-	-	-	-	(1)	(1)
Balance as at December 31, 2021	359	1,347	(252)	6	(163)	(49)	321	7,292	8,861	32	8,893

* Less than NIS 1 million

The Notes accompanying the condensed consolidated interim financial statements are an integral part thereof.

Condensed consolidated interim statements of cash flows

		For the three 1 March 31	nonths ended	For the year ended
		2022	2021	2021
		(Unaudited)	(Unaudited)	(Audited)
	Annex	NIS million	NIS million	NIS million
Cash flows from operating activity				
Before taxes on income	А	(908)	(1,352)	1,655
Taxes paid		(239)	(237)	(464)
Net cash provided by (used for) operating activities		(1,147)	(1,589)	1,191
Cash flows from investment activity				
Acquisition of a subsidiary consolidated for the first time Supplement of consideration for the acquisition of a subsidiary consolidated for	В	-	-	(92)
the first time in 2021		(9)	-	-
Investment in investees		(90)	(30)	(104)
Proceeds from the sale of an investment in an equity accounted investee		6	11	44
Cash paid as part of the acquisition of provident fund and pension fund management rights from Psagot		-	-	(185)
Investment in fixed assets		(7)	(12)	(49)
Investment in intangible assets		(76)	(70)	(305)
Dividend and interest from investees		1	3	55
Proceeds from sale of fixed assets and intangible assets		1	1	4
Net cash used for investment activity		(174)	(97)	(632)
Cash flows from financing activity				
Proceeds of issuance of liability notes, net		-	-	931
Repayment of liability notes		-	-	(468)
Purchase of Treasury stock		(12)	-	(40)
Short-term credit from banks, net		41	-	531
Loans received from banks		-	-	375
Repayment of loans from banks and others		(13)	-	(454)
Repayment of lease liabilities		(9)	(8)	(36)
Dividend paid to non-controlling interests		-	-	(1)
Dividend paid to the Company's shareholders		(100)	(107)	(257)
Net cash provided by (used for) financing activity		(93)	(115)	581
Effect of exchange rate fluctuations on cash balances and cash equivalents		50	109	124
Net increase (decrease) in cash and cash equivalents		(1,364)	(1,692)	1,264
Retained cash and cash equivalents at beginning of the period	С	7,637	6,373	6,373
Retained cash and cash equivalents at end of the period	D	6,273	4,681	7,637

* In the three months ended March 31, 2022, Harel Insurance made a non-cash investment in an affiliate partnership (against the balance of non-marketable debt assets) in the amount of NIS 20 million.

The Notes accompanying the condensed consolidated interim financial statements are an integral part thereof.

Condensed consolidated interim statements of cash flows(contd.)

	For the three March 31	months ended	For the year ended
	2022	2021	2021
	(Unaudited)	(Unaudited)	(Audited)
	NIS million	NIS million	NIS million
Annex A - Cash flows from operating activities			
Profit for the period	621	244	1,212
Items not involving cash flows:			
Company's share of profits of equity accounted investees	(58)	(20)	(180)
Net losses (profits) from financial investments for yield-dependent insurance contracts and investment contracts	1,474	(2,190)	(8,131)
Losses (profits) net, from other financial investments			
Marketable debt assets	(146)	(82)	(312)
Non-marketable debt assets	(140)	(42)	(216)
Shares	(87)	(112)	(299)
Other investments	(23)	(49)	(626)
Change in financial liabilities	(390)	518	(370)
Change in fair value of investment property for yield-dependent contracts	(29)	(3)	(125)
Change in fair value of other investment property	(54)	(6)	(189)
Depreciation and amortization Fixed assets	28	29	116
Intangible assets	63	43	206
Change in liabilities for non-yield-dependent insurance contracts and investment contracts	53	686	1,443
Change in liabilities for yield-dependent insurance contracts and investment contracts	143	2,471	10,683
Change in reinsurance assets	(219)	(120)	(349)
-			
Change in DAC	(103)	(86)	(173)
Payroll expenses for share-based payment	6	-	5
Income tax expense Changes in other statement of financial position items: <u>Financial investments and investment property for yield-dependent insurance contracts and</u> <u>investment contracts</u>	291	89	486
Purchase of investment property	(3)	(9)	(36)
Purchase of financial investments	(2,181)	(1,113)	(976)
Other financial investments and investment property			
Purchase of investment property	(8)	(5)	(16)
(Purchase) of financial investments	(382)	(1,004)	(1,012)
Premiums due	(295)	(190)	(72)
Trade and other receivables	118	-	(140)
Trade and other payables	413	(400)	682
Liabilities for employee benefits, net	-	(1)	44
Total adjustments required to present cash flows from operating activity	(1,529)	(1,596)	443
Total cash flows from (used in) operating activity	(908)	(1,352)	1,655
			<u> </u>

(1) Cash flows from operating activities include the purchase and sale, net, of financial investments and investment property, attributable to activity for insurance contracts and investment contracts

(2) As part of the operating activities, interest received in the amount of NIS 244 million was presented (for the three months ended March 31, 2021, NIS 291 million, and for 2021 as a whole, NIS 1,623 million) and interest paid in the amount of NIS 5 million (for the three months ended March 31, 2021, an amount of NIS 0.5 million and for 2021 as a whole, NIS 180 million)

(3) As part of the operating activities, dividend received from other financial investments was presented in the amount of NIS 91 million (for the three months ended March 31, 2021 an amount of NIS 135 million and for 2021 as a whole, NIS 730 million)

The Notes accompanying the condensed consolidated interim financial statements are an integral part thereof

Condensed consolidated interim statements of cash flows(contd.)

	For the three n March 31	nonths ended	For the year ended
	2022	2021	2021
	(Unaudited)	(Unaudited)	(Audited)
	NIS million	NIS million	NIS million
Annex B - Cash and cash equivalents at beginning of period			
Assets and liabilities of the consolidated company on the acquisition date			
Goodwill created on acquisition	-	-	(56)
Surplus cost - intangible asset in respect of customer relations - created on acquisition	-	-	(69)
Surplus cost – Intangible asset in respect of brand – created on acquisition	-	-	(15)
Other intangible assets	-	-	(10)
Deferred tax assets	-	-	(3)
Fixed assets	-	-	(3)
Other investment property	-	-	(5)
Reinsurance assets	-	-	(608)
Trade and other receivables	-	-	(55)
Premium due	-	-	(85)
Other financial investments	-	-	(595)
Liabilities for non-yield-dependent insurance contracts and investment contracts	-	-	1,098
Trade and other payables	-	-	305
Cash deducted due to acquisition of consolidated company consolidated for the first time	-	-	(101)
Of which payments made in February 2022, for adjustment of the consideration	-	-	9
Total cash deducted for acquisition of consolidated company consolidated for the first time	-	-	(92)

	For the three n March 31	For the year ended	
	2022	2021	2021
	(Unaudited)	(Unaudited)	(Audited)
	NIS million	NIS million	NIS million
Annex C - Cash and cash equivalents at beginning of period			
Cash and cash equivalents for yield-dependent contracts	5,012	3,452	3,452
Other cash and cash equivalents	2,625	2,921	2,921
Retained cash and cash equivalents at beginning of the period	7,637	6,373	6,373
Annex D - Cash and cash equivalents at end of period			
Cash and cash equivalents for yield-dependent contracts	4,430	2,602	5,012
Other cash and cash equivalents	1,843	2,079	2,625
Retained cash and cash equivalents at end of the period	6,273	4,681	7,637

The notes accompanying the condensed consolidated interim financial statements are an integral part thereof.

Note 1 - General

A. The reporting entity

Harel Insurance Investments and Financial Services Ltd. ("the Company") is an Israeli resident company, which was incorporated in Israel, and whose shares are traded on the Tel Aviv Stock Exchange. The Company's official address is 3 Abba Hillel Silver Street, Ramat Gan.

The Company is a holding company whose main holdings are in subsidiaries comprising insurance and finance companies. The condensed consolidated interim financial statements, as at March 31, 2022, include those of the Company and its consolidated subsidiaries ("the Group"), the Company's rights in jointly controlled entities and the Group's rights in affiliated companies.

The condensed consolidated interim financial statements mainly reflect the assets, liabilities and results of the consolidated insurance companies and were therefore prepared in a format similar to the format used for preparing interim financial statements of insurance companies.

Note 2 - Basis of preparation

A. Statement of compliance with International Financial Reporting Standards

The condensed consolidated interim financial statements were prepared in accordance with IAS 34 - Financial Reporting for Interim Periods and in accordance with the requirements of the Pronouncements issued by the Commissioner of the Capital Market, Insurance and Savings ("the Commissioner") and in accordance with the Supervision of Financial Services (Insurance) Law, 1981 ("the Supervision Law"), and they do not include all the information required in full annual financial statements. They should be read them together with the financial statements as at and for the year ended December 31, 2021 ("the Annual Financial Statements"). Moreover, condensed consolidated interim financial statements were prepared in accordance with the provisions of Chapter D of the Securities (Periodic and Immediate Reports) Regulations, 1970, insofar as these regulations apply to a company that consolidates insurance companies.

The condensed consolidated interim financial statements were approved for publication by the Company's Board of Directors on May 30, 2022.

B. Use of estimates and discretion

In preparing the condensed, consolidated interim financial statements in accordance with IAS 34 and pursuant to the Supervision Law and its subsequent regulations, the Group's management is required to exercise discretion, to use estimates, assessments and assumptions, including actuarial assumptions and estimates ("the Estimates") that affect application of the accounting policy, the amounts of assets and liabilities, income and expenses. It is stipulated that the actual results could differ from these Estimates, in part due to regulatory changes published or expected to be published in the insurance, pension and provident sectors and regarding which there is uncertainty as to their consistency and repercussions. The key estimates included in the financial statements are based on actuarial assessments and on external valuations.

When formulating the accounting estimates used in the preparation of the Group's financial statements, the Company's management is required to make assumptions regarding circumstances and events which involve considerable uncertainty. In applying its discretion in determining the estimates, the Company's management bases itself on past experience, various facts, external factors, and reasonable assumptions, including future expectations, to the extent that they can be assessed, based on the appropriate circumstances for each estimate.

The assessments and discretion that management uses to apply the accounting policy in preparing the condensed consolidated interim financial statements are mainly consistent with those used in the preparation of the annual financial statements.

C. Functional and presentation currency

The condensed interim consolidated financial statements are presented in New Israel Shekels (NIS), which is the Company's functional currency. The financial information is presented in NIS million and rounded to the nearest million.

D. Reclassification

In some sections of the Notes, reclassifications of insignificant amounts of comparative figures were made. These reclassifications did not have any effect on the Company's equity and/or on profit or loss and/or comprehensive income.

Note 3 - Significant accounting policies

The Group's accounting policies in these condensed consolidated interim financial statements are the policies applied in the annual financial statements.

A. New standards not yet adopted IFRS 17 – *Insurance contracts* ("IFRS 17" or "the Standard")

Pursuant to the information in Note 3S2 of the annual financial statements relating to the draft "Updated Roadmap for the Adoption of IFRS 17 - Insurance Contracts" published by the Capital Market, Insurance and Savings Authority on January 5, 2022 ("the Draft Roadmap"), on May 23, 2022, the Capital Market, Insurance and Savings Authority published the final version of the aforementioned roadmap ("the Updated Roadmap").

The Updated Roadmap leaves the initial date of application of IFRS 17 in Israel unchanged, which will apply on or after quarterly and annual periods commencing January 1, 2024 (accordingly, the transition date will be January 1, 2023). Nonetheless, the Updated Roadmap includes a small number of updates in relation to the Draft Roadmap.

According to the Updated Roadmap, in 2023, within the framework of the financial statements for the second quarter and for the annual report for 2023, the companies will be required to report, as part of a special note to the financial statements, key pro-forma reports (at the very least - report on financial position and report on comprehensive income, without comparative figures) to be prepared in accordance with IFRS 17 and IFRS 9 and this based on the disclosure format attached to the Updated Roadmap. Additionally, the roadmap sets out the key preparatory measures and time schedules which, in the opinion of the Capital Market, Insurance and Savings Authority, are required to ensure quality deployment by Israel's insurance companies for the proper application of IFRS 17, including with respect to adapting their information systems, completion of formulating the accounting policy and deployment for the different reports required, performing a quantitative review with respect to fair value in preparation for the transition date, deployment for calculating the risk adjustment for non-financial risk (RA) and deployment for audit by the auditors.

The Group continues to assess the implications of adopting these standards on its financial statements and is preparing for their application within the said time frame.

B. Seasonality

1. Life assurance, health insurance and financial services

The revenues from life and health insurance premiums are not characterized by seasonality. Nevertheless, due to the fact that the deposits for life assurance enjoy tax benefits, a considerable part of new sales takes place mainly at the end of the year. The revenues from the finance services segment are not characterized by seasonality.

2. <u>Non-life insurance</u>

The turnover of revenues from premiums gross in non-life insurance is characterized by seasonality, stemming mainly from motor insurance of various groups of employees and vehicle fleets of businesses, where the date of renewal is generally in January, and from various policies of businesses where the renewal dates are generally in January or in April. The effect of this seasonality on reported profit is neutralized through the provision for unearned premiums.

The components of other expenses such as claims, and the components of other revenues such as revenues from investments do not have a distinct seasonality and there is therefore no distinct seasonality in profit.

Note 4 - Operating segments

The note on Operating Segments includes several segments that constitute strategic business units of the Group. The strategic business units include different products and services and the allocation of resources and evaluation of performance are managed separately. The basic products in each segment are similar in principal with respect to their significance, the way they are distributed, the mix of customers, nature of the regulatory environment and also long-term demographic and economic features that are derived from exposure with features similar to insurance risks. Likewise, the results of the portfolio of investments held against insurance liabilities may significantly affect profitability.

Segment performance is measured based on the profits of the segments before taxes on income. The results of intercompany transactions are eliminated in the framework of the adjustments for preparation of the condensed consolidated interim financial statements. The Group operates in the following segments:

1. Life assurance and long-term savings

This segment includes the Group's insurance activities in the life assurance branches and the Group's operations in managing pension and provident funds.

2. Health insurance

This segment includes the Group's insurance activities in the illness and hospitalization branches, personal accident, longterm care, foreign workers, travel insurance and dental insurance. The policies sold in the framework of these insurance branches cover the range of losses incurred by the insured as a result of illness and/or accidents, including long-term care and dental treatments. Health insurance policies are offered to individuals and to groups.

3. Non-life insurance

This segment comprises five sub-segments:

Motor property (Casco): includes the Group's activities in the sale of insurance policies in the motor vehicle insurance branch ("motor property"), which covers loss sustained by a vehicle owner due to an accident, and/or theft and/or liability of the vehicle owner or the driver for property damage caused to a third party in an accident.

Compulsory motor: includes the Group's activities in the insurance sector pursuant to the requirements of the Motorized Vehicle Insurance Ordinance (New Version) - 1970 ("compulsory motor"), which covers corporal damage resulting from the use of a motor vehicle under the Compensation for Road Accident Victims Law, 1975.

Other liabilities branches: includes the Group's activities in the sale of policies covering the insured's liability to a third party (excluding cover for liabilities in the compulsory motor sector, as described above). This includes, inter alia, the following insurance branches: employers' liability, third-party liability, professional liability, directors' and officers' liability (D&O), and insurance against liability for defective products.

Property and other branches: this sector includes the Group's insurance activities in all property branches excluding motor property (e.g. liabilities, homeowners, etc.).

Mortgage insurance business: this sector includes the Group's insurance activities in the residential mortgage credit branch (monoline branch). The purpose of this insurance is to provide indemnity for loss caused as a result of non-payment of loans (default) given against a first mortgage on a single real estate property for residential purposes only, and after disposing of the property that serves as collateral for the loans.

4. Insurance companies overseas

The overseas segment consists of the activity of Interasco and Turk Nippon, insurance companies abroad that are wholly owned by the Company.

Note 4 - Operating segments (Contd.)

5. Financial services

The Group's activities in the capital and financial services market take place through Harel Finance Holdings Ltd. ("Harel Finance"). Harel Finance is engaged through companies controlled by it, in the following activities:

- Management of mutual funds.
- Management of securities for private customers, corporations, and institutional customers in the capital markets in Israel and abroad.

6. Not attributed to operating segments and other

Activities that are not attributed to operating segments include mainly activities of insurance agencies and of capital activities by the consolidated insurance companies.

A. Information about reportable segments

	For the three m Life Assurance	Not Allocated to Operating Adjustment						
	and Long-	Health	Non-life	companies	Financial	Segments	s and	T : ()
	Term Savings NIS million	Insurance NIS million	insurance NIS million	overseas NIS million	Services NIS million	and other NIS million	Offsets NIS million	Total NIS million
Premiums earned, gross	2,000	1,407	1,014	<u>91</u>			(1)	4,511
Premiums earned by reinsurers	46	81	378	20	-	-	(1)	524
Premiums earned in retention	1,954	1,326	636	71			<u>(1)</u>	3,987
Profit (loss) from investments, net, and financing income	(783)	70	141	7	7	126*	(1)	(433)
Income from management fees	305	1	-	-	, 51	1	(1)	357
Income from commissions	11	5	67	4	-	28**	(20)	95 95
Other income	7	-	-	-	-	20	(20)	7
Total income	1,494	1,402	844	82	58	155	(22)	4,013
Payments and changes in liabilities for insurance contracts and	±; * /*	1,702	044	02	50	133	(22)	4,015
investment contracts, gross	1,070	430	785	94	-	_	(1)	2,378
Reinsurers' share in payments and changes in liabilities for	1,070	450	105	74	-	-	(1)	2,570
insurance contracts	32	134	263	10	-	_	(1)	438
Payments and changes in liabilities for insurance contracts and	52	134	205	10			(1)	430
investment contracts, in retention	1,038	296	522	84	_	_	_	1,940
	299	242	195	21	-	- 2***	(20)	739
Commissions, marketing expenses and other acquisition costs				<u>21</u> 4	-	2*** 37****		
General and administrative expenses	189	88	16	0	44	5/****	(2)	378
Other expenses	5	-	2	-	1	-	-	8
Financing expenses (income), net	/	19	8	-	1	59	(22)	94
Total expenses	1,538	645	743	111	46	98	(22)	3,159
Company's share of profits of equity accounted investees	2	4	13	-	-	39	-	58
Profit (loss) before income tax	(42)	761	114	(29)	12	96	-	912
Other comprehensive loss before income tax	(151)	(169)	(60)	(1)	-	(74)	-	(455)
Total comprehensive income (loss) before income tax	(193)	592	54	(30)	12	22****	-	457
Liabilities in respect of non-yield dependent insurance contracts								
and investment contracts	12,093	7,180	11,343	541	-	-	(5)	31,152
Liabilities in respect of yield dependent insurance contracts and								
investment contracts	74,982	5,677	-	-	-	-	-	80,659

* Total investment profits are for assets held to cover the equity of the Group's financial institutions

** Income from commissions includes commissions paid to insurance agencies owned by the Group. Of these commissions, NIS 20 million are commissions paid to these agents by the Group's financial institutions

*** For the activity of the insurance agencies that are fully owned by the Group

**** Of the total general and administrative expenses, NIS 22 million is for expenses of the activity of the Group's insurance agencies

***** Total comprehensive income before income tax for the activity of the Group's insurance agencies was NIS 3 million

A. Information about reportable segments (contd.)

		months ended M	Iarch 31, 2021 (U naudited)				
	Life Assurance and Long- Term Savings NIS million	Health Insurance NIS million	Non-life insurance NIS million	Insurance companies overseas NIS million	Financial Services NIS million	Not Allocated to Operating Segments and other NIS million	Adjustments and Offsets NIS million	Total NIS million
Premiums earned, gross	1,446	1,282	826	118	-	-	(1)	3,671
Premiums earned by reinsurers	43	72	296	22	-	-	(1)	432
Earned premiums in retention	1,403	1,210	530	96	-	-	-	3,239
Profit from investments, net, and financing income	2,448	262	107	12	7	160*	(1)	2,995
Income from management fees	404	1	-	-	51	1	-	457
Income from commissions	9	4	59	4	-	25**	(18)	83
Total income	4,264	1,477	696	112	58	186	(19)	6,774
Payments and changes in liabilities for insurance contracts and		<u> </u>						
investment contracts, gross	3,633	1,370	690	92	-	-	(1)	5,784
Reinsurers' share in payments and changes in liabilities for insurance								
contracts	32	109	201	15	-	-	(1)	356
Payments and changes in liabilities for insurance contracts and								
investment contracts, in retention	3,601	1,261	489	77	-	-	-	5,428
Commissions, marketing expenses and other acquisition costs	255	227	161	25	-	1***	(17)	652
General and administrative expenses	158	76	9	7	39	22****	(1)	310
Other expenses	-	-	-	1	1	-	(1)	1
Financing expenses, net	3	7	16	-	1	43	-	70
Total expenses	4,017	1,571	675	110	41	66	(19)	6,461
Company's share of profits of equity accounted investees	1	2	6	-	-	11	-	20
Profit (loss) before income tax	248	(92)	27	2	17	131	-	333
Other comprehensive income (loss), before income tax	(26)	(7)	15	(7)	-	34	-	9
Total comprehensive income (loss) before income tax	222	(99)	42	(5)	17	165****	-	342
Liabilities in respect of non-yield dependent insurance contracts and		<u> </u>		, <u></u>				
investment contracts	11,725	7,390 ¹	9,868	618	-	-	(5)	29,596
Liabilities in respect of yield dependent insurance contracts and	,							
investment contracts	66,840	5,404 ¹	-	-	-	-	-	72,244
1 Reclassified	. <u> </u>	<u> </u>						

. . .

...

.

....

* Total investment profits are for assets held to cover the equity of the Group's financial institutions

** Income from commissions includes commissions paid to insurance agencies owned by the Group. Of these commissions, NIS 16 million are commissions paid to these agencies by the Group's financial institutions

*** For the activity of the insurance agencies that are fully owned by the Group

**** Of the total general and administrative expenses, NIS 18 million is for expenses of the activity of the Group's insurance agencies

***** Total comprehensive income before income tax for the activity of the Group's insurance agencies was NIS 5 million

A. Information about reportable segments (Contd.)

	For the year ended December 31, 2021								
	Life Assurance and Long- Term Savings NIS million	Health Insurance NIS million	Non-life insurance NIS million	Insurance companies overseas NIS million	Financial Services NIS million	Not Allocated to Operating Segments and other NIS million	Adjustments and Offsets NIS million	Total NIS million	
Premiums earned, gross	5,887	5,364	3,584	441	-	-	(4)	15,272	
Premiums earned by reinsurers	187	307	1,285	82	-	-	(3)	1,858	
Premiums earned in retention	5,700	5,057	2,299	359	-	-	(1)	13,414	
Profit from investments, net, and financing income	9,611	1,097	519	58	25	604*	(2)	11,912	
Income from management fees	1,548	4	-	-	228	11	(1)	1,790	
Income from commissions	39	19	243	16	-	101**	(71)	347	
Other income	10	-	-	-	1	-	-	11	
Total income	16,908	6,177	3,061	433	254	716	(75)	27,474	
Payments and changes in liabilities for insurance contracts and		<u> </u>						<u> </u>	
investment contracts, gross	14,549	4,966	3,216	398	-	-	(2)	23,127	
Reinsurers' share in payments and changes in liabilities for	,	,						,	
insurance contracts	123	453	892	41	-	-	(2)	1,507	
Payments and changes in liabilities for insurance contracts and									
investment contracts, in retention	14,426	4,513	2,324	357	-	-	-	21,620	
Commissions, marketing expenses and other acquisition costs	1,035	917	750	93	-	7***	(71)	2,731	
General and administrative expenses	608	292	39	22	167	185****	(3)	1,310	
Other expenses	6	-	-	3	4	1***	-	14	
Financing expenses (income), net	16	45	(11)	1	5	225	-	281	
Total expenses	16,091	5,767	3,102	476	176	418	(74)	25,956	
Company's share of profits of equity accounted investees	20	21	40	-	-	99	-	180	
Profit (loss) before income tax	837	431	(1)	(43)	78	397	(1)	1,698	
Other comprehensive income (loss) before taxes on income	72	104	112	(25)	-	202	-	465	
Total comprehensive income (loss) before income tax	909	535	111	(68)	78	599****	(1)	2,163	
Liabilities in respect of non-yield dependent insurance contracts and investment contracts	11,946	7,683	10,991	512	-	-	(5)	31,127	
Liabilities in respect of yield dependent insurance contracts and investment contracts	74,730	5,786	-	-	-	-	-	80,516	

* Total investment profits are for assets held to cover the equity of the Group's financial institutions

** Income from commissions includes commissions paid to insurance agencies owned by the Group. Of these commissions, NIS 71 million are commissions paid to these agencies by the Group's financial institutions

*** For the activity of the insurance agencies that are fully owned by the Group

**** Of the total general and administrative expenses, NIS 77 million is for expenses of the activity of the Group's insurance agencies

***** Total comprehensive income before income tax for the activity of the Group's insurance agencies was approximately NIS 14 million

B. Additional information about the non-life insurance segment

D. Additional information about the non-me insurance segment	For the three months ended March 31, 2022 (Unaudited)									
	Compulsory Motor	Motor Property	Property and Other sectors*	Other Liability sectors**	Mortgage insurance	Total				
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million				
Gross premiums	246	383	385	469	(1)	1,482				
Reinsurance premiums	41	25	293	154	-	513				
Premiums in retention	205	358	92	315	(1)	969				
Change in outstanding unearned premiums, in retention	44	101	29	161	(2)	333				
Earned premiums in retention	161	257	63	154	1	636				
Profit from investments, net, and financing income	54	12	8	62	5	141				
Income from commissions	-	2	50	15	-	67				
Total income	215	271	121	231	6	844				
Payments and changes in liabilities for insurance contracts, gross	176	299	171	146	(7)	785				
Reinsurers' share of payments and change in liabilities for insurance contracts	25	30	146	62	-	263				
Payments and changes in liabilities for insurance contracts in retention	151	269	25	84	(7)	522				
Commissions, marketing expenses and other acquisition costs	31	62	65	37	-	195				
General and administrative expenses	5	4	3	2	2	16				
Other expenses	1	1	-	-	-	2				
Financing income, net	3	1	-	4	-	8				
Total expenses (income)	191	337	93	127	(5)	743				
Company's share of profits of equity accounted investees	5	1	-	7	-	13				
Profit (loss) before income tax	29	(65)	28	111	11	114				
Other comprehensive loss before income tax	(24)	(5)	(2)	(26)	(3)	(60)				
Total comprehensive income (loss) before income tax	5	(70)	26	85	8	54				
Liabilities for insurance contracts, gross, as at March 31, 2022	3,550	878	1,149	5,577	189	11,343				
Liabilities for insurance contracts, retention, as at March 31, 2022	2,984	808	219	3,490	189	7,690				

* Property and other branches consist mainly of results from the property loss insurance and comprehensive homeowners branches, where the activity from these branches accounts for 75% of all premiums in these lines of business

** Other liabilities branches consist mainly of third-party insurance and professional liability branches where the activity from these branches accounts for 80% of all premiums in these lines of business

Notes to the condensed consolidated interim financial statements

Note 4 - Operating segments (Contd.)

B. Additional information about the non-life insurance segment (contd.)

		For the thre	ee months ended	l March 31, 2021	(Unaudited)	
	Compulsory Motor	Motor Property	Property and Other sectors*	Other Liability sectors**	Mortgage insurance	Total
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million
Gross premiums	202	339	313	410	(1)	1,263
Reinsurance premiums	2	5	241	123	-	371
Premiums in retention	200	334	72	287	(1)	892
Change in outstanding unearned premiums, in retention	70	128	19	148	(3)	362
Earned premiums in retention	130	206	53	139	2	530
Profits from investments, net, and financing income	38	7	5	53	4	107
Income from commissions	-	1	47	11	-	59
Total income	168	214	105	203	6	696
Payments and changes in liabilities for insurance contracts, gross	165	153	113	269	(10)	690
Reinsurers' share of payments and change in liabilities for insurance contracts	2	2	93	104	-	201
Payments and changes in liabilities for insurance contracts in retention	163	151	20	165	(10)	489
Commissions, marketing expenses and other acquisition costs	23	44	61	33	-	161
General and administrative expenses	2	1	3	2	1	9
Financing expenses, net	6	1		9	-	16
Total expenses (income)	194	197	84	209	(9)	675
Company's share of profits of equity accounted investees	2	-		4	-	6
Profit (loss) before income tax	(24)	17	21	(2)	15	27
Other comprehensive income before income tax	6	1	-	8	-	15
Total comprehensive income (loss) before income tax	(18)	18	21	6	15	42
Liabilities for insurance contracts, gross, as at March 31, 2021	2,582	640	991	5,429	226	9,868
Liabilities for insurance contracts, retention, as at March 31, 2021	2,512	628	177	3,427	226	6,970

Property and other branches consist mainly of results from the property loss insurance and comprehensive homeowners branches, where the activity from these branches accounts for 78% of all premiums in these * lines of business

Other liabilities branches consist mainly of third-party insurance and professional liability branches where the activity from these branches accounts for 81% of all premiums in these lines of business **

Note 4 - Operating segments (Contd.)

B. Additional information about the non-life insurance segment (Contd.)

	For the year ended December 31, 2021							
	Compulsory Motor	Motor Property	Property and Other sectors*	Other Liability sectors**	Mortgage insurance	Total		
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million		
Gross premiums	620	953	1,119	1,001	(3)	3,690		
Reinsurance premiums	19	19	881	412	-	1,331		
Premiums in retention	601	934	238	589	(3)	2,359		
Change in outstanding unearned premiums, in retention	32	11	8	17	(8)	60		
Earned premiums in retention	569	923	230	572	5	2,299		
Profit from investments, net, and financing income	192	34	28	249	16	519		
Income from commissions	1	5	182	55	-	243		
Total income	762	962	440	876	21	3,061		
Payments and changes in liabilities for insurance contracts, gross	796	806	441	1,205	(32)	3,216		
Reinsurers' share of payments and change in liabilities for insurance contracts	22	19	370	481	-	892		
Payments and changes in liabilities for insurance contracts in retention	774	787	71	724	(32)	2,324		
Commissions, marketing expenses and other acquisition costs	108	236	245	161	-	750		
General and administrative expenses	10	11	9	6	3	39		
Financing income, net	(4)	(1)	-	(6)	-	(11)		
Total expenses (income)	888	1,033	325	885	(29)	3,102		
Company's share of profits of equity accounted investees	15	3	1	21	-	40		
Profit (loss) before income tax	(111)	(68)	116	12	50	(1)		
Other comprehensive income before income tax	42	7	3	57	3	112		
Total comprehensive income (loss) before income tax	(69)	(61)	119	69	53	111		
Liabilities for insurance contracts, gross, as at December 31, 2021	3,499	760	1,028	5,507	197	10,991		
Liabilities for insurance contracts, retention, as at December 31, 2021	2,952	706	188	3,426	197	7,469		

* Property and other branches consist mainly of results of property loss insurance and comprehensive homeowners insurance, where the activity from these branches accounts for 78% of total premiums earned from these branches

** Other liabilities branches include mainly results from third-party insurance and professional liability which account for 73% of total premiums in these branches

Note 4 - Operating segments (Contd.)

C. Additional information about the life assurance and long-term savings segment

	For the thre	e months ended	March 31, 2022	(Unaudited)	For the three months ended March 31, 2021 (Unaudited)			
	Provident	Pension	Life assurance	Total	Provident	Pension	Life assurance	Total
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million
Premiums earned, gross	-	-	2,000	2,000	-	-	1,446	1,446
Premiums earned by reinsurers	-	-	46	46	-	-	43	43
Earned premiums in retention	-	-	1,954	1,954	-	-	1,403	1,403
Profit (loss) from investments, net, and financing income	1	1	(785)	(783)	-	1	2,447	2,448
Income from management fees	71	103	131	305	62	84	258	404
Income from commissions	-	-	11	11	-	-	9	9
Other income	-	-	7	7	-	-	-	-
Total income	72	104	1,318	1,494	62	85	4,117	4,264
Payments and changes in liabilities for insurance contracts and investment contracts, gross Reinsurers' share of payments and change in liabilities for insurance	1	4	1,065	1,070	1	3	3,629	3,633
contracts	-	-	32	32	-	-	32	32
Payments and changes in liabilities for insurance contracts and investment contracts in retention	1	4	1,033	1,038	1	3	3,597	3,601
Commissions, marketing expenses and other acquisition costs	27	33	239	299	25	28	202	255
General and administrative expenses	30	44	115	189	21	36	101	158
Other expenses	1	4	-	5	-	-	-	-
Financing expenses, net	-	1	6	7	-	-	3	3
Total expenses	59	86	1,393	1,538	47	67	3,903	4,017
Company's share of profits of equity accounted investees	-	-	2	2	-	-	1	1
Profit (loss) before income tax	13	18	(73)	(42)	15	18	215	248
Other comprehensive loss before income tax	(3)	(3)	(145)	(151)	-	-	(26)	(26)
Total comprehensive income (loss) before income tax	10	15	(218)	(193)	15	18	189	222

Note 4 - Operating segments (Contd.)

C. Additional information about the life assurance and long-term savings segment (Contd.)

For the year ended December 31, 2021			
Provident	Pension	Life assurance	Total
NIS million	NIS million	NIS million	NIS million
-	-	5,887	5,887
-	-	187	187
-	-	5,700	5,700
1	3	9,607	9,611
260	372	916	1,548
-	-	39	39
-	-	10	10
261	375	16,272	16,908
2	14	14 533	14.540
2	14	14,533	14,549
-	-	123	123
2	14	14 410	14 424
-		,	14,426
			1,035 608
		582	
2	4	-	6
-	1	15	16
193	286	15,612	16,091
-	-	20	20
68	89	680	837
-	2	70	72
68	91	750	909
	Provident NIS million - - - 1 260 - 261 2 - 2 102 87 2 - 193 - 68 -	Provident Pension NIS million NIS million - - - - - - - - - - 1 3 260 372 - - - - 260 375 2 14 - - 2 14 - - 2 14 - - 2 14 - - 102 128 87 139 2 4 - 1 193 286 - 68 89 - 2 2	Provident Pension Life assurance NIS million NIS million NIS million NIS million - - 5,887 - - - 187 - - - 187 - - - - 5,700 1 3 9,607 260 372 916 - - 39 - - 10 261 375 16,272 2 14 14,533 - - 123 2 14 14,410 102 128 805 87 139 382 2 4 - - 1 15 193 286 15,612 - - 20 68 89 680 - 2 70

C. Additional information about the life assurance and long-term savings segment (Contd.)

Results by policy category

	Policies which include a savings component (incl. riders) by date of policy issue			Policies with no savings component			
		<u>from 2004</u>		<u>from 2004</u>		old as a stand-	
	<u>Until 1990 (1)</u>	Up to 2003	Not yield - dependent	Yield dependent	Personal lines	Group	Total
For the three months ended March 31, 2022 (Unaudited)				NIS million			
Gross premiums	18	215	-	1,388	349	32	2,002
Premiums for amounts deposited in a consolidated company as part of a defined benefit plan for the Group's employees							(2)
Total							2,000
Amounts received for investment contracts recognized directly in insurance reserves	-	-	-	1,383	-	-	1,383
Financial margin including management fees - in terms of comprehensive income (2)	(90)	38	(68)	93	-	-	(27)
Payments and changes in liabilities for insurance contracts, gross	209	(52)	21	974	195	31	1,378
Payments and change in liabilities for investment contracts	-	-	1	(314)	-	-	(313)
Total comprehensive income (loss) from life assurance business	(95)	(17)	(72)	23	(51)	(6)	(218)

(1) The products issued through 1990 (including increases in respect of these products) are mainly yield guaranteed and are partially backed by designated bonds

(2) The financial margin does not include the Company's other revenues which are collected as a percentage of the premium and it is calculated before deducting expenses for management of investments. The financial margin in policies with a guaranteed yield is based on actual revenues from investments in the reporting year, net of a factor of the guaranteed yield rate for the year, multiplied by the average reserve. On this matter, income from investments also includes the change in the fair value of available-for-sale financial assets which is recognized in the statement of comprehensive income. In yield-dependent policies, the financial margin is the fixed and variable management fees which are calculated based on the yield and the average retained amount of the insurance reserves

C. Additional information about the life assurance and long-term savings segment (Contd.)

Results by policy category (Contd.)

	Policies which include a savings component (incl. riders) by date of policy issue			Policies with no savings component			
	¥		from 2004		Risk that was sold as a stand- alone policy		
	Until 1990 (1)	Up to 2003	Not yield <i>-</i> dependent	Yield dependent	Personal lines	Group	Total
For the three months ended March 31, 2021 (Unaudited)				NIS million			
Gross premiums	21	214	-	870	309	34	1,448
Premiums for amounts deposited in a consolidated company as part of a defined benefit plan for the Group's employees							(2)
Total							1,446
Amounts received for investment contracts recognized directly in insurance reserves	-	-	14	673	-	-	687
Financial margin including management fees - in terms of comprehensive income (2)	14	170	9	88	-	-	281
Payments and changes in liabilities for insurance contracts, gross	121	1,235	6	1,619	149	38	3,168
Payments and change in liabilities for investment contracts	-	-	4	457	-	-	461
Total comprehensive income (loss) from life assurance business	9	143	5	13	26	(7)	189

(1) The products issued through 1990 (including increases in respect of these products) are mainly yield guaranteed and are partially backed by designated bonds

(2) The financial margin does not include the Company's other revenues which are collected as a percentage of the premium and it is calculated before deducting expenses for management of investments. The financial margin in policies with a guaranteed yield is based on actual revenues from investments in the reporting year, net of a factor of the guaranteed yield rate for the year, multiplied by the average reserve. On this matter, income from investments also includes the change in the fair value of available-for-sale financial assets which is recognized in the statement of comprehensive income. In yield-dependent policies, the financial margin is the fixed and variable management fees which are calculated based on the yield and the average retained amount of the insurance reserves

Note 4 - Operating segments (Contd.)

C. Additional information about the life assurance and long-term savings segment (Contd.)

Results by policy category (Contd.)

	Policies which date of policy is		ings component (incl. riders) by		Policies with no savings component Risk that was sold as a stand - alone policy		
			1101112004		atone poncy		
Data For the year ended December 31, 2021	<u>Until 1990 (1)</u>	<u>Up to 2003</u>	Not yield - dependent	Yield dependent NIS million	Personal lines	Group	Total
Gross premiums	78	857	-	3,524	1,296	140	5,895
Premiums for amounts deposited in a consolidated company as part of a defined benefit plan for the Group's employees							(8)
Total Amounts received for investment contracts recognized directly in insurance reserves Financial margin including management fees - in terms of comprehensive income		-	14	3,925	<u>-</u>	-	5,887 3,939
(2)	117	542	76	370	-	-	1,105
Payments and changes in liabilities for insurance contracts, gross	680	4,490	47	6,752	684	108	12,761
Payments and change in liabilities for investment contracts	-	-	5	1,767	-	-	1,772
Total comprehensive income (loss) from life assurance business	74	407	75	48	119	27	750

(1) The products issued through 1990 (including increases in respect of these products) are mainly yield guaranteed and are partially backed by designated bonds

(2) The financial margin does not include the Company's other revenues which are collected as a percentage of the premium and it is calculated before deducting expenses for management of investments. The financial margin in policies with a guaranteed yield is based on actual revenues from investments in the reporting year, net of a factor of the guaranteed yield rate for the year, multiplied by the average reserve. On this matter, income from investments also includes the change in the fair value of available-for-sale financial assets which is recognized in the statement of comprehensive income. In yield-dependent policies, the financial margin is the fixed and variable management fees which are calculated based on the yield and the average retained amount of the insurance reserves

D. Additional information about the health insurance segment

Results by policy category

	Long-term care (LTC)		Other health*				
	Personal lines	Group	long-term **	short-term **	Total		
For the three months ended March 31, 2022 (Unaudited)	NIS million						
Gross premiums	193	419	697	103	1,412		
Payments and changes in liabilities for insurance contracts, gross	(520)	371	498	81	430		
Total comprehensive income (loss) from health insurance business	639	(25)	(14)	(8)	592		

	Long-term care (LTC)		Other health*			
	Personal lines	Group	long-term **	short-term **	Total	
For the three months ended March 31, 2021 (Unaudited)	NIS million					
Gross premiums	189	380	641	66	1,276	
Payments and changes in liabilities for insurance contracts, gross	343	583	385	59	1,370	
Total comprehensive income (loss) from health insurance business	(133)	(39)	74	(1)	(99)	

* Of this, personal lines premiums in the amount of NIS 495 million for the three-months ended March 31, 2022 (personal lines premiums of NIS 430 million for the three months ended March 31, 2021) and group premiums of NIS 305 million, for the three-months ended March 31, 2022 (group premiums of NIS 277 million for the three months ended March 31, 2021).

** The most significant cover included in other long-term health is medical expenses, and in other short-term health is travel insurance.

*** The most significant cover included in other long-term health is medical expenses, and in other short-term health is foreign workers.

Note 4 - Operating segments (Contd.)

D. Additional information about the health insurance segment (Contd.)

Results by policy category (Contd.)

	Long-term care (LTC)		Other health*		_		
Data for the year ended December 31, 2021	Personal lines	Group	long-term **	short-term **	Total		
	NIS million						
Gross premiums	763	1,577	2,650	379	5,369		
Payments and changes in liabilities for insurance contracts, gross	1,004	2,232	1,459	271	4,966		
Total comprehensive income (loss) from health insurance business	50	(70)	544	11	535		

* Of this, personal lines premiums in the amount of NIS 1,888 million and group premiums in the amount of NIS 1,141 million

** The most significant cover included in other long-term health is medical expenses and in other short-term health is overseas travel

Note 5 - Taxes on income

Tax rates applicable to the income of the Group companies

Current taxes for the reported period are calculated in accordance with the tax rates presented below.

The statutory tax rates applicable to financial institutions, including the Company's subsidiaries which are financial institutions, commencing 2018 and thereafter, are as follows: corporate tax at a rate of 23%, profit tax at a rate of 17% - namely, tax at a rated weight of 34.19%.

Note 6 - Financial instruments

A. Assets for Yield-dependent contracts

1. Information about assets held against insurance contracts and investment contracts, presented at fair value through profit and loss:

	As at March 31		As at December 31
	2022	2021	2021
	(Unaudited)	(Unaudited)	(Audited)
	NIS million	NIS million	NIS million
Investment property	1,995	1,814	1,963
Financial investments			
Marketable debt assets	21,401	20,852	21,155
Non-marketable debt assets (*)	15,720	15,165	15,977
Shares	17,612	14,932	17,393
Other financial investments	20,038	16,752	19,325
Total financial investments	74,771	67,701	73,850
Cash and cash equivalents	4,430	2,602	5,012
Other	530	993***	723
Total assets for yield-dependent contracts*	81,726	73,110	81,548
Trade and other payables	528	507	582
Financial liabilities**	120	268	61
Financial liabilities for yield-dependent contracts	648	775	643
(*) Of which assets measured at adjusted cost	415	449	413
Fair value of debt assets measured at adjusted cost	466	512	485

* Including net assets (assets net of financial liabilities) in the amount of NIS 5,050 million, NIS 4,831 million, and NIS 5,153 million as at March 31, 2022 and 2021, and December 31, 2021 respectively, for a liability attributable to a group long-term care portfolio in which most of the investment risks are not imposed on the insurer

** Mainly derivatives and futures contracts

*** Reclassified

A. Assets for Yield-dependent contracts (Contd.)

2. Fair value hierarchy of financial assets

The following table presents an analysis of the assets held against insurance contracts and investment contracts that are presented at fair value through profit or loss. The different levels are defined as follows:

Level 1 – fair value measured by use of quoted prices (not adjusted) on an active market for identical instruments.

Level 2 – fair value measured by using observed data, direct and indirect, which are not included in Level 1 above.

Level 3 – fair value measured by using data which are not based on observed market data.

		As at March 31,	, 2022 (Unaudited	1)
	Level 1	Level 2	Level 3	Total
	NIS million	NIS million	NIS million	NIS million
Marketable debt assets	18,861	2,540	-	21,401
Non-marketable debt assets	-	14,606	699	15,305
Shares	14,670	181	2,761	17,612
Other	11,612	304	8,122	20,038
Total	45,143	17,631	11,582	74,356

Marketable debt assets
Non-marketable debt assets
Shares
Other
Total

Marketable debt assets Non-marketable debt assets

Shares Other

Total

As at March 31, 2021 (Unaudited)					
Level 1	Level 2	Level 3	Total		
NIS million	NIS million	NIS million	NIS million		
17,823	3,029	-	20,852		
-	13,755	961	14,716		
12,237	71	2,624	14,932		
11,126	75	5,551	16,752		
41,186	16,930	9,136	67,252		

As at December 31,2021					
Level 1	Level 2	Level 3	Total		
NIS million	NIS million	NIS million	NIS million		
18,584	2,571	-	21,155		
-	14,640	924	15,564		
14,688	145	2,560	17,393		
11,508	579	7,238	19,325		
44,780	17,935	10,722	73,437		

Note 6 - Financial instruments (Contd.)

A. Assets for Yield-dependent contracts (Contd.)

3. Financial assets measured at level-3 fair value hierarchy

For three-months ended March 31, 2022 (Unaudited)

	Fair-value measurement on report date					
	Financial assets at fair value through profit or loss					
	Non- marketable debt assets	Shares	Other	Total		
	NIS million	NIS million	NIS million	NIS million		
Balance as at January 1, 2022	924	2,560	7,238	10,722		
Total profits (losses) that were recognized:						
In profit and loss (*)	8	78	527	613		
Interest and dividend receipts	(11)	(19)	(79)	(109)		
Purchases	113	169	585	867		
Sales	-	(27)	(141)	(168)		
Redemptions	(300)	-	(8)	(308)		
Transfers from Level 3 *	(35)	-	-	(35)		
Balance as at March 31, 2022	699	2,761	8,122	11,582		
(*) Of which total unrealized profit (loss) for the period in respect of financial assets held correct to March 31, 2022	(3)	77	525	599		

* For securities whose rating changed

For three-months ended March 31, 2021 (Unaudited)

	Fair-value measurement on report date					
	Financial assets at fair value through profit or loss					
	Non- marketable debt assets NIS million	Shares NIS million	Other NIS million	Total NIS million		
Balance as at January 1, 2021	1,047	2,442	4,993	8,482		
Total profits (losses) that were recognized:						
In profit and loss (*)	42	216	415	673		
Interest and dividend receipts	(15)	(7)	(81)	(103)		
Purchases	156	88	396	640		
Sales	-	(115)	(163)	(278)		
Redemptions	(255)	-	(9)	(264)		
Transfers from Level 3 *	(14)	-	-	(14)		
Balance as at March 31, 2021 (*) Of which total unrealized profits for the	961	2,624	5,551	9,136		
period in respect of financial assets held correct to March 31, 2021	37	183	400	620		

* For securities whose rating changed

Note 6 - Financial instruments (Contd.)

A. Assets for Yield-dependent contracts (Contd.)

3. Financial assets measured at level-3 fair value hierarchy (Contd.)

For the year ended December 31, 2020 (Audited)

	Fair-value measurement on report date				
	Financial	Financial assets at fair value through profit or loss			
	Non- marketable debt assets	Shares	Other	Total	
	NIS million	NIS million	NIS million	NIS million	
Balance as at January 1, 2021	1,047	2,442	4,993	8,482	
Total profits (losses) that were recognized:					
In profit and loss (*)	33	296	1,092	1,421	
Interest and dividend receipts	(42)	(302)	(488)	(832)	
Purchases	622	462	2,298	3,382	
Sales	-	(89)	(619)	(708)	
Redemptions	(720)	-	(38)	(758)	
Transfers from Level 3 *	(16)	(249)	-	(265)	
Balance as at December 31,2021	924	2,560	7,238	10,722	
(*) Of which total unrealized profits for the period in respect of financial assets held correct to December 31, 2021	6	185	1,075	1,266	

* For securities whose rating changed

B. Other financial investments

1. Non-marketable debt assets and held-to-maturity investments – book value against fair value

	(Una 2022	Aarch 31 udited) Book Value 2021	December 31 (Audited) 2021	(Una 2022	March 31 udited) Fair Value 2021	December 31 (Audited) 2021
Loans and receivables:	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million
Designated bonds Non-marketable, non- convertible debt assets, excluding bank deposits	4,895	5,215	4,779	6,812	7,244	7,023
(*)	7,896	7,540	7,625	8,630	8,555	8,638
Bank deposits	4,891	2,976	4,225	4,935	3,475	4,279
Total non-marketable debt assets	17,682	15,731	16,629	20,377	19,274	19,940
Investments held to maturity: Marketable non-						
convertible debt assets	14	27	14	15	29	14
Total investments held to maturity	14	27	14	15	29	14
Total	17,696	15,758	16,643	20,392	19,303	19,954
Impairments recognized in profit and loss (in aggregate)	36	55	37			
(*) Of which debt assets measured at fair value	3,770	1,524*	3,152			

* Reclassified

B. Other financial investments (Contd.)

2. Fair value hierarchy of financial assets

The following table presents an analysis of financial instruments measured at fair value on a timely basis, using a valuation method based on the fair value hierarchy. See Note 6A(2) for a definition of the different levels.

	As at March 31, 2022 (Unaudited)					
	Level 1	Level 2	Level 3	Total		
	NIS million	NIS million	NIS million	NIS million		
Marketable debt assets	12,465	662	-	13,127		
Non-marketable debt assets	-	3,770	-	3,770		
Shares	2,226	82	449	2,757		
Other	807	283	2,778	3,868		
Total	15,498	4,797	3,227	23,522		

	As at March 31, 2021 (Unaudited)				
	Level 1	Level 2	Level 3	Total NIS million	
	NIS million	NIS million	NIS million		
Marketable debt assets	10,828	770	-	11,598	
Non-marketable debt assets	-	1,524*	-	1,524	
Shares	1,202	162	333	1,697	
Other	1,089	69	1,933	3,091	
Total	13,119	2,525	2,266	17,910	

As at December 31, 2021 (Audited)				
Level 1	Level 2	Level 3	Total	
NIS million	NIS million	NIS million	NIS million	
12,874	691	-	13,565	
-	3,152	-	3,152	
2,017	80	411	2,508	
885	294	2,416	3,595	
15,776	4,217	2,827	22,820	
	NIS million 12,874 - 2,017 885	Level 1 Level 2 NIS million NIS million 12,874 691 - 3,152 2,017 80 885 294	Level 1 Level 2 Level 3 NIS million NIS million NIS million 12,874 691 - - 3,152 - 2,017 80 411 885 294 2,416	

* Reclassified

B. Other financial investments (Contd.)

3. Financial assets measured at level-3 fair value hierarchy

For three-months ended March 31, 2022 (Unaudited)

	Fair-value measurement on reporting date Financial assets at fair value through profit or loss and available-for-sale assets			
	Shares	Other	Total	
	NIS million	NIS million	NIS million	
Balance as at January 1, 2022	411	2,416	2,827	
Total profits (losses) that were recognized:				
In profit and loss (*)	-	23	23	
In other comprehensive income	37	274	311	
Interest and dividend receipts	-	(26)	(26)	
Purchases	3	169	172	
Sales	(2)	(76)	(78)	
Redemptions	-	(2)	(2)	
Balance as at March 31, 2022	449	2,778	3,227	
(*) Of which total unrealized profit for the period in respect of financial assets held at March 31, 2022	-	23	23	

For the three-months ended March 31, 2021 (Unaudited)

	Fair-value measurement on reporting date Financial assets at fair value through profit or loss and available- for-sale assets			
	Shares	Other	Total	
	NIS million	NIS million	NIS million	
Balance as at January 1,2021	292	1,779	2,071	
Total profits (losses) that were recognized:				
In profit and loss (*)	51	85	136	
In other comprehensive income	32	60	92	
Interest and dividend receipts	(49)	(23)	(72)	
Purchases	24	118	142	
Sales	(17)	(81)	(98)	
Redemptions	-	(5)	(5)	
Balance as at March 31, 2021 (*) Of which total unrealized profit for the period in respect of financial assets held at March 31,	333	1,933	2,266	
2021	46	56	102	

B. Other financial investments (Contd.)

3. Financial assets measured at level-3 fair value hierarchy (Contd.)

For the year ended December 31, 2021 (Audited)

	Fair-value measurement on report date				
	Financial assets at fair value through profit or loss and available-for-sale assets				
	Shares	Other	Total		
	NIS million	NIS million	NIS million		
Balance as at January 1,2021 Total profits (losses) that were recognized:	292	1,779	2,071		
In profit and loss (*)	47	150	197		
In other comprehensive income	20	168	188		
Interest and dividend receipts	(51)	(154)	(205)		
Purchases	146	701	847		
Sales	-	(209)	(209)		
Redemptions	-	(19)	(19)		
Transfers from Level 3 *	(43)	-	(43)		
Balance as at December 31, 2021 (*) Of which total unrealized profit for the period in respect of financial	411	2,416	2,827		
assets held at December 31, 2021	42	120	162		

* For securities whose rating changed

C. Financial liabilities

1. Financial liabilities presented at amortized cost – book value against fair value

	As at March 3		As at December 31	As at March 3		As at December 31
	(Unaudited)	(Unaudited) Book Value	(Audited)	(Unaudited)	(Unaudited) Fair Value	(Audited)
	2022	2021	2021	2022	2021	2021
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million
Loans from banks * Short-term credit from banks and	362	453	375	338	472	376
others	571	12	531	571	12	531
Bonds *	6,240	5,730	6,158	6,348	6,211	6,615
Total financial liabilities presented at amortized cost	7,173	6,195	7,064	7,257	6,695	7,522
Subordinated liability notes issued for compliance with the capital requirements	5,154	4,881	5,137			

* Including subordinated liability notes

C. Financial liabilities (Contd.)

2. Interest rates used to determine the fair value

	As at March	31	As at December 31
	2022	2021	2021
Loans	1.92%	1.76%	1.89%
Bonds	1.54%	0.64%	1.02%

C. Financial liabilities (Contd.)

3. Financial liabilities measured at fair value hierarchy

The following table presents an analysis of financial liabilities presented at fair value. For a definition of the levels, see Note 6A(2).

	As at March 31, 2022 (Unaudited)			
	Level 1	Level 2	Total	
	NIS million	NIS million	NIS million	
Derivatives (1)	11	273	284	
Short sales (2)	3,810	183	3,993	
Total financial liabilities	3,821	456	4,277	
	As at March 31, 2021 (Unaudited)			
	Level 1	Level 2	Total	
	NIS million	NIS million	NIS million	

	NIS million	NIS million	NIS million
Derivatives (1)	40	410	450
Short sales (2)	1,347	193	1,540
Total financial liabilities	1,387	603	1,990

	As at December 31, 2021 (Audited)			
	Level 1	Level 2	Total	_
	NIS million	NIS million	NIS million	
ves (1)	11	154	165	
es (2)	3,020	196	3,216	
liabilities	3,031	350	3,381	

- (1) Derivative financial instruments held to cover the insurance liabilities as part of the Group's policy for asset and liability management ("ALM"). Of the above, NIS 164 million, NIS 182 million, and NIS 103 million as at March 31, 2022and 20201 and December 31, 2021, respectively, are included in the non-yield-dependent liabilities, and the balance is included in the Group's yield-dependent liabilities. Most of the amount is attributable to management of exposure by means of derivatives to foreign currency and the CPI. To cover these liabilities, the financial institutions deposited collaterals in accordance with the conditions prescribed in the contract. The Group's financial institutions have approved credit facilities for their derivative activity. Accordingly, the Group's financial institutions deposited NIS 41 million, NIS 644 million and NIS 275 million as at March 31, 2022 and 2021 and December 31, 2021, respectively, as collateral to cover their liabilities attributable to this activity (these collaterals are presented under receivables)
- (2) Harel Finance, a subsidiary of the Company, operates through subsidiaries involved in the short sale of government bonds (Israeli and foreign) and places the proceeds of the sales in deposit until the bond maturity date. In the Reporting Period, these companies made short sales of NIS 600 million within the context of this activity. The balance of the backing amounts as at March 31, 2022, is NIS 3,690 million.

C. Financial liabilities (Contd.)

4. Additional information

- 1. Midroog rating
 - A. On February 1, 2022, Midroog announced a financial strength rating for Harel Insurance of 'Aa1.il', rating outlook stable, and ratings of 'Aa2.il(hyb)' for liability notes that form subordinated tier-2 capital (Series 1) and subordinated liability notes (hybrid tier-3 capital), Series 6-8 bonds issued by Harel Finance & Issues, a wholly owned subsidiary of Harel Insurance, and ratings of 'Aa3.il(hyb)' for subordinated liability notes (secondary capital and tier-2 capital) that were issued by Harel Finance & Issues as part of Series 9 18 bonds, rating outlook stable.
 - B. On March 2, 2022, Midroog announced affirmation of the Company's rating of Aa2.il rating outlook stable as well as affirmation of the Aa2.il rating for Series 1 bonds issued by the Company.
- 2. Financial covenants

For information relating to financial covenants for a bank loan taken by the Company, in respect of short-term loans taken by a Company subsidiary and in respect of Series 1 bonds issued by the Company, see Note 25 to the annual financial statements. At March 31, 2022 and at the date of publication of the report, the subsidiary is in compliance with the prescribed financial covenants.

3. Full early redemption of bonds (Series 8) of Harel Finance & Issues

After the Reporting Period, on May 8, 2022, the board of directors of Harel Finance & Issues, a wholly owned subsidiary of Harel Insurance, resolved to make full, early redemption at the initiative of Harel Finance & Issues of the Series 8 bonds that it issued, which will take place on May 31, 2022.

4. Bonds issued by a second-tier subsidiary of Harel Finance

On March 9, 2022, Harel Exchange Traded Deposit Ltd. (a second-tier subsidiary fully owned by Harel Finance), issued NIS 63 million par value Series 1 bonds to the public, by means of a shelf offering in accordance with a prospectus dated July 31, 2019. The proceeds of the bond issuance were NIS 64 million.

D. Information about level 2 and level 3 fair-value measurement

The interest rates used to determine the fair value of non-marketable debt assets

The fair value of non-marketable debt assets measured at fair value by way of profit or loss and of non-marketable debt assets, where information about the fair value is given for disclosure purposes only, is determined by discounting the estimated cash flows they are expected to produce. The discounting rates are based on an allocation of the negotiable market into deciles consistent with the yield to maturity of the debt asset, and determining the position of the non-marketable asset on those deciles, and this in accordance with the risk premium stemming from the prices of transactions/issues on the non-negotiable market. The price quotes and interest rates used for the discounting are determined by Mirvah Hogen, a company that provides price quotes and interest rates for financial institutions for the revaluation of non-marketable debt assets.

Note 7 - Contingent liabilities, guarantees and commitments

A. Contingent Liabilities

There is a general exposure which cannot be evaluated and/or quantified resulting, *inter alia*, from the complexity of the services provided by the Group to its insured and its customers. Among other things, the complexity of these arrangements incorporates the potential for interpretive and other arguments, in part due to information gaps between the Group's companies and other parties to the insurance contacts and the Group's other products, pertaining to a long series of commercial and regulatory conditions, including arguments regarding the way in which the moneys of insureds and members are invested. It is impossible to anticipate in advance the types of arguments that might be raised in this area, and the exposure resulting from these and other allegations in connection with the Group's products which are raised as part of the various legal proceedings, *inter alia*, through a mechanism of hearings set forth in the Class Actions Law.

New interpretations of the information in insurance policies and long-term term pension products may, in some instances, affect the Group's future profits in respect of the existing portfolio, in addition to the exposure inherent in requirements to compensate customers for past activity. Likewise, there is an element of exposure due to regulatory changes and instructions issued by the Commissioner, in circulars that are in force and in draft circulars that are still under discussion, as well as in the Commissioner's Position Papers and Decisions in Principle on various topics, some of which have far-reaching legal and operational ramifications. This exposure is particularly strong in pension savings and long-term insurance, including health insurance. In these sectors, agreements with the policyholders, members and customers are over a period of many years during which there may be policy changes, regulatory changes and changes in the law, including in case law. These rights are managed through complex automated systems, and in view of these changes they must be constantly adjusted. All these create considerable operational and mechanization exposure in these areas of activity. The Group's financial institutions have an enforcement plan according to which they review compliance with the regulatory provisions and take action to correct any deficiencies found.

Among these regulatory changes, in 2011, the Commissioner published a circular concerning data optimization of the rights of members of financial institutions. The circular details the activity framework that a financial institution must carry out to ensure that members' rights are reliably, and fully recorded in the information systems, and that they are available and retrievable. The circular prescribes stages for implementation of the optimization project, which is scheduled for completion on June 30, 2016. At this date, the Company has completed the optimization activity for most of the issues that were included in the work plan. Nevertheless, several issues remain that will continue to be dealt with even after the date scheduled for completion of the project. Furthermore, in accordance with the requirements of the circular, the Company also performs ongoing optimization and preserves the optimization activity conducted as part of the project.

Additionally, there is a general exposure due to complaints submitted from time to time to the Capital Markets, Insurance and Savings Authority against the Group's financial institutions, regarding the rights of insureds relating to the insurance policies and/or the law. These complaints are handled on a current basis by the public complaints division within the Company. The decisions of the Capital Market, Insurance and Savings Authority on these complaints, if and to the extent that any decision is made, might be given across the board and apply to large groups of insureds. Additionally, sometimes, the complaining entities even threaten to take action regarding their complaints in the form of class actions. At this time, it is impossible to estimate whether there is any exposure for such complaints and it is not possible to estimate whether the Capital Market, Insurance and Savings Authority will issue an across-the-board decision on these complaints and/or if class actions will be filed as a result of such processes, and it is impossible to estimate the potential exposure to such complaints. Therefore, no provision for this exposure has been included. Furthermore, as part of the policy applied by the Capital Market, Insurance and Savings Authority to enhance the controls and audits of financial institutions, from time to time the Authority conducts in-depth audits of a variety of activities of the Group's financial institutions. As a result of these audits, the Ministry of Finance may impose fines and/or financial penalties and it may also order that changes should be made with respect to various operations, both in the past and in the future. Regarding instructions with respect to past activity, the Capital Market, Insurance and Savings Authority might request the restitution of money or a change in conditions vis-à-vis policyholders and/or fund members which may impose financial liabilities on the Company's subsidiaries and/or increase the exposure of the subsidiaries that are insurers to a broader range of insurance events to be covered on account of these instructions, in policies that were issued.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

A. Contingent Liabilities (Contd.)

As part of the audits conducted by the Capital Market, Insurance and Savings Authority, during the Reporting Period several in-depth audits were and are being conducted of the pension and provident sectors, life assurance, health insurance, long-term care insurance, non-life insurance, customer service, claims settlement, investments and public complaints.

Within the context of investments made by the Group companies in debt assets, the investing companies are signed on indemnity notes of unlimited amounts vis-a-vis the trustees of the debt assets. In these indemnity notes, the Group companies (as well as the other investors in those debt assets), undertook towards the trustees to indemnify the trustees for any expense that may be imposed on them during the handling of the debt arrangements, insofar as they handle such arrangements and insofar as the said expense is not paid by the company which owns the assets. The Group companies hold several debt assets that are in an arrangement process. The exposure relating to the indemnity notes that were given in respect of these debt assets is insignificant.

Towards the end of 2021, a dispute emerged between Harel Insurance and a financial institution that Harel Insurance had provided significant amounts to as part of an investment in liability notes issued by this financial institution. The dispute concerns the right of the said financial institution to make early redemption of the liability notes, prior to the final date of redemption specified in the liability notes. Early redemption of the liability notes will cause Harel Insurance a loss, in part due to the anticipated loss of income and loss of the opportunity to be backed by alternative assets with a long duration corresponding with the liabilities against which the investment was made. In the opinion of Harel Insurance, which is based on the factual foundation it formulated, the financial institution does not have the right to make early redemption of the liability notes. Negotiations between the management of Harel Insurance and the financial institution to resolve the dispute were unsuccessful. In light of the foregoing, and in view of the fact that the spread between the interest quoted in the liability notes and the alternative interest rate is gradually decreasing as interest rates rise, and without derogating from the opinion of Harel Insurance as noted, Harel Insurance informed the financial institution that it will not oppose placing the deposits on immediate call in order to settle the dispute between the parties.

In connection with a merger of the insurance activity of Dikla into Harel Insurance, and based on a request by Clalit Health Services which is Dikla's main customer and where, as part of the agreement with Clalit Dikla provides operating and management services for the Supplementary Health Services Plan and the Long-term Care plan for Clalit's members, Harel Insurance signed an indemnity note in which it undertook to indemnify Clalit Health Services for losses sustained by Clalit if and insofar as any losses are sustained, as a result of a spin-off of operations, under the conditions set out in the indemnity note.

On December 1, 2021, Harel Insurance acquired the insurance activity of Shirbit, including the rights and obligations incorporated therein.

Following is information about the exposure to class actions and motions to recognize claims as class actions filed against the Company and/or companies in the Group.

For motions to approve legal actions as class actions as detailed below, which are, in management's opinion based inter alia on legal opinions that it received, where it is more likely than not that the defense arguments of the Company (or subsidiary) and certification of the action as a class action will be accepted, or where there is a 50% or more chance that in the final outcome the Company's (or subsidiaries) arguments will be accepted, where it is reasonable that a proposed compromise settlement, that does not include a significant undertaking for monetary payment will be accepted, no provision has been included in the financial statements. Regarding applications to approve a legal action, fully or partly, as class action with respect to a claim, where it is more reasonable than not that the Company's defense arguments are likely to be rejected, the financial statements include provision to cover the exposure estimated by the Company's management and/or the managements of subsidiaries. In the opinion of the Company's management, based, inter alia, on legal opinions it received, the financial statements include adequate provision, where such provision is necessary, to cover the estimated exposure by the Company and/or subsidiaries.

Regarding motions to approve an action as a class action under Sections 47, 49. 53, 55, 56, 58 and 59 below, it is not possible at this early stage to estimate the chances that the applications will be approved as a class action and therefore no provision was included in the financial statements for these claims.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

A. Contingent Liabilities (Contd.)

In January 2008, an action was filed in the Tel Aviv District Court against the subsidiary Harel Insurance and 1. against four additional insurance companies (hereinafter together: "the Defendants") together with an application for its certification as a class action. The subject of the action is a claim that the respondents unlawfully collected "sub-annual factor payments" (a fee that insurance companies are allowed to collect when the amount of the annual premium is paid in several installments). The plaintiffs claim damages in the amount of NIS 1,683.54 for each year of insurance. The plaintiffs estimate that the total claim for the entire class that they wish to represent against all defendants is about NSI 2.3 billion, of which about NIS 307 million is against Harel Insurance. On February 1, 2010, the court approved a request for a procedural arrangement between the parties, whereby the plaintiff will strike out from the motion and the action the claim that Harel Insurance collected a sub-annual factor fee exceeding the rate permitted in policies that were issued before 1992 as well. As instructed by the court, the plaintiff submitted an amended claim and request for its certification as a class action. On December 29, 2013 the Commissioner submitted a position that supports the position of the Defendants that there is no impediment to collecting sub-annual policy factors, on the savings component of life insurance combined savings and other term policies, including long-term care, work disability and accidental disability. On July 19, 2016, the Tel Aviv District Court approved the claim as a class action in connection with the collection of a sub-annual factor on the premium component which is known as the policy factor and on the savings component in combined savings and life assurance policies, and in connection with the collection of a sub-annual policy factor in health, disability, critical illness, work disability and long-term care policies. In December 2016, an application was filed for permission to appeal the decision of Tel Aviv District Court. Following a decision of the Supreme Court from January 2017, the respondents responded to the motion for permission to appeal the decision to certify the action as a class action and it was heard by a panel of judges. In April 2017, the Supreme Court accepted the request for a stay of implementation that was filed by the Defendants and it determined that the hearing would be stayed until a decision has been made on the application for permission to appeal and on the appeal. On May 31, 2018, the Supreme Court accepted the motion for permission to appeal, heard it as an appeal and accepted it, reversing the ruling of the District Court and dismissing the motion for certification of the action as a class action. On June 26, 2018, a motion was served to Harel Insurance to hold a further hearing on the judgment that the plaintiffs filed in the Supreme Court. In its decision from July 2, 2019, the Supreme Court instructed that another hearing on the judgment should take place before a panel of seven judges. In November 2019, the Attorney General announced that he would appear at the proceeding in person and in February 2020 he submitted his position supporting the judgment and the trend it reflects for strengthening the weight that should be given to the regulator's professional position in the interpretation of his instructions and that in his view, there is no room to intervene in the decision made in the judgment which is the subject of the proceeding with respect to adopting the interpretive position of the Capital Market Authority. In July 2020, a further hearing on the ruling was head in the presence of a panel of seven judges and on July 4, 2021, a ruling was handed down in the additional hearing whereby the decision of the District Court, which determined that the motion for certification was accepted, it will remain unchanged and the case will be returned to the District Court for a hearing on the class action.

A. Contingent Liabilities (Contd.)

2. In April 2010, an action and application for its certification as a class action was filed in the Petach Tikva Central Region District Court against the subsidiary Harel Insurance and against four additional insurance companies (hereinafter together: "the Defendants"). The subject of the legal action is the allegation that in the event of a discontinuation of insurance in any month, after the insurance premium for that month was collected by the Defendants in advance, the defendants allegedly did not reimburse the insured the proportionate, surplus share of the premiums for that month, or alternatively they allegedly repaid the insurance premium in nominal values only. In the opinion of the applicants, the total damages to all members of the group, cumulatively claimed against all defendants, amount to NIS 225 million for a ten-year period (the plaintiffs did not attribute any specific amount to each of the Defendants separately). The amount of the plaintiffs' personal claim against Harel Insurance is NIS 80. In December 2011, the court instructed that the plaintiffs' allegations should be struck out in connection with Section 28.A of the Contracts (Insurance) Law and in connection with a policy of policyholders that has partially or temporarily expired. In November 2014, the Commissioner's opinion was submitted to the court, that the provisions of the policy are binding with respect to the manner of collecting the premium after the death of the insured or in the period following cancellation of the policy, and that the actuarial opinion submitted to the court by the Defendants is insufficient to confirm that the Defendants priced the policy in such a way as provides evidence that they took into account the fact that the premiums would not be returned to the insureds for the period after the death of the insured or after the policy cancellation. On June 23, 2015, the Lod-Center District Court partially certified litigation of the claim as a class action. The court certified the claim against Harel Insurance as a class action, but only with respect to the inclusion of interest and linkage differences at the time of restitution of premiums that were collected in the months after the month in which the insurance contract was cancelled or after the occurrence of the insured event. In September 2016, a compromise settlement was submitted for the court's approval. Accordingly, it was agreed, inter alia, that Harel Insurance will donate 60% of its total refund in relation to the first cause, as defined in the compromise settlement and as per report of the reviewer to be appointed to review the compromise settlement, and 80% of the total refund amount in respect of the second cause, as defined in the compromise settlement and as per the report of the reviewer to be appointed, as noted. Furthermore, the compromise settlement prescribes provisions with respect to future conduct in cases of the cancellation of policies which are the subject of the claim. Validity of the compromise settlement is contingent on the court's approval. In March 2017, the Attorney General submitted his position on the compromise settlement to the government. The opinion includes various comments including, among others, that a reviewer should be appointed to review the compromise settlement before it is approved and he asked to submit a supplementary position after the professional opinion of the reviewer has been received and examined. In June 2017, the court appointed a reviewer for the compromise settlement. In December 2019, the reviewer's opinion was submitted to the court in relation to Harel Insurance according to which the compromise settlement is appropriate, fair and reasonable, when taking into account the affairs of the class members. In December 2020, the Attorney General submitted a preliminary position on the reviewer's report which includes several comments, including, among others, comments on the individual compensation mechanism and the issue of locating insureds, as well as a request to submit his final position after the reviewer's reports have been received in relation to all the respondents in the proceeding. In August 2021, the Attorney General submitted an additional position regarding the reviewer's reports relating to the Defendants in which he reiterated his comments from the first position he had submitted in December 2020, and he made several additional comments. On May 16, 2022, the court instructed the Attorney General to submit his position with respect to application of the judgment on the groups that are excluded from the compromise settlement, and it instructed the plaintiffs to state what action they expect the courts to take. On May 26, 2022, the plaintiffs asked the court to hand down a judgment and approve the compromise settlement.

A. Contingent Liabilities (Contd.)

3. In May 2011, an action was filed in the Central Region District Court against the subsidiary Harel Insurance and three other insurance companies (hereinafter together: "the Defendants"), together with an application for certification as a class action. The subject of the action is an allegation that the Defendants allegedly unlawfully collect a payment called a "policy factor" and/or "other management fees" at a considerable rate of the premium paid without their consent or knowledge and without compliance with a condition that enables such collection in the policy instructions. The plaintiffs argue that according to instructions issued by the Commissioner, companies may charge a policy factor under certain conditions; however they also claim that in addition to the Commissioner's authorization, the Defendants must stipulate collection of the policy factor in a contractual agreement with the policyholder. According to the plaintiffs, the total loss claimed for all members of the group against all the Defendants is NIS 2,325 million, and against Harel Insurance, based on its share of the market, is NIS 386 million. On June 10, 2015, the parties filed an application in the court to approve a compromise settlement. The court appointed a reviewer for the compromise settlement. Under the proposed compromise settlement, the Defendants undertook to reimburse the class members with a total amount of one hundred million shekels for the collection of a policy factor in the past. Harel Insurance's share of this amount is NIS 14 million. Additionally, each of the Defendants undertook to reduce the future collection for the policy factor from these class members at a rate of 25% relative to the amount actually collected. The Defendants also agreed to bear the compensation to the class plaintiff and cover the cost of his lawyer's fees, by an amount to be decided upon by the court. In its decision from November 21, 2016, the court dismissed the compromise settlement and approved litigation of part of the claim as a class action on the grounds of a breach of the insurance policy on account of collection of the policy factor fee with no legal basis, in a manner that compromises the insured's accrued savings, starting from seven years prior to the date of filing the claim. The relief to be claimed as part of the class action will be to remedy the breach by way of revising the insured's accrued savings by the additional amount of savings that would have been accrued if the policy factor had not been collected or by compensating the insured by the aforesaid amount. In addition, from now on, the policy factor will no longer be collected. The class in whose name the class action is litigated comprises insureds of the Defendants who have combined life assurance and savings policies that were drawn up between 1992-2003, where the savings accrued by the insured were compromised due to the collection of the policy factor. In May 2017, the Defendants filed a motion in the Supreme Court for permission to appeal this decision, in which context the compromise settlement was dismissed and the motion to certify the claim as a class action was partially approved. In September 2018, the Attorney General's response was filed to the motion for permission to appeal, according to which his position is that the Central District Court was correct in its decision not to approve the compromise settlement and to partially approve the motion to certify the action as a class action. In February 2019, the motion for permission to appeal was struck out, after the Defendants accepted the Supreme Court's recommendation to withdraw the motion for permission to appeal, while maintaining all their arguments and rights. The parties are conducting a mediation process in parallel with litigation of the class action.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

- 4. In May 2013, an action was filed in the Tel Aviv District Court together with an application for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly refrains from paying insurance benefits to its policyholders together with linkage differences and interest, from the date of occurrence of the insured event up to the payment date of the insurance benefits. The total loss claimed for all members of the group amounts to sums varying from NIS 168 million to NIS 807 million. The mediation process conducted by the parties was unsuccessful and litigation of the action was returned to the court. On August 30, 2015, the Tel Aviv District Court partially accepted the motion for certification, such that conducting of the claim as a class action was approved with respect to the argument concerning non-payment of interest as required under Section 28(A) of the Insurance Contract Law ("the Law"), and the motion was dismissed insofar as it relates to the argument that Harel Insurance does not link the insurance benefits in accordance with the provisions of Section 28(A) of the Law. The plaintiffs estimate that the overall loss claimed for all members of the group in relation to the Company according to the amended statement of claim amounts to NIS 120 million. In October 2015, an application was filed for permission to appeal the decision to certify the application as a class action. In accordance with the court's recommendation, in August 2016 the Defendants withdrew the application for permission to appeal. On February 28, 2021, a partial ruling was given on the action (the "Partial Ruling") adopting the ruling in the certification decision according to which the class action was accepted. According to the Partial Ruling, the group is defined as any eligible person (insured, beneficiary or third party) who in the period commencing three years prior to filing the action and its termination on the day of giving the Partial Ruling, received from Harel Insurance, not in accordance with a ruling on his affairs, insurance compensation without the inclusion of interest by law. Furthermore, the court stipulated that for the purpose of exercising the ruling, an expert will be appointed to determine the method of refunding the group members and calculating the amount of the refund, and it also determined that expenses will be paid to the representative plaintiffs and legal costs to their attorneys. In May 2021, Harel Insurance filed an appeal on the partial ruling in the Supreme Court. In June 2021, the Supreme Court accepted the Defendants' motion to stay implementation of the partial ruling in the sense that the proceeding to appoint an expert for implementation of the partial ruling will be delayed until a decision is made on the appeal proceeding.
- In April 2014, an action was filed in the Tel Aviv District Court, together with an application for its certification 5. as a class action, against the subsidiary Dikla Insurance Agency Ltd. (in its previous name Dikla Insurance Company Ltd. ("Dikla")). The subject of the action is the allegation that Dikla ostensibly pays insurance benefits to insureds in the group health insurance policy "Mushlam for Pensioners" run for pensioners of Clalit Health Services and their families ("the Policy") based on the index known at the beginning of the month, and not according to the index known on the date of payment, in contravention of the provisions of the law ("primary cause"), and that Dikla has allegedly increased the premiums for insureds in the policy without any foundation and ostensibly in contravention of the provisions of the Policy and the law ("secondary cause"). The total loss claimed for all members of the group amounts to NIS 21.5 million (NIS 19 million for the primary cause and NIS 2.5 million for the secondary cause). In May 2021, the parties filed a motion in the court to approve a compromise settlement in which it was agreed that members of the class, as they are defined in the compromise settlement, will be paid index differences for health insurance benefits that were calculated in the relevant period based on the known index at the beginning of the month and not according to the known index on the date of payment. Validity of the compromise settlement is contingent on the court's approval. To the extent that the compromise settlement is approved, a benefit will be paid to the class plaintiff and legal fees to its attorney, of insignificant amounts. In November 2021, the Attorney General submitted his position on the compromise settlement, according to which he does not oppose the compromise settlement, but he made comments on several matters, including, among others, that the appointment of a reviewer to examine the compromise settlement prior to its approval should be considered.

- 6. In April 2014, an action was filed in the Tel Aviv District Court, together with an application for its certification as a class action, against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance pays the holders of Hiyunit profit-sharing policies for work disability and long-term care insurance ("the Policy") monthly compensation (which consists of monthly compensation and the outstanding bonus), which is ostensibly calculated in contravention of the Policy provisions, and that Harel Insurance, allegedly, does not pay the policyholders the bonus they have accrued up to the date of payment of the first monthly compensation according to the Policy. The total loss claimed for all members of the Group that the plaintiff wishes to represent amounts to NIS 381 million. In March 2019, the Tel Aviv District Court certified litigation of the claim as a class action ("the Decision"). The class in whose name the class action is to be litigated is all insureds in profit-sharing life-assurance policies managed by Harel Insurance, in which the insurance benefits are paid based on an Rm formula. On July 17, 2019, Harel Insurance filed an application in the Supreme Court for permission to appeal the decision. On July 22, 2019, Harel Insurance was served with an appeal in the Supreme Court which was filed by the plaintiff in the motion for certification, on that part of the decision in which the District Court ruled not to certify litigation of the claim as a class action on the grounds of deception and that the definition of the class in the class action did not also include past insureds, including beneficiaries and heirs of insureds in the insurance policies in respect of which the claim had been certified as a class action. At the hearing, which took place in the Supreme Court on September 13, 2021, it was agreed that the group for which the class action was approved would be reduced and it was stipulated that it also includes past insureds and that the prescription period in respect of the insurance benefits is 3 years. Subject to this, with the consent of the parties, the motion for permission to appeal and the appeal were dismissed.
- 7. In June 2014, an action was filed in the Tel Aviv District Court, together with an application for its certification as a class action, against the subsidiary Dikla Insurance Agency Ltd. (in its previous name Dikla Insurance Company Ltd. ("Dikla")) The subject of the action is the argument that under the provisions of the group longterm care insurance policy for members of Clalit Health Services Supplementary Long-term Care Plus ("the Policy"), Dikla fails to pay insureds who require long-term care insurance benefits for the days in which they were hospitalized in a general or rehabilitation hospital, and that these days are not included in the number of days for calculating the waiting period determined in the policy, and this ostensibly in contravention of the Commissioner' instructions and the provisions of the law. The plaintiff estimates the total loss claimed for all members of the Group that it wishes to represent at NIS 35 million. The court passed the motion to accept the Commissioner's position regarding the disputes that are the subject of the motion for certification of the action as a class action. In January 2016, the Commissioner's position was submitted which stated that the policy definition of the insured event does not violate the instructions of the Capital Market, Insurance and Savings Authority and that the policy which is the subject of the claim was approved separately by the Capital Market, Insurance and Savings Authority. In December 2018, the court dismissed the motion to certify the claim as a class action on the grounds that non-payment of the insurance benefits in respect of the hospitalization period is contrary to the Commissioner's instructions, but it approved the conducting of the action as a class action on the grounds of a breach of an insurance circular on the subject of fair disclosure to insureds when they are enrolled in a health insurance policy. The class in whose name the class action is to be conducted is all Dikla policyholders who purchased long-term care insurance after October 1, 2001, who were entitled to claim insurance benefits in the period between May 29, 2011 and May 29, 2014, and where the proper disclosure form attached to the purchased policy does not mention or refer to the section that states that the date of occurrence of the insured event is the date on which the insured first becomes eligible, or the date on which the insured was discharged from a general or rehabilitation hospital, whichever is later. In May 2019, Dikla filed a motion in the Supreme Court for permission to appeal the decision. In June 2019, the plaintiff in the motion for certification filed an appeal in the Supreme Court against the District Court's ruling not to certify litigation of the claim as a class action according to which non-payment of the insurance benefits for the hospitalization period contravenes the Commissioner's instructions and also that, as argued by the plaintiff, the court did not rule on the additional argument of breach of contract. At the hearing, which took place in the Supreme Court on May 10, 2021, the motion for permission to appeal and the appeal were dismissed, after the parties accepted the Supreme Court's recommendation to withdraw them, while preserving all their arguments. In January 2022, the parties informed the court of their agreement to enter into a mediation process. The parties are conducting a mediation process.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

- 8. In July 2014, a motion for certification of a claim as a class action was filed in the Lod-Center District Court against the subsidiary Harel Pension & Provident and against four other pension fund management companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants raise the management fees paid by pension fund members from the cumulative savings (accrued balance) to the maximum rate permitted by law on the date on which the members become pensioners, receive their old-age pension and they are no longer able to move their pension savings. In this way, the Defendants ostensibly apply the contractual right to which they are entitled under the provisions of the pension fund articles, in an unacceptable manner, in bad faith and contrary to the provisions of the law. According to the plaintiffs, the total loss claimed for all members of the group that the plaintiffs wish to represent, amounts to NIS 48 million against all the Defendants. The court passed the application to the Commissioner for his opinion on the questions arising from the motion for certification. In September 2017, the Commissioner's position was submitted supporting the Defendants' position whereby the rate of the management fees collected from members during the savings period is not equal to the rate of the management fees collected from postretirement annuity recipients, given that they relate to two different periods and have different characteristics. The post-retirement management fees are reset at the time of retirement and unrelated to the rate prior to retirement. This is therefore not considered an increase in the management fees but rather setting the rate of the management fees for the period of retirement. The "Management Fees Circular" which relates to the management companies' obligation to notify their members does not apply to the setting of management fees for pensioners; and the obligation to give notice of a change in the management fees by virtue of the circular does not apply to the management companies with respect to annuity recipients. The mediation process conducted by the parties was unsuccessful and the hearing on the action was returned to the court. On March 18, 2022, the Lod-Center District Court certified litigation of the claim as a class action. The class in whose name the class action is to be litigated is anyone who is a member of a comprehensive pension fund which is listed as one of the Defendants, and who is eligible to receive an old-age pension and/or may in future be eligible to receive an old-age pension.
- 9. In August 2015, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action, against the subsidiary Dikla Insurance Agency Ltd. (in its previous name Dikla Insurance Company Ltd. ("Dikla")). The subject of the action is the claim that when settling claims in long-term care, Dikla ostensibly separates the activities of daily living for different parts of the body for the purpose of investigating whether the insured event has occurred, by performing a literal, quantitative review of the insured's ability to perform each of the ADLs. This in a manner that renders the content of the Commissioner's meaningless, whereby their assessment is purely quantitative and contrary to the Commissioner's position on this matter from January 2015. The personal loss claimed by the plaintiff is estimated at NIS 59,000 and the overall loss claimed for all members of the class that the plaintiff wishes to represent amounts, in the plaintiff's opinion, to NIS 75.6 million. In its ruling dated January 21, 2021, the Tel Aviv District Court ordered the motion for certification as a class action to be struck out. In March 2021, an appeal on the ruling was served to Dikla, which was filed in the Supreme Court by the plaintiff in the motion for certification.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

- 10. In September 2015, an action was filed in the Lod-Center District Court together with a motion for its certification as a class action against the subsidiaries Harel Insurance and Dikla Insurance Agency Ltd. (in its previous name Dikla Insurance Company Ltd. ("Dikla")) and against three other insurance companies (henceforth together: "the Defendants"). The subject of the action is the allegation that the Defendants allegedly adopted an interpretive approach whereby in order to recognize an insured in the investigation of a claim for long-term care as one who suffers from incontinence, this condition must be the outcome of a urological or gastroenterological illness or ailment only. This, ostensibly, in contravention of the provisions of the insurance policy. The plaintiffs have not quantified the loss claimed for all members of the group they wish to represent, but they estimate it to be hundreds of millions of shekels. The mediation proves conducted by the parties was unsuccessful and the hearing on the action was returned for litigation in the court. In April 2020, the Central District Court approved litigation of the claim as a class action against Harel Insurance, Dikla and against two other insurance companies, on the grounds of breach of the long-term care insurance contract that led to non-payment or underpayment of the long-term care benefits, due to non-recognition of the insureds as being eligible to points for incontinence ("control of bowel and bladder functions"). The group in whose name the class action is being conducted is anyone who had long-term care insurance that was sold by one of the Defendants against whom conducting the action as a class action was approved, and who suffered from the loss of ability to independently control bowel or bladder functions as a result of a combination of impaired control of these functions that has not developed to organic loss of control with deteriorated functional condition, and nevertheless did not receive from the Defendants against whom conducting the claim as a class action was approved (as applicable) points for incontinence in the framework of the assessment of his claim to receive long-term care benefits, in a manner that led to an infringement of his rights to insurance compensation in the period between September 8, 2012 and the date of approval of the action as a class action. The parties are conducting a mediation process.
- 11. In September 2015, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action, against the subsidiary Harel Pension & Provident and against four other companies ("hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants were ostensibly in breach of their fiduciary duties towards the members of the provident funds they manage by paying commissions to the insurance agents at a rate derived from the management fees they collect from the members, thereby compensating the agents by an amount that increases in line with the increase in the management fees. Their argument is that the Defendants ostensibly practiced unjust enrichment by creating a mechanism aimed at increasing the management fees in favor of the agents and management companies. The plaintiffs estimate the loss for all members of the group they wish to represent in the amount of NIS 300 million per annum since 2008 and in total by approximately NIS 2 billion.
- 12. In February 2016, an action and application for its certification as a class action was filed in the Lod-Center District Court against the subsidiary Harel Pension & Provident and against four other management companies ("hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants begin to collect management fees at the maximum rate permitted by law from the recipients of disability and survivors allowances when they begin to receive the allowances so that they are no longer able to move their money to another pension fund, without giving them advance notice. This ostensibly in breach of the applicable voluntary disclosure obligation, in breach of statutory duties and duties of trust, agency and caution, taking unfair advantage through mala fides in a contractual right, practicing unjust enrichment and behavior as a cartel. The plaintiff has not quantified the total loss claimed for all members of the group that it wishes to represent, although her initial estimate is about a billion shekels against all the Defendants. In January 2018, the court ordered the transfer of the hearing to the Regional Labor Court.

- 13. In August 2016, an action was filed in the Lod-Center District Court, together with a motion for its certification as a class action, against the subsidiary Harel Pension & Provident. The subject of the action is the allegation that in addition to management fees, Harel Pension & Provident ostensibly collects payment from its members for a component relating to investment management expenses (a component of direct expenses for performing transactions), which is permissible by law, although in this case Harel neglected to include provision in the contract allowing it do so. The plaintiff argues that Harel Pension is therefore in breach of the provisions of the pension fund articles and the onerous fiduciary obligations and duty of disclosure that apply to it, it negotiates in bad faith and gives its customers a misleading description. The plaintiff estimates the total loss claimed for all members of the group that it wishes to represent amounts to approximately NIS 132 million. In April 2017, the court ordered the transfer of the hearing of the motion to the Tel Aviv District Labor Court. In February 2018, the court instructed the Commissioner to submit his position in relation to the proceeding. In June 2018, the position of the Capital Market Authority was submitted supporting the position of Harel Pension & Provident. In September 2020, the court instructed a stay of proceedings in the case until a ruling is given on the motion for permission to appeal in the matter of direct expenses in Migvan Personal Investments savings policies, in which context the district court approved litigation of the action as a class action against Harel Insurance.
- 14. In September 2016, an action was filed in the Lod-Center District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly collects payment from the holders of the Harel savings policy "Harel Migvan Personal Investments" for a component relating to investment management expenses which may be collected by law, but without contractual agreement in the policy conditions allowing it to collect this component. According to the plaintiff, Harel Insurance is therefore fundamentally in breach of the policy provisions, in breach of the fiduciary obligation applicable to it and misleads its policyholders. The plaintiff estimates the overall loss caused to all members of the group it seeks to represent in the amount of NIS 27.8 million. In May 2019, the Tel Aviv District Court approved litigation of the claim as a class action on the grounds of a breach of the insurance policy due to the unlawful collection of investment management expenses. The class in whose name the class action is to be litigated is all holders of the Migvan Personal Investment policy of Harel Insurance at the present time and in the seven years preceding the date of filing the motion. In September 2019, Harel Insurance filed a motion for permission to appeal the decision in the Supreme Court. In November 2019, the Supreme Court ruled that a response must be submitted to the motion for permission to appeal and it instructed the Attorney General to submit his position on the motion in writing. In August 2020, the Attorney General announced that he would appear at the motion for permission to appeal and he submitted his position on the motion for permission to appeal to the effect that the plaintiffs should be granted permission to appeal, the motion for permission to appeal and the actual appeal should be accepted, the decision approving litigation of the claim as a class action should be nullified and the motion for certification should be dismissed. In June 2021, notice was filed on behalf of the Attorney General, in which an update was provided whereby on June 28, 2021, a draft report on the subject of a review of the direct expenses prepared by the advisory committee to the Commissioner of the Capital Market was published for public comment. In this notice, the Attorney General made it clear that in his opinion, the contents of the report will not have any repercussions on the decision in the legal proceeding nor will they change his legal position, and he asked to submit a statement setting out his position with respect to the contents of the report. In July 2021, the Supreme Court accepted the Attorney General's request. On January 2, 2022, the Attorney General submitted his comments as to the repercussions of the report on the legal proceeding, according to which the information in the report will not change his position as submitted in the proceeding, whereby the motion to appeal and the actual appeal should be accepted, and the motions to certify litigation of the actions as class actions should be denied; the information in the report will not influence the judicial decision in the proceeding; nor does it in any way contradict his position as submitted in the proceeding and the information therein even reinforces his position from certain perspectives.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

- 15. In October 2016, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that until the annual report for 2015, Harel Insurance ostensibly neglected to disclose to its policyholders, who purchased long-term care insurance with a variable premium, what premium they will be charged from the age of 65, despite the fact that, according to the plaintiff, the premium on this policy increases by hundreds of percent at the age of 65. The plaintiff argues that Harel Insurance is therefore in breach of a statutory obligation and in breach of the obligation to provide disclosure, in breach of agreement, acts in bad faith, practices unjust enrichment and acts negligently. The plaintiff further argues that charging insureds for future premiums based on tariffs that are unknown to them is a discriminatory condition in a standard contract. The plaintiff has not quantified the total loss claimed for all members of the group that she wishes to represent against Harel Insurance, although she estimates it to be millions of shekels. In July 2017, the court approved the plaintiff's application to amend the motion for certification so that it also addresses the claim whereby Harel Insurance ostensibly neglected to present to its policyholders before the date of enrolment in the policy, the premium they would pay from the age of 65, despite the fact that it is obligated to do so according to the Commissioner's circular. In August 2017, an amended motion was filed for certification of the action as a class action. The subject of the amended motion is the allegation that Harel Insurance ostensibly neglected to present to its policyholders who have long-term care insurance with a variable premium, in the enrolment form and/or in the general conditions of the policy, the premium they would pay from the age of 65 onwards, before they enrolled in the insurance. In March 2019, the court ordered the transfer of the application for obtaining the Commissioner's position with respect to the dispute which is the object of the motion for certification. In November 2019, the Commissioner's position was received according to which the provisions of Circular 2001/9 "Fair Disclosure for Insureds Enrolling in Health Insurance Policies" ("the Circular") issued by the Authority as well as the statutory provisions, obligate insurers to inform candidates for insurance at the time of purchasing the insurance of the way in which premiums may change, but the text of the Circular does not address the question of how this obligation must be fulfilled prior to enrollment and whether the obligation must be fulfilled in writing. The mediation process conducted by the parties was unsuccessful and the hearing of the action returned to the court.
- 16. In October 2016, an action was filed in the Jerusalem District Labor Court together with a motion for its certification as a class action against the second-tier subsidiary Tzva Hakeva. The subject of the action is the allegation that Tzva Hakeva ostensibly collects investment management expenses from fund members which is permissible by law, but without contractual agreement in the policy conditions allowing it to collect these expenses. The plaintiff argues that Tzva Hakeva therefore acts in contravention of the provisions of law and the special fiduciary obligation that applies to it. The plaintiff estimates the overall loss claimed for all members of the group it wishes to represent at NIS 30.1 million. In January 2018, it was decided to consolidate the hearing together with additional motions to certify pending class actions on the subject of direct expenses in provident funds and education funds. In February 2018, the court ruled that the Commissioner's opinion on the proceeding should be obtained. In May 2018, the Commissioner's opinion was submitted supporting the position of the Defendants in which financial institutions are permitted to collect direct expenses from the members or insureds, even if this is not explicitly mentioned in the institution's articles, and provided that this is done in accordance with the Supervision of Financial Services (Provident Funds) (Direct Expenses for Performing Transactions) Regulations, 2008 ("the Regulations"). In his position, the Commissioner noted that it is also relevant, with the necessary changes, for insurance companies that manage yield-dependent insurance.

- 17. In January 2017, an action was filed in the Lod-Center District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance does not disclose (itself or through its insurance agents) to its motor insurance insureds, who are on the verge of crossing an age or driving seniority bracket in the policy period that they are able to update the driver's age or driving seniority and receive a premium refund, and that as a result these insureds overpay the premium due to not having updated the premium in the policy period as a result of changing the age or seniority bracket. The plaintiffs estimate the loss caused to members of the class they wish to represent in the amount of at least NIS 12.25 million. On February 16, 2022, a judgment was handed down by the Central District Court in which a class action which had been filed against another insurance company on a similar matter ("the Corresponding Claim") was dismissed. In March 2022, the District Court ordered a stay of proceedings until a ruling is given on an appeal to be filed in the Corresponding Claim.
- 18. In March 2017, an action was filed in the Jerusalem District Labor Court, together with a motion for its certification as a class action, against the subsidiary Harel Pension & Provident. The subject of the action is the allegation that until the end of 2015, Harel Pension & Provident ostensibly collected from the members of Harel Otzma Taoz Provident Fund investment management expenses, which is permissible by law, but without contractual agreement in the provident fund articles allowing such expenses to be collected. The plaintiff estimates the loss caused to all members of the group it wishes to represent at NIS 127.1 million. In January 2018, it was decided to consolidate the hearing with additional motions to certify pending class actions on the subject of direct expenses in provident funds and education funds. In February 2018, the court ruled that the Commissioner's opinion on the proceeding should be obtained. In May 2018, the Commissioner's opinion was submitted supporting the position of the Defendants in which financial institutions are permitted to collect direct expenses from the members or insureds, even if this is not explicitly mentioned in the institution's articles, and provided that this is done in accordance with the Supervision of Financial Services (Provident Funds) (Direct Expenses for Performing Transactions) Regulations, 2008 ("the Regulations"). In his position, the Commissioner noted that it is also relevant, with the necessary changes, for insurance companies that manage yield-dependent insurance.
- 19. In December 2017, an action was filed in the Jerusalem District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance, against two other insurance companies, against Clalit Health Services ("Clalit") and against Maccabi Healthcare Services ("Maccabi") (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants ostensibly refuse to provide long-term care insurance for people on the autism spectrum or they set out unreasonable conditions for accepting them to the insurance, without their decisions being based on any statistical actuarial or medical data that is relevant to the insured risk and without providing a reason for their decision, as required by law. The plaintiffs have not quantified the loss claimed for all members of the group they wish to represent, however they estimate it to be tens or hundreds of millions of shekels. In June 2019, the court ordered the application to be submitted for obtaining the position of the Attorney General on questions arising from the motion for certification. In January 2020, the Attorney General announced that his position was the same as the position he had submitted in a parallel case and which supports the arguments of Harel Insurance.

- 20. In January 2018, an action was filed in the Lod-Center District Court against the subsidiary Harel Insurance and against five other insurance companies (hereinafter together: "the Defendants"), together with an application for its certification as a class action. The subject of the action is the allegation that the Defendants ostensibly unlawfully refrain unlawfully from paying insurance benefits to insureds, to third parties and beneficiaries for the VAT component that applies to the cost of damages in those instances where the damage was not actually repaired. The grounds of the action and motion for certification are the same as those for which a previous action and motion for its certification were filed against the Defendants. On January 3, 2018 the Supreme Court dismissed an appeal on a ruling of the Central-Lod District Court dated February 20, 2017, in which the motion was struck out. On January 4, 2022, the Lod-Center District Court denied the motion for certification of the action as a class action. On April 11, 2022, the plaintiff filed an appeal in the Supreme Court against the decision of the District Court.
- 21. In April 2018 an action was filed in the Lod-Center District Court, together with an application for its certification as a class action, against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly pays insureds who have policies for surgery that do not provide compensation at a rate of half the expenses saved if the surgery is performed by the HMOs, but they receive an undertaking for payment of this compensation for amounts that are actually less than half of the expenses subsequently saved by the company, and it is therefore ostensibly in breach of its undertaking towards them. The plaintiff estimates the total loss claimed by all members of the class it wishes to represent to be more than NIS 7 million. The parties are conducting a mediation process.
- 22. In June 2018, a claim was filed in the Jerusalem District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance and against another insurance company (hereinafter together: "the Defendants'). The subject of the action is the allegation that the Defendants refuse to recognize surgery performed for which there is a medical need as an insured event under the conditions of their health insurance policies, on the grounds that it is preventive surgery. The plaintiff has not estimated the total loss claimed by all members of the class that he wishes to represent. In September 2020, the court instructed that the Commissioner's position on the issues arising from the motion for certification should be accepted. In February 2021, the Commissioner's position was accepted that based on the proper and appropriate interpretation of the definition of the term "surgery" according to Insurance Circular 2004/20 concerning the definition of medical procedures in health insurance ("the Surgery Circular"), which was issued by the Commissioner of Insurance, a private health insurance policy provides the insured with a safety net against the illnesses listed in the policy, which also includes cover for surgery which will prevent these illnesses from developing or occurring. In January 2022, the Jerusalem District Court certified litigation of the action as a class action. The group in whose name the class action is to be conducted is any person who entered into a health insurance contract with the Defendants, which includes insurance cover for surgery, and whose claim for performing surgery was dismissed on the grounds that the surgery is preventive and is not covered in the policy (even if the reason was presented differently in the letter of dismissal). On May 24, 2022, the subsidiary Harel Insurance filed a motion for permission to appeal the decision in the Supreme Court.
- 23. In December 2018, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action against the subsidiary Harel Insurance, against two other insurance companies (hereinafter together "the Defendant Insurance Companies") and against four banks (hereinafter together "the Defendant Banks"). The subject of the action is the allegation that the Defendant Insurance Companies ostensibly issue structural insurance policies to the owners of buildings that are pledged for the purpose of a mortgage guarantee, despite the fact that when the policies are issued a policy guaranteeing the same building with respect to the same period already exists, whether through the same insurance company or through another insurance company. This, ostensibly, in breach of the explicit statutory provisions while misleading the insureds. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent to be a nominal amount of NIS 280 million.

- 24. In February 2019, an action was filed in the Lod-Center District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance asked insureds in a group policy for the employees of Israel Electric, who received insurance benefits from which tax was not withheld at source, to return the amounts it had paid for these tax payments. The plaintiff does not quantify the total loss caused to all members of the class it seeks to represent but it estimates the loss at more than NIS 3 million. In July 2020, Harel Insurance filed a motion for summary abandonment of the motion for certification of the claim as a class action. In September 2020, the court accepted the motion filed by Harel Insurance for summary abandonment of the motion for certification of the that the motion for certification should be summarily dismissed. On November 8, 2020, Harel Insurance was served with an appeal on the judgment which the plaintiff filed in the Supreme Court. Following a hearing that was held before the Supreme Court in February 2022, the court instructed the Attorney General to submit his position on a subject of principle arising from the appeal.
- 25. In June 2019, an action was filed in the Tel Aviv Labor Court, together with an application for its certification as a class action, against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly collects payment from insureds in life assurance policies that include insurance in the event of death and a savings component (managers insurance), for a component relating to "investment management expenses", the collection of which is permissible by law, but without contractual agreement in the policy conditions allowing it to collect this component. The plaintiff estimates the overall loss caused to all members of the class it seeks to represent in the amount of NIS 365.3 million.
- 26. In June 2019, an action was filed in the Tel Aviv-Jaffa District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against three other insurance companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants ostensibly refrain from paying interest on insurance benefits to their insureds, from 30 days after the claim is filed. This action and motion address the same grounds as those in a previous action and motion for certification as a class action ("the First Claim") which was partially certified as a class action on August 30, 2015 ("the Certification Decision") by the Tel Aviv District Court and is currently being heard in its own right (see Section (A) (6) above), but they refer to a different period from the one for which the First Claim was certified and it was filed by the plaintiffs for reasons of caution and in parallel with their request to broaden the group represented in the First Claim also to the period from the issuing of the Certification Decision until the judgment is actually given. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against Harel Insurance at about NIS 90 million, and against all the Defendants in the amount of NIS 264.4 million. In July 2020, the Tel Aviv District Court ordered a stay of proceedings until a verdict is issued on the first claim.
- 27. In July 2019, an action was filed in the Jerusalem District Labor Court, together with an application for its certification as a class action, against the subsidiary Harel Pension & Provident. The subject of the action is the allegation that in addition to management fees, Harel Pension & Provident ostensibly collects payment from the members of Harel Education Fund for a component relating to investment management expenses, which is permissible by law, but is not supported in the agreement in the education fund articles. The plaintiff estimates the overall loss caused to all members of the class it seeks to represent in the amount of NIS 56.8 million.
- 28. In August 2019, an action was filed in the Lod-Center District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against two other insurance companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that in property insurance policies for mechanical engineering equipment ("the Equipment"), the Defendants ostensibly determine the value of the Equipment for the purpose of calculating the insurance premium without considering the age of the Equipment, whereas in cases of total loss they ostensibly determine the amount of the insurance compensation according to the real value of the Equipment on the date of occurrence of the insured event, taking into account the age of the Equipment. The applicants do not quantify the overall loss claimed for all members of the class they wish to represent, but they estimate it to be millions of shekels.

- 29. In October 2019, an action was filed in the Jerusalem Magistrates Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly rejects travel insurance claims relating to the cancellation or curtailing of overseas travel due to the death or hospitalization of a close relative, based on exclusions in the policy that allegedly do not comply with the provisions of the Contracts (Insurance) Law, 1981 and are not included in the policy schedule that Harel Insurance sends to insureds. The applicant estimates the overall loss caused to all members of the class it wishes to represent at about NIS 1.5 million.
- 30. In December 2019, an action was filed in the Tel Aviv District Court together with a motion for its certification as a class action against the consolidated subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly only disclosed to its policyholders who purchased Magen 1 life assurance policies with a variable premium and/or Harel LeAtid work disability policies, at the time of the purchase, the premium to be paid for a few years and not for the entire policy period. The plaintiff does not quantify the total loss caused to all members of the class it wishes to represent but he estimates the loss at hundreds of millions of shekels. In October 2020, the parties informed the court of their agreement to enter into a mediation process. The mediation process conducted by the parties was unsuccessful and the hearing of the action was returned to the court. In September 2021, the court submitted the motion to the Commissioner to obtain his position in relation to the disputes which are subject of the motion for certification of the action as a class action. In April 2022, the Commissioner's position was submitted stipulating that an obligation applies to the insurance companies to disclose the information concerning the premiums to be paid by the insured throughout the policy period. The parties renewed the mediation process.
- 31. In January 2020, an action was filed in the Beersheba District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against Kranot Hashotrim Be'Israel Ltd. (Israel Police funds). The subject of the action is the allegation that Harel Insurance ostensibly failed to provide a cop y of the insurance policy for its insureds who hold group life assurance and that it ostensibly neglected to disclose to them changes that were made in the policy regarding renewal of the policy. The plaintiffs did not quantify the financial loss alleged for all members of the classes they wish to represent, but they estimate the overall non-financial loss for all the class members at NIS 400 million. In December 2020, the motion for certification with respect to Israel Police Funds was dismissed outright and the action and the motion are now being litigated exclusively against Harel Insurance. In September 2021, the court sent the motion to the Commissioner to obtain his position on questions arising from the motion for certification. In January 2022, the Commissioner's position was submitted supporting the position of the Defendants to the effect that insofar as the Israel Police Funds transferred the policies and the policy schedule by electronic mail and by regular mail, as chosen by the insured and as arises from the pleadings, then the Israel Police Funds and Harel Insurance have in fact complied with the Authority's requirements regarding the method of informing the insureds of the entering into force of a new insurance policy.
- 32. In January 2020, an action was filed in the Central District Court, together with application motion for its certification as a class action, against the subsidiary Harel Insurance and against two other insurance companies and a roadside assistance / breakdown service company (hereinafter together: "the Defendants"). The action alleges that the Defendants ostensibly provide their customers with substitute windshields that are not original and are not standard certified, and this ostensibly in contravention of their undertakings towards their customers in the agreements with them. The plaintiffs do not quantify the overall loss claimed for all members of the classes they wish to represent, but they estimate that it is substantially more than NIS 2.5 million.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

- 33. In April 2020, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against twelve other insurance companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants must refund to holders of their motor insurance and homeowners insurance policies part of the premiums which they ostensibly overpaid, in view of the alleged significant reduction of the risk that the Defendants undertook when they determined the premiums in these policies. This following the outbreak of the COVID-19 pandemic and the restrictions on movement and activity that were imposed as a result of the virus and which allegedly led to a much lower volume of traffic and travel and subsequently a significant decrease in bodily injury and damage to property. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against Harel Insurance in the amount of NIS 95 million, and against all the Defendants in the amount of NIS 886 million. In February 2021, the court ordered dismissal of the motion concerning the motor insurance with respect to Harel Insurance and the other respondents (except for one insurance company) and that the motion will continue to be heard on the homeowners insurance policies. The court instructed that the plaintiffs should consider their next steps regarding the method of litigating the motion for certification, in view of the decision. In April 2021, the plaintiffs filed an appeal in the Supreme Court against the decision of the District Court. In October 2021, the Tel Aviv District Court ordered a stay of proceedings in the proceeding being heard by the court and this until after the ruling on the proceeding regarding a refund of premiums to insureds in policies for insuring business premises, employers liability insurance and third-party insurance on account of an alleged reduction of the risk to which the Defendants are exposed following the outbreak of COVID-19 and the restrictions on economic activity, in which context the Haifa District Court dismissed the motion to certify the action as a class action against Harel Insurance and other insurance companies, becomes absolute or insofar as an appeal is filed on the ruling in the Supreme Court - until a ruling is given on the appeal. In December 2021, the District Court ordered the stay of proceedings to be lifted, after the judgement in the additional proceeding had become absolute.
- 34. In April 2020, an action was filed in the Haifa District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against eleven other insurance companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants do not refund the holders of their compulsory motor, comprehensive and third-party insurance policies for premiums that were ostensibly overpaid by the policyholders in view of the seeming substantial reduction of the risk level to which the Defendants are exposed from March 2020 in view of the contraction of economic activity due to the outbreak of the COVID-19 pandemic and subsequent reduced volume of traffic. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against Harel Insurance in the amount of NIS 130 million, and against all the Defendants in the amount of NIS 1.2 billion. In June 2020, the court instructed that hearing of the motion should be transferred to the Tel Aviv District Court. In October 2021, the Tel Aviv District Court ordered a stay of proceedings in the proceeding before it and this until after the ruling on the proceeding regarding a refund of premiums to insureds in policies for insuring business premises, employers liability insurance and third-party insurance on account of an alleged reduction of the risk to which the Defendants are exposed following the outbreak of COVID-19 and the restrictions on economic activity, in which context the Haifa District Court denied the motion to certify the action as a class action against Harel Insurance and other insurance companies, becomes absolute or insofar as an appeal is filed on the ruling in the Supreme Court - until a ruling is given on the appeal. In December 2021, the District Court ordered the stay of proceedings to be lifted, after the judgement in the additional proceeding had become absolute.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

- 35. In April 2020, an action was filed in the Central District Court, together with a motion for its certification as a class action against the subsidiary Harel Insurance, against six other insurance companies and against the company that manages the pool for compulsory motor insurance ("the Pool) (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants do not refund the holders of their compulsory motor, comprehensive and third-party insurance policies for premiums that were ostensibly overpaid by the policyholders in view of the seeming drastic reduction of the risk level to which the Defendants are exposed in view of the dramatic decrease in the number of claims submitted to the Defendants due to the contraction of economic activity as a result of the outbreak of the COVID-19 pandemic and alleged subsequent reduction in the volume of traffic on the roads and percentage of road accidents in Israel. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against Harel Insurance in the amount of NIS 110 million, and against all the Defendants in the amount of NIS 720 million. In June 2020, the court instructed that the hearing should be transferred to the Tel Aviv District Court. In October 2021, the Tel Aviv District Court ordered a stay of proceedings in the proceeding being heard by the court and this until after the ruling on the proceeding regarding a refund of premiums to insureds in policies for insuring business premises, employers liability insurance and third-party insurance on account of an alleged reduction of the risk to which the Defendants are exposed following the outbreak of COVID-19 and the restrictions on economic activity, in which context the Haifa District Court dismissed the motion to certify the action as a class action against Harel Insurance and other insurance companies, becomes absolute or insofar as an appeal is filed on the ruling in the Supreme Court - until a ruling is given on the appeal. In December 2021, the District Court ordered the stay of proceedings to be lifted, after the judgement in the additional proceeding had become absolute.
- 36. In May 2020, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action against the subsidiary Harel Pension & Provident and against thirteen other management companies ("the Defendants"). The subject of the action is the allegation that the Defendants ostensibly classify part of the provisions for their customers to the education funds that they manage as taxable provisions, despite the fact that they are not considered as such. The plaintiffs have not quantified the loss claimed for all members of the class they wish to represent, but they estimate it, on the low side, in the amount of hundreds of millions of shekels. In April 2021, a motion was filed for permission to file a third-party notice against the Tax Authority. In August 2021, the Tax Authority responded to the motion and argued, inter alia, that according its position, the motion for certification should have been filed in an appropriate proceeding against the Tax Authority and not against the defendants and that there is no place to approve the motion in the manner in which it was filed. Furthermore, the court asked to instruct that the Tax Authority should be included as a respondent to the proceeding and to instruct it to submit its position on the arguments set out in the motion for certification. In February 2022, the court instructed that the Tax Authority should be included as a respondent in the proceeding.
- 37. In June 2020, an action was filed in the Central Region District Court together with a motion for its certification as a class action against the subsidiaries Harel Insurance and Harel Pension & Provident (hereinafter together "the Defendants"). The subject of the action is the allegation that as part of loan agreements between the Defendants and their customers, in loans that are linked to the Consumer Price Index ("the CPI"), it was allegedly determined that if the CPI decreases, principal and interest payments will not fall below their value as specified in the loan repayment schedule. This, ostensibly, in contravention of the law and which constitutes, as argued by the plaintiff, a discriminatory condition in a standard contract. The plaintiff does not quantify the total loss caused to all members of the class it seeks to represent but it estimates the loss at more than NIS 3 million. The mediation process conducted by the parties was unsuccessful.
- 38. In July 2020, an action was filed in the Lod-Center District Court, together with an application for its certification as a class action, against the subsidiary Harel Insurance and against four other insurance companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants ostensibly do not reduce the insurance premiums for insureds determined with exclusions on account of a pre-existing medical condition despite the fact that the exclusions allegedly reduce the insurance risk relative to the risk in policies for insureds for whom similar exclusions were not determined. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against Harel Insurance in the amount of NIS 760 million, and against all the Defendants in the amount of NIS 1.9 billion.

- 39. In August 2020, an action was filed in the Lod-Center District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly conditions the investigation of claims for disability in personal accident policies on the submittal of a medical opinion for the insureds and that it refuses to reimburse the insureds for the cost of the professional opinion and this, ostensibly in contravention of the policy provisions and also the allegation that Harel Insurance assesses each of the claim components separately, in contravention of the statutory provisions. The plaintiffs have not quantified the loss claimed for all members of the group they wish to represent, but they estimate that it is more than NIS 3 million. The parties are conducting a mediation process.
- 40. In September 2020, an action was filed against the subsidiary Harel Insurance in the Tel Aviv District Court, together with a motion for its certification as a class action. The subject of the action is the allegation that Harel Insurance allegedly does not disclose to its travel insurance policyholders that the limitation relating to baggage insurance with respect to the maximum amount of compensation for loss or theft of an item also applies to the loss or theft of a valuable item. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent in the amount of NIS 447 million. In December 2021, the court submitted the motion to the Commissioner to obtain his position in relation to the dispute which is subject of the motion for certification of the action as a class action. In March 2022, the Commissioner's position was submitted according to which Harel's interpretation is inconsistent with the simple wording of the policy.
- 41. In November 2020, an action was filed in the Central District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly does not allow service notes in a policy to be cancelled separately from the other components of the insurance plan, and that ostensibly it does not provide proper disclosure prior to the agreement concerning the cancellation of service notes. The plaintiff estimates the total loss claimed by all members of the class that it wishes to represent in the amount of NIS 3 million.
- 42. In December 2020, an action was filed in the Central District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly links the premiums and insurance benefits for insureds in the group long-term care policy for members of Clalit Health Services Supplementary Plus LTC, to an erroneous index and this, ostensibly, in contravention of the Supervision of Financial Services (Insurance) (Group Long-term care insurance for HMO members) Law, 2015. The plaintiffs estimate the overall loss claimed for all members of the group they wish to represent in the amount of NIS 21.2 million. In March 2022, the court instructed that issues in dispute should be submitted to the Commissioner for his position.
- 43. In December 2020, an action was filed in the Tel Aviv Jaffa District Court, together with a motion for its certification as a class action, against the subsidiary Harel Pension & Provident. The subject of the action is the allegation that Harel Pension & Provident does not, ostensibly, comply with the statutory provisions relating to the location of members with whom contact has been lost and relating to the location and notification of beneficiaries and heirs of deceased members. It is further alleged that Harel Pension & Provident ostensibly collected excess management fees in a manner contrary to the statutory provisions. The plaintiffs have not quantified the loss claimed for all members of the class they wish to represent, but they estimate it to be tens and even hundreds of millions of shekels.
- 44. In March 2021, an action was filed in the Central District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly unlawfully rejects claims by insureds in personal accident policies for payment of compensation for hospitalization days in a medical center which is not a general hospital, on the grounds that the policy defines a "hospital" as a general hospital only, and that the policy is ostensibly worded in a misleading manner and in contravention of the law, while violating Circular 2001/9 of the Commissioner of Insurance on the subject of "proper disclosure for insureds when enrolling in a health insurance policy". The plaintiff does not quantify the total loss caused to all members of the class it seeks to represent but it estimates the loss at more than NIS 2.5 million.

- 45. In March 2021, an action was filed against the subsidiary Harel Insurance in the Tel Aviv District Court, together with a motion for its certification as a class action. The subject of the action is the allegation that Harel Insurance ostensibly unlawfully rejects claims for insurance benefits in respect of cover for a medical device by insureds in a group health insurance policy for members of the Israel Teachers Union, arguing that the maximum cover in the policy has been utilized and this, ostensibly, based on a clause in the policy which the plaintiff argues did not exist in the original policy and was applied retroactively. The plaintiff does not quantify the total loss caused to all members of the class it seeks to represent but it estimates the loss at more than NIS 2.5 million.
- 46. In March 2021, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action against the subsidiary Harel Insurance and against two other insurance companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants ostensibly reject claims by health insurance policyholders, which include cover for medications that are not included in the health services basket, in respect of the costs of medical cannabis, despite the fact that it is argued that medical cannabis ostensibly meets the definition of "medication" in the policies. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against all the Defendants in the amount of NIS 79 million.
- 47. In April 2021, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action, against the Company and against 14 different financial institutions banks, insurance companies, investment houses, credit companies and credit card companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that personal information about the Defendants' customers who utilize the digital services on the Defendants websites and apps is ostensibly passed on to third parties, particularly to Google and its advertising services, without the customers' explicit consent. The plaintiffs have not quantified the loss claimed for all members of the class they wish to represent, but they estimate it to be millions of shekels.
- 48. In April 2021, an action was filed in the Central District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance ostensibly marketed personal accident policies in an unacceptable and misleading manner and in contravention of the provisions of circulars issued by the Commissioner of the Capital Market, which regulate the process of enrolling insureds in the insurance. The plaintiff has not quantified the total loss claimed for all members of the class that it wishes to represent but it estimates the amount at millions of shekels.
- 49. In July 2021, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action. against the second-tier subsidiary Harel Financing and Issuing Ltd. ("Harel Financing & Issuing"). The subject of the action is the argument that Harel Financing & Issuing allegedly does not make its reports accessible on the internet-based information systems operated by the Israel Securities Authority and the Tel Aviv Stock Exchange (the Magna and Maya systems, respectively), thus ostensibly preventing or limiting the possibility of people with disabilities from receiving information from these reports. This, ostensibly in contravention of the Equal Rights for Persons with Disabilities Law, 1998 and the Equal Rights for Persons with Disabilities (Service Accessibility Adjustments) Regulations, 2013. The plaintiff estimates the overall loss caused to all members of the class he wishes to represent in the total amount of NIS 7.5 million.
- 50. In July 2021, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against six other insurance companies (hereinafter together: "the Defendants"). The subject of the action is the argument that when calculating the monthly benefit paid to insureds in life assurance policies which include profit sharing from the investment portfolio, the Defendants allegedly deduct interest from the monthly return accrued to the insureds, without any appropriate stipulation to this effect in the policy conditions and without the rate of interest being specified in the policies. The plaintiffs have not quantified the loss claimed for all members of the group they wish to represent, but they estimate that it is more than NIS 2.5 million.

- 51. In September 2021, an action was filed in the Jerusalem District Court together with a motion for its certification as a class action against the subsidiaries Harel Pension & Provident and Harel Insurance (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants allegedly send advertisements by SMS and email and this, ostensibly, without obtaining the recipient's consent to receive such advertisements, without specifying that it is advertising, without including a message concerning the right to refuse to receive advertisements and without providing an option to refuse. This ostensibly in contravention of the Communications (Telecommunications and Broadcasts) Law, 1982. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent in the amount of NIS 10 million.
- 52. In October 2021, an action was filed in the Lod-Center District Court, together with an application for its certification as a class action, against the subsidiary Harel Insurance and against an additional insurance company (hereinafter together: "the Defendants"). The subject of the action is the allegation that the Defendants ostensibly and unlawfully dismiss insurance claims for special-needs children, in the context of a long-term care policy, despite the fact that, according to the plaintiffs, they meet the definition of "cognitively impaired" according to the policy, and this without conducting any examination as to whether their condition corresponds with this definition. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against both defendants together in the amount of NIS 2.97 billion.
- 53. In October 2021, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance. The subject of the action is the allegation, in part, that Harel Insurance ostensibly does not pay insureds in profit-sharing life assurance policies, according to which the insurance benefits are paid on the basis of an Rm formula, the full payment for the investment profits according to the policy instructions and that it ostensibly fails to calculate the yield rate in accordance with the policy instructions. This action addresses grounds which correspond partially with those addressed in a previous action and motion for certification as a class action the Ben Ezra case ("the First Claim"), which was partially certified for litigation as a class action on March 27, 2019, by the Tel Aviv District Court ("the Certification Decision") and the application of which was limited by the Supreme Court to a number of specific policies only (see Section 7(A) above). As a result, this action and motion for its certification as a class action was filed in relation to the other policies which are no longer included in the First Claim. The plaintiff estimates the overall loss caused to all members of the class it wishes to represent in the amount of NIS 1.4 billion.
- 54. In November 2021, an action was filed in the Tel Aviv District Labor Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance The subject of the action is the allegation that Harel Insurance ostensibly refuses to provide insurance cover for partial work disability for its insureds in group medical insurance, and this ostensibly in contravention of the policy instructions. The plaintiff has not estimated the total loss claimed by all members of the class that it wishes to represent.
- 55. In December 2021, an action was filed in the Lod-Center District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance allegedly increases the premiums collected from its insureds in home structural insurance policies when they are renewed without obtaining their express agreement in advance to raise the premiums. The plaintiffs have not quantified the loss claimed for all members of the group they wish to represent, but they estimate that it is more than NIS 2.5 million.
- 56. In December 2021, an action was filed in the Haifa District Labor Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance The subject of the action is the allegation that Harel Insurance allegedly collects amounts for a "withdrawal fine" from its insureds in life assurance policies when the savings in the policy is withdrawn or moved, and this ostensibly in contravention of the provisions of the law and the policy and without giving any warning to this effect prior to moving the money. The plaintiff estimates the overall loss caused to all members of the class it wishes to represent in the amount of NIS 3.55 million

A. Contingent Liabilities (Contd.)

Actions filed during the Reporting Period

- 57. In February 2022, an action was filed in the Central District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance allegedly pays insureds in group health policies for members of the Teachers Union a partial refund of the difference between the full amount paid for a specialist consultation and the amount of participation by the HMOs of which the insureds are members. The plaintiff estimates the overall loss caused to all members of the class it wishes to represent in the amount of NIS 12 million.
- 58. In March 2022, an action was filed against the subsidiary Harel Insurance, together with a motion for its certification as a class action, in the Tel Aviv District Court. The subject of the action is the allegation that Harel Insurance allegedly unlawfully collected and collects from the insureds a premium for insurance cover for preventive surgery. The plaintiff does not quantify the total loss claimed for all members of the class it wishes to represent but it estimates the loss to be substantially more than NIS 2.5 million.

Actions filed after the Reporting Period

59. In April 2022, an action was filed in the Central District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action is the allegation that Harel Insurance is in breach of its lawful obligation to pay linkage differences in respect of insurance benefits paid in the non-life insurance sectors for the period between the date on which the insured event occurs and the date of payment of the insurance benefits. The plaintiff does not quantify the loss claimed for all members of the class it wishes to represent.

B. Contingent Liabilities – Shirbit

Information about the exposure for class actions and motions for recognition of actions as class actions that were filed against Shirbit Insurance Company Ltd. ("Shirbit"), whose insurance activity was acquired by Harel Insurance on December 1, 2021.

In September 2015, an action was filed in the Tel Aviv District Court, together with a motion for its certification 1 as a class action, against Shirbit and against another insurance company. The subject of the action is the allegation that Shirbit allegedly refrains from paying insurance benefits to its insureds, together with interest and linkage differences, for the period from the occurrence of the insured event until the time of payment of the insurance payments, and alternatively, for the period commencing from 30 days after the insurance claim is filed and up to the actual date of payment of the insurance benefits. The total loss claimed for members of the class against Shirbit is NIS 10 million. On May 26, 2021, the Tel Aviv District Court accepted the motion for certification. According to the ruling, the group is defined as any eligible person (insured, beneficiary or third party) who in the period commencing three years prior to filing the action and its termination on the day of certification of the action as a class action, received insurance benefits from Shirbit, not in accordance with a judgement given on his case, without the inclusion of interest by law. In September 2021, Shirbit, together with other insurance companies who were sued in a number of motions for certification on the same grounds ("the Defendants"), filed a motion for a stay of proceedings on the action, until a ruling is given on an appeal filed in the Supreme Court as part of another class action that was approved on an identical matter against other insurance companies, including Harel Insurance (see Section (A)(4) above). In October 2021, the court denied the motion for a stay of proceedings. In January 2022, the Defendants filed another motion for a stay of proceedings. In March 2022, the District Court ordered a stay of proceedings until a ruling is given on an appeal filed in the Supreme Court on a corresponding claim and it instructed that the action should be litigated jointly following the ruling on the appeal.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.) B. Contingent Liabilities – Shirbit (contd.)

- 2. In January 2017, an action was filed in the Lod-Center District Court together with a motion for its certification as a class action against the Shirbit. The subject of the action is the allegation that Shirbit does not disclose to its motor insurance insureds, who are on the verge of crossing an age or driving seniority bracket that it applies in the policy period, that they are able to update the driver's age or driving seniority, and receive a surplus premium, and that as a result these insureds overpay the premium due to not having updated the premium in the policy period as a result of changing the age or seniority bracket. The plaintiffs estimate the loss caused to members of the class they wish to represent in the amount of NIS 43.31 million. On February 16, 2022, a judgment was handed down by the Central District Court in which a class action which had been filed against another insurance company on a similar matter ("the corresponding claim") was dismissed. In March 2022, the District Court ordered a stay of proceedings until a decision is given on an appeal to be filed in the corresponding claim.
- 3. In January 2018, an action was filed in the Lod-Central District Court, together with a motion for its certification as a class action, against Shirbit and against five other insurance companies (hereinafter together: "the Defendants"), including Harel Insurance (see Section (D)(10) above). The subject of the action was the allegation that the Defendants ostensibly unlawfully refrain from paying insurance benefits to insureds, to third parties and beneficiaries for the VAT component that applies to the cost of damages in those instances where the damage was not actually repaired. The grounds of the action and motion for certification are the same as those for which a previous action and motion for its certification were filed against the Defendants. On January 3, 2018 the Supreme Court dismissed an appeal on a ruling of the Central-Lod District Court dated February 20, 2017, in which the motion was struck out. On January 4, 2022, the Lod-Center District Court denied the motion for certification of the action as a class action. On April 12, 2022, the plaintiff filed an appeal in the Supreme Court against the District Court.
- 4. In December 2020, four motions to certify actions as class actions were filed against Shirbit (three motions to certify actions as class actions were filed in the Lod-Center District Court and one motion to certify an action as a class action was filed in the Tel Aviv District Court), on similar grounds of a data security failure against the backdrop of a cyber security attack on Shirbit's servers by hackers and the publication of personal information which belongs to Shirbit's customers. In June 2021, the plaintiffs in the four motions to certify actions as class actions, filed a consolidated motion for certification. The subject of the consolidated action is the allegation that alleged security omissions in Shirbit caused the leak of information and data in Shirbit's possession. The plaintiffs have not quantified the loss claimed for all members of the group they wish to represent, but they estimate that it is more than NIS 2.5 million. In January 2022, the parties informed the court of their agreement to enter a mediation process.
- In April 2020, an action was filed in the Tel Aviv District Court, together with a motion for its certification as 5. a class action, against Shirbit and against twelve other insurance companies (hereinafter together: "the Defendants"), including Harel Insurance (see Section (A)(34) above). The subject of the action is the allegation that the Defendants must refund to holders of their motor insurance and homeowners insurance policies part of the premiums which they ostensibly overpaid, in view of the alleged significant reduction of the risk that the Defendants undertook when they determined the premiums in these policies. This following the outbreak of the COVID-19 pandemic and the subsequent restrictions on movement and activity that were imposed and which allegedly led to a much lower volume of traffic and travel and consequently a significant decrease in bodily injury and damage to property. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against Shirbit in the amount of NIS 27 million, and against all the Defendants in the amount of NIS 886 million. In February 2021, the court ordered withdrawal of the motion concerning the motor insurance with respect to Shirbit and the other respondents (except for one insurance company) and that the motion will continue to be heard on the homeowners insurance policies. The court instructed that the plaintiffs should consider their next steps regarding the method of litigating the motion for certification, in view of the decision. In April 2021, the plaintiffs filed an appeal in the Supreme Court against the decision of the District Court. In October 2021, the Tel Aviv District Court ordered a stay of proceedings in a proceeding being heard by the court and this until after a ruling on a proceeding to which Shirbit is not a party regarding a refund of premiums to insureds in policies for insuring business premises, employers liability insurance and third-party insurance on account of an alleged reduction of the risk to which the Defendants are exposed following the

outbreak of COVID-19 and the restrictions on economic activity, in which context the Haifa District Court denied the motion to certify the action as a class action against other insurance companies, becomes absolute ("Judgement in the Additional Proceeding") or insofar as an appeal on the ruling in the Judgement in the Additional Proceeding is filed in the Supreme Court - until a ruling is given on the appeal. In December 2021, the District Court ordered the stay of proceedings to be lifted, after the judgement in the additional proceeding had become absolute.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.) B. Contingent Liabilities – Shirbit (contd.)

In April 2020, an action was filed in the Haifa District Court, together with a motion for its certification as a class action, against Shirbit and against eleven other insurance companies (hereinafter together: "the Defendants"), including Harel Insurance (see Section (A)(35) above). The subject of the action is the allegation that the Defendants do not refund the holders of their compulsory motor, comprehensive and third-party insurance policies premiums that were ostensibly overpaid by the policyholders in view of the supposedly substantial reduction of the risk level to which the Defendants are exposed from March 2020 in view of the contraction of economic activity due to the outbreak of the COVID-19 pandemic and subsequent reduced volume of traffic. The plaintiffs estimate the total loss claimed for all members of the class they wish to represent against Shirbit in the amount of NIS 38 million, and against all the Defendants in the amount of NIS 1.2 billion. In June 2020, the court instructed that hearing of the motion should be transferred to the Tel Aviv District Court. In October 2021, the Tel Aviv District Court ordered a stay of proceedings in a proceeding being heard by the court and this until after a ruling on a proceeding to which Shirbit is not a party regarding a refund of premiums to insureds in policies for insuring business premises, employers liability insurance and third-party insurance on account of an alleged reduction of the risk to which the Defendants are exposed following the outbreak of COVID-19 and the restrictions on economic activity, in which context the Haifa District Court denied the motion to certify an action as a class action that had been filed against other insurance companies, becomes absolute ("Judgement in the Additional Proceeding") or insofar as an appeal on the ruling in the Judgement in the Additional Proceeding is filed in the Supreme Court - until a ruling is given on the appeal. In December 2021, the District Court ordered the stay of proceedings to be lifted, after the judgement in the additional proceeding had become absolute.

B. Contingent liabilities

Summary table:

The following table summarizes the amounts claimed as part of the contingent applications for the approval of class actions, actions that were approved as a class action, and other significant claims against the Company and/or subsidiaries, as specified by the claimants in the suits they filed. It should be clarified that the amount claimed does not necessarily constitute the amount of exposure estimated by the Company, given that these are the claimants' estimates and they will be investigated during the litigation process.

Туре	Number of claims	Amount claimed NIS million
Actions certified a class action:		
Amount pertaining to the Company and/ or subsidiaries is specified	7	1,267
Claim relates to several companies and no specific amount was attributed to the Company and/ or subsidiaries	2	273
Claim amount is not specified	2	
Pending requests for certification of actions as class actions:		
Amount pertaining to the Company and/ or subsidiaries is specified	28	4,805
Claim relates to several companies and no specific amount was attributed to the Company and/ or subsidiaries	5	6,329
Claim amount is not specified	21	

The total provision for claims filed against the Company and against Shirbit, as noted above, as at March 31, 2022, March 31, 2021, and December 31, 2021, is NIS 110 million, NIS 92 million, and NIS 101 million, respectively.

C. Claims settled in the Reporting Period

1. In September 2020, an action was filed in the Lod-Center District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action was the allegation that Harel Insurance allegedly does not disclose to the holders of its personal accident insurance the exact scope of the insurance cover for surgery due to accidental orthopedic injury to the shoulder, ankle and knee and that it does not indemnify policyholders whose claims were approved only after intervention by a lawyer, for legal expenses that were incurred as a result of such intervention. On January 13, 2022, the Lod-Center District Court approved the plaintiff's application to abandon the motion for certification, and it ordered the dismissal of her personal claim and to strike out the motion for certification.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

C. Claims settled in the Reporting Period (contd.)

- 2. In September 2017, an action was filed in the Jerusalem District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against twelve other insurance companies (hereinafter together: "the Defendants"). The subject of the action is the allegation that in cases where the Defendants pay amounts that were ruled against them by the judicial authorities after the date set for their settlement, they do not add to them linkage differences, interest and linked interest as required under the provisions of Section 5(B) of the Adjudication of Interest and Linkage Law, 1961. The parties are conducting a mediation process In March 2021, the parties filed a motion in the court to certify a compromise settlement in which it was agreed, inter alia, that the Defendants will amend the wording of the settlement notes which they use, insofar as is necessary, so that date of payment will be 30 days from the date on which the payment conditions are satisfied, and they will accept settlement notes in accordance with a mechanism for serving a settlement note as defined in the compromise settlement. On February 6, 2022, the court certified as a judgement an amended compromise settlement in which it was agreed, inter alia, that the Defendants will amend the wording of the settlement notes which they use, insofar as is necessary, so that date of payment will be a period of no more than 30 days from the date on which the payment conditions are satisfied, and they will accept settlement notes in accordance with a mechanism for serving a settlement note as defined in the compromise settlement. As agreed in the compromise settlement, Harel Insurance will pay compensation to the class plaintiff and lawyers fees of insignificant amounts to its attorneys.
- In November 2014, a motion was filed in the Lod-Center District Court to certify an action as a class action 3. against the subsidiary Harel Insurance and Standard Insurance Ltd. and against an additional insurance company (hereinafter together: "the Defendants"). The subject of the action is the allegation that in cases where the holders of Isracard and CAL credit cards call the Defendant insurance companies' sales call center in order to activate a travel insurance policy which they are eligible to receive at no cost ("the Basic Policy), the Defendants allegedly sell them "riders" or "extensions" to the Basic Policy, while in practice the policy sold to them is a full off-the-shelf policy that provides cover from the first shekel and includes coverages that overlap the cover included in the Basic Policy. This at full cost and without deducting the value of the Basic Policy. The plaintiffs argue that the Defendants therefore allegedly mislead the insureds, violate the disclosure obligation, act in contravention of the statutory provisions and practice unjust enrichment. In August 2018, the parties filed a motion in the court to certify a compromise settlement in which it was agreed that Harel Insurance will make available to the eligible class members, as they are defined in the compromise settlement, a defined quantity of days of travel insurance free of charge, that can be utilized in accordance with the provisions of the compromise settlement. In November 2019, the Attorney General submitted his position in relation to the compromise settlement, whereby the compromise settlement in its present format should not be approved and that it must be amended in conformity with his comments. In April 2020, the court gave a decision on the motion to approve the compromise settlement whereby, at this time, in view of the current uncertainty and travel ban between most countries in the world, it is impossible to say that this would be a fair ruling on the dispute, at this stage, from the perspective of the class members. This, without negating the arrangement of itself as being worthy, fair and reasonable from the perspective of the class members. On February 17, 2022, the court validated the compromise settlement as a judgment in which it was agreed, among other things, that Harel Insurance will make available to the eligible class members, as they are defined in the compromise settlement, a defined number of days of travel insurance free of charge, that can be utilized in accordance with the provisions of the compromise settlement. As agreed in the compromise settlement, Harel Insurance will pay a benefit to the class plaintiff and legal fees to its attorney of insignificant amounts.

Note 7 - Contingent liabilities, guarantees and commitments (Contd.)

C. Claims settled in the Reporting Period (contd.)

4. In September 2016, an action was filed in the Tel Aviv District Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against three other insurance companies (hereinafter together: "the Defendants"). The subject of the action was the allegation that the Defendants ostensibly collect high premiums from the insureds for health insurance policies that include cover that the insureds ostensibly do not need as they have supplementary health insurance from the HMOs to which they belong. The plaintiffs also argue that the Defendants neglect to disclose to the insureds that this cover is in fact redundant and/or that they condition one type of service on another since they do not allow the insureds to purchase a limited version of the policy which includes only coverage that is not included in the HMO supplementary health insurance, thus creating a situation of multiple insurance. The plaintiffs argue that the Defendants are therefore in breach of the duty of utmost good faith which applies to them, are in breach of a statutory obligation, in breach of the provisions of the law, in breach of an agreement, mislead their policyholders and practice unjust enrichment. In October 2020, the Tel Aviv District Court denied the application for certification of the action as a class action. In November 2020, Harel Insurance was served with an appeal on the judgment which the plaintiffs in the motion for certification filed in the Supreme Court. In December 2020, a counter appeal was filed by Harel Insurance regarding the failure to rule expenses in its favor in the judgment given by the District Court. At the hearing, which took place in the Supreme Court on March 28, 2022, the appeal was dismissed, after the appellants accepted the court's recommendation to withdraw it.

D. Claims settled after the Reporting Period

- 1. In April 2020, an action was filed in the Tel Aviv District Court together with a motion for its certification as a class action against the subsidiary Harel Insurance. The subject of the action was the allegation that Harel Insurance ostensibly refuses to indemnify insureds in health insurance policies that entitle the insureds to indemnity for expenses for tests during pregnancy more than once in each pregnancy. This, ostensibly, in contravention of the provisions of the insurance policy. On April 28, 2022, the Tel Aviv District Court approved the plaintiff's motion to abandon the motion for certification and the action, and it ordered the dismissal of the plaintiff's personal claim.
- 2. In April 2020, an action was filed in the Tel Aviv District Labor Court, together with a motion for its certification as a class action, against the subsidiary Harel Insurance and against an additional insurance company (hereinafter together: "the Defendants"). The subject of the action was the allegation that the Defendants ostensibly refuse to extend the validity of the insurance cover for insureds in work disability insurance (P.H.I.) that was purchased before 2017 and in which the policy period terminates at age 65, and to pay them insurance benefits up to the age of retirement which in 2004 increased to 67 for salaried employees and 70 for the self-employed. On April 18, 2022, the Tel Aviv District Labor Court denied the motion for certification of the action as a class action.

Note 8 - Capital requirements and management

1. Solvency II based economic solvency regime

An economic solvency regime based on Solvency II applies to Harel Insurance, and this pursuant to the implementation provisions published in June 2017 and revised in October 2020 ("Provisions of the Economic Solvency Regime").

Economic solvency ratio:

The economic solvency ratio is calculated as the ratio between the recognized economic equity of Harel Insurance and the solvency capital requirement (SCR).

The recognized economic equity is defined as the sum of the equity arising from the economic balance and debt instruments which include loss-absorbing mechanisms (additional tier-1 capital, tier-2 capital instruments, subordinated tier-2 capital, hybrid tier-2 and tier-3 capital).

The economic balance items are calculated according to economic value, where the insurance liabilities are calculated on the basis of a best estimate of all the anticipated future flows from current business, excluding margins for conservatism and plus a risk margin.

The purpose of the solvency capital requirement (SCR) is to estimate the exposure of the economic shareholders equity to a series of scenarios set out in the economic solvency regime provisions which reflect insurance risks, market and credit risks as well as operational risks.

Among other things, the economic solvency regime includes transitional provisions relating to compliance with the capital requirements, which allow the economic capital to be increased by deducting from the insurance reserves the amount calculated in accordance with the provisions of the economic solvency regime ("the Deduction"). The Deduction will gradually decrease until 2032 ("the Transitional Period"), in addition to a reduced capital requirement, which will gradually increase until 2023, for certain categories of investment, with a different maximum recognition limitation for tier-2 capital.

According to the consolidated circular, the economic solvency ratio report for data as at December 31 and June 30 each year will be included in the periodic report subsequent to the period of the calculation.

On May 30, 2022, Harel Insurance published a report on the economic solvency ratio in respect of data at December 31, 2021, on its website: https://www.harel-group.co.il/about/harel-group/harel/investor-relations/Pages/repayment-ability.aspx. According to the report, Harel Insurance has a capital surplus even without taking the transitional provisions into account.

The calculation prepared by the Harel Insurance for data at December 31, 2021, was reviewed in accordance with ISAE 3400 - Review of Future Financial Information. This standard is relevant for audits of the solvency calculation and it is not part of the auditing standards applicable to financial reports. A special report prepared by the external auditors emphasized that the forecasts and assumptions are based, in principle, on past experience, as it emerges from actuarial studies conducted from time to time. In view of the reforms in the capital market, insurance and savings, and changes in the economic environment, past data do not necessarily reflect future performance. In some cases, the information is based on assumptions about future events and management activity that do not necessarily materialize or that may materialize differently from the assumptions that formed the basis for the information. Moreover, actual performance could differ significantly from the information, given that the combination of scenarios of events could materialize in a significantly different manner from the assumptions in the information.

A special report prepared by the external auditors noted that they did not examine the reasonability of the Deduction amount in the transitional period as at December 31, 2021, other than to check that the Deduction does not exceed the projected discounted amount of the risk margin and the solvency capital requirement in respect of life and health risks for existing business in the transitional period, based on the pattern of future development of the required capital that affects calculation of the expected release of equity, as well as the release of the projected risk margin, as specified in the provisions concerning calculation of the risk margin. Furthermore, attention is drawn to the information in the Solvency Report concerning the uncertainty arising from regulatory changes and exposure to contingencies, the effect of which on the solvency ratio cannot be estimated.

Note 8 - Capital requirements and management (contd.)

1. Solvency II based economic solvency regime (contd.)

Notably, the model in its current format is extremely sensitive to changes in market and other variables, such as changes in the interest rate, changes in investment profits, revised actuarial assumptions and changes relating to the activity of Harel Insurance.

2. Capital management policy of Harel Insurance

It is Harel Insurance's policy to hold a robust capital base to guarantee its solvency and its ability to meet its commitments towards its insureds, to ensure that it is capable of continuing its business activity and so that it can provide a return for its shareholders. Harel Insurance is subject to the capital requirements and regulations stipulated with respect t the distribution of a dividend.

On November 30, 2020, the Board of Directors of Harel Insurance approved a revised capital management plan and at this stage, threshold conditions were determined for a dividend distribution, which include a minimum economic solvency ratio of 135%, taking the transitional provisions and minimum solvency ratio into account, without taking the transitional provisions into account in the transition period.

On February 28, 2021, the Company's Board of Directors approved a dividend distribution policy whereby the Company will distribute a dividend of at least 30% of the comprehensive income according to its annual consolidated financial statements. Additionally, on February 28, 2021, the board of directors of Harel Insurance approved a dividend distribution policy according to which Harel Insurance will distribute a dividend of at least 35% of the comprehensive income according to the annual consolidated financial statements of Harel Insurance, and this as long as Harel Insurance is in compliance with the minimum targets for solvency based on Solvency II.

- 3. As part of the permit to control and hold the means of control in insurers, the Company undertook to inject NIS 120 million into Harel Insurance should Harel Insurance fail to satisfy the regulatory capital requirements applicable to it in accordance with the Solvency model (SCR including transitional provisions). This undertaking is irrevocable and was in force until March 2022.
- 4. Consolidated companies that manage mutual funds and investment portfolios are obligated to hold minimum capital in accordance with the directives of the Israel Securities Authority. The companies take regular action to ensure that they are in compliance with this requirement. As at March 31, 2022, the consolidated companies are in compliance with these requirements.
- 5. Plan to repurchase shares

On June 30, 2021, the Company's Board of Directors approved a plan to repurchase shares of the Company in the amount of up to NIS 100 million. This plan will be implemented from time to time as will be determined by the Company's management which was authorized by the Board of Directors to purchase securities at its discretion during the period prescribed for implementation of the plan. For additional information, see an Immediate Report of the Company dated June 30, 2021 (Ref. 2021-01-109800). At March 31, 2022, the Company purchased 1,505,658 shares at a cost amounting to NIS 52 million. At the date of publication of the report, the Company has purchased 1,689,208 shares at a total cost of NIS 60 million.

6. Dividend received from Harel Insurance

In January 2022, the Board of Directors of Harel Insurance approved a dividend distribution in the amount of NIS 250 million. The Board of Directors made its decision after taking into account the financial results of Harel Insurance, the distributable retained earnings of Harel Insurance and after assessing the capital surplus and compliance with the solvency directives. Additionally, the Board of Directors of Harel Insurance examined its compliance with the profit test and solvency test prescribed in Section 203(a) of the Companies Law and following this review, the Board of Directors of Harel Insurance approved its compliance with the distribution test. The dividend was paid on February 3, 2022

For the

Notes to the condensed consolidated interim financial statements

Note 9 - Material events in the Reporting Period

1. Effects of the changes in the interest rate and changes in the difference between the fair value and book value of the non-marketable assets and the effects of applying the circulars specified in Note 3C1(g) to the annual financial statements on the insurance liabilities are set out below:

	For the three ended Marcl	For the year ended December 31	
	2022	2021	2021
	(Unaudited)	(Unaudited)	(Audited)
	NIS million	NIS million	NIS million
Health insurance - decrease (increase) in the insurance liabilities as a result of:			
Effects of the interest rate and changes in the difference between the fair value and book value of the non-marketable assets:	764	(86)	(936)
Effects of the application of circulars	-	_	863
Total health insurance	764	(86)	(73)
Non-life insurance - decrease (increase) in the insurance liabilities as a result of:			
Effects of the interest rate and changes in the difference between the fair value and book value of the non-marketable assets:	167	(63)	(262)
Effects of the application of circulars	-	-	60
Total non-life insurance	167	(63)	(202)
Total effects of the interest rate on profit and comprehensive income before tax	931	(149)	(275)
Total effects of the interest rate on profit and comprehensive income after tax	613	(98)	(181)

- 2. Due to falling prices in the capital markets in the Reporting Period, real, negative yields were recorded in profit sharing policies sold between 1991 and 2003. Pursuant to the mechanism for collecting management fees as set out in the legislative arrangement, variable management fees will not be collected in respect of yield-dependent policies that were sold between 1991 and 2003, until investment profits are attained in respect of assets held to cover yield-dependent liabilities, which will cover the accrued investment losses. In accordance with the described mechanism, Harel Insurance did not record variable management fees from the beginning of 2022, but only fixed management fees. At March 31, 2022, the estimate for management fees that will not be collected due to the real negative yield until a cumulative positive yield is attained, is NIS 82 million. See also Note 10(1).
- 3. Dividend distributions
 - A. On March 28, 2022, the Company's Board of Directors approved the distribution of a cash dividend in the amount of NIS 300 million (NIS 1.41 per share). The Board of Directors made its decision after taking into account the Company's financial results as at December 31, 2021. The Board of Directors was presented with information on the distributable profits, capital surpluses of the Company's subsidiaries and the Group's cash requirements, in various scenarios. The Board of Directors reviewed the Company's compliance with the profit test and solvency test prescribed in Section 203(a) of the Companies Law. Following this review, the Board of Directors confirmed the Company's compliance with the distribution test. The dividend was paid on April 26, 2022.

Note 9 - Material events in the Reporting Period (contd.)

- B. On a plan to repurchase shares which was approved by the Company's Board of Directors on June 30, 2021, and the share repurchase which took place during and after the Reporting Period, see Note 8.
- 4. Expected termination of office by Corporate Counsel and appointment of a Corporate Counsel.

On March 20, 2022, Ms. Nataly Mishan-Zakai, deputy CEO of Harel Insurance and Chief Legal Counsel of Harel Group and also Chair of the Board of Directors of the Group's pension and provident companies, announced her decision to step down from her positions in Harel Group after an eight-year term of office.

The Company's Board of Directors announced the appointment of Adv. Gilad Shapira as Chief Legal Counsel of Harel Group. The appointment will enter into force on June 1, 2022.

5. Share-based payment

On January 27, 2022, 906,000 option warrants were allotted to 32 Harel Insurance employees as part of the plan described in Note 39 to the annual financial statements. The exercise price for each option at the Grant Date is NIS 36.56. The fair value of the options at the Grant Date was NIS 7.8 million.

6. Credit facility provided to a subsidiary - Hamazpen Shutaphim Laderech Ltd.

In December 2019, Hamazpen entered into agreement with Harel Insurance to receive a credit facility in the amount of NIS 150 million for the purpose of providing credit to its customers. In September 2020 the credit facility was increased by a further NIS 100 million and in November 2021, the Company's Board of Directors approved an additional increase of the aforesaid credit facility by a further NIS 50 million. As collateral for providing this credit facility, the Company signed a letter of undertaking to invest the required amounts in Hamazpen's capital from time to time so as to ensure that, at all times, Hamazpen's equity will not fall below 15% of the total balance sheet of Hamazpen. At March 31, 2022, the balance of the credit provided by Harel Insurance to Hamazpen was NIS 200 million. At the date of publication of the report, the balance of the credit provided by Harel Insurance to Hamazpen was NIS 210 million

Note 10 – Material Events after the Reporting Period

1. Further to the information in Note 9(2), Restructuring of Harel Insurance after the Reporting Period and up to immediately prior to the date of publication of the financial statements, share prices continued to fall on the capital markets. Immediately prior to the date of publication of the financial statements, the estimate for management fees that will not be collected due to the real, negative yield until a cumulative positive yield is attained, amounts to NIS 257 million.

Additionally, due to the aforementioned falling prices on the capital markets, after the Reporting Period and up to immediately prior to publication of the financial statements, Nostro losses were recorded in the marketable portfolio which is not held to cover yield-dependent liabilities.

Additionally, immediately prior to the date of publication of the report, the risk-free interest rate curve rose to above its level on March 31, 2022, which could lead to a reduction of the insurance liabilities. In contrast, an increase of the interest rate curve could negatively impact the value of the financial and other assets in a manner that might reduce this aforesaid impact. Notably, the information described above should not be construed as an estimate of the Company's financial results. This information is only partial and it does not include other components of profit or loss from investments and other effects.

2. Full early redemption of bonds (Series 8) of Harel Finance & Issues

On a decision concerning the full early redemption of Series 8 bonds that were issued by Harel Finance & Issues, see Note 6.

3. Expected termination of office by an officer in a subsidiary

On May 8, 2022, Mr. Tal Kedem, CEO of the subsidiary Harel Finance Holdings Ltd. ("Harel Finance") announced his decision to step down from his position in Harel Finance following a term of office of five and a half years.

This termination of office is against the backdrop of Mr. Kedem's wish to embark on independent operations in the capital market.

Mr. Kedem will continue to serve as CEO of Harel Finance until the end of the year, and the decision concerning his replacement will therefore be made in the coming weeks.



HAREL INSURANCE INVESTMENTS AND FINANCIAL SERVICES LTD

ANNEXES TO THE CONDENSED CONSOLIDATED INTERIM FINANCIAL STATEMENTS

Annex A - Information about assets for other financial investments in the Group

A. Information about other financial investments

	As at March 31, 2022 (Unaudited)							
	Presented at fair value through profit or loss	Available for sale	Held to maturity	Loans and Receivables	Total			
	NIS million	NIS million	NIS million	NIS million	NIS million			
Marketable debt assets (A1)	25	13,102	14	-	13,141			
Non-marketable debt assets (*)	3,770	-	-	13,912	17,682			
Shares (A2)	810	1,947	-	-	2,757			
Other (A3)	427	3,441	-	-	3,868			
Total other financial investments	5,032	18,490	14	13,912	37,448			

	As at March 31, 2021 (Unaudited)							
	Presented at fair value through profit or loss	Available for sale	Held to maturity NIS	Loans and Receivables	Total NIS			
	NIS million	NIS million	million	NIS million	million			
Marketable debt assets (A1)	120	11,478	27	-	11,625			
Non-marketable debt assets (*)	1,524*	-	-	14,207*	15,731			
Shares (A2)	105	1,592	-	-	1,697			
Other (A3)	193	2,898	-	-	3,091			
Total other financial investments	1,942	15,968	27	14,207	32,144			

	As at December 31, 2021							
	Revalued at fair value through profit and loss	Available-for- sale	Held to redemption	Loans and receivables	Total			
	NIS million	NIS million	NIS million	NIS million	NIS million			
Marketable debt assets (a1)	10	13,555	14	-	13,579			
Non-marketable debt assets (*)	3,152	-	-	13,477	16,629			
Shares (a2)	628	1,880	-	-	2,508			
Other (a3)	422	3,173	-	-	3,595			
Total other financial investments	4,212	18,608	14	13,477	36,311			

(*) For information about the composition of non-marketable debt assets at the level of the Company's consolidated financial statements, see Note 6 – Financial Instruments.

* Reclassified

Annex A - Information about assets for other financial investments in the Group (Contd.)

A1. Marketable debt assets

		Book value					
	As at March 31		As at December 31		As at March 31		
	2022	2021	2021	2022	2021	2021	
	(Unaudited)	(Unaudited)	(Audited)	(Unaudited)	(Unaudited)	(Audited)	
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	
Government bonds	7,497	6,777	8,088	7,454	6,457	7,586	
Other debt assets:							
Other non-convertible debt assets	5,644	4,848	5,491	5,547	4,561	5,085	
Total marketable debt assets	13,141	11,625	13,579	13,001	11,018	12,671	
Impairments recognized in profit and loss (in aggregate)	-	3	-				

A2. Shares

		Book value					
			As at December 31	As at March :	As at March 31		
	2022	2021 2021		2022	2021	2021	
	(Unaudited)	(Unaudited)	(Audited)	(Unaudited)	(Unaudited)	(Audited)	
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	
Marketable shares	2,308	1,364	2,097	1,835	965	1,580	
Non-marketable shares	449	333	411	314	223	314	
Total shares	2,757	1,697	2,508	2,149	1,188	1,894	
Impairments recognized in profit and loss (in aggregate)	62	58	62				

A3. Other financial investments

		Book value				
	As at March 31		As at December 31	As at March 2	As at December 31	
	2022	2021	2021	2022	2021	2021
	(Unaudited)	(Unaudited)	(Audited)	(Unaudited)	(Unaudited)	(Audited)
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million
Marketable financial investments	807	1,089	885	772	1,051	854
Non-marketable financial investments	3,061	2,002	2,710	1,992	1,545	1,911
Total other financial investments	3,868	3,091	3,595	2,764	2,596	2,765
Impairments recognized in profit and loss (in aggregate)	202	111	173			
Derivative financial instruments presented in financial liabilities	164	182	103			

Other financial investments include mainly investments in ETFs, participation notes in mutual funds, investment funds, financial derivatives, forward contracts, options and structured products.



HAREL INSURANCE INVESTMENTS AND FINANCIAL SERVICES LTD.

SEPARATE FINANCIAL INFORMATION FROM THE CONDENSED CONSOLIDATED INTERIM FINANCIAL STATEMENTS

As at March 31, 2022

Condensed Separate Interim Information on Financial Position as at

	March 31		December 31	
	2022	2021	2021	
	(Unaudited)	(Unaudited)	(Audited)	
	NIS million	NIS million	NIS million	
Assets				
Intangible assets	2	-	2	
Fixed assets Investments in equity accounted investees	22	25	23	
Loans to investee companies	7,805	6,919	7,724	
-	878	725	903	
Investment property Trade and other receivables	28	26	26	
	101	57	51	
Assets for employee benefits	25	23	25	
Other financial investments				
Marketable debt assets	320	231	317	
Shares	196	60	189	
Other	182	291	220	
Total other financial investments	698	582	726	
Cash and cash equivalents	385	63	202	
Total assets	9,944	8,420	9,682	
	7,744	8,420	7,002	
Capital				
Share capital and premium on shares	359	359	359	
Treasury stock	(175)	(123)	(163)	
Capital reserves	1,077	1,075	1,373	
Retained earnings	7,620	6,421	7,292	
Total equity	8,881	7,732	8,861	
Liabilities				
Deferred tax liabilities	15	4	20	
Liabilities for employee benefits	37	38	37	
Trade and other payables	393	189	139	
Current tax liabilities	8	4	3	
Financial liabilities	610	453	622	
Total liabilities	1,063	688	821	
Total liabilities and equity	9,944	8,420	9,682	

Yair Hamburger Chairman of the Board of Directors

Michel Siboni CEO Arik Peretz CFO

Date of approval of the financial statements: May 30, 2022

The additional information accompanying the separate interim financial statements is an integral part thereof.

Condensed Separate Interim Information on Profit and Loss

	For the three months ended March 31		For the year ended December 31	
	2022	2021	2021	
	(Unaudited)	(Unaudited)	(Audited)	
	NIS million	NIS million	NIS million	
Profits from investments, net, and finance revenues	19	4	44	
Income from management fees	37	32	130	
Total income	56	36	174	
General and administrative expenses	12	4	16	
Financing expenses, net	4	4	34	
Total expenses	16	8	50	
Company's shares in profits of investee companies	590	222	1,116	
Profit before taxes on income	630	250	1,240	
Taxes on income	10	7	31	
Profit for period ended attributed to the Company's shareholders	620	243	1,209	

The additional information accompanying the separate interim financial statements is an integral part thereof.

Condensed Separate Interim Information on Comprehensive Income

	For the three March 31	months ended	For the year ended December 31
	2022	2021	2021
	(Unaudited)	(Unaudited)	(Audited)
	NIS million	NIS million	NIS million
Profit for the period	620	243	1,209
Other items of comprehensive income (loss) which after initial recognition under comprehensive income were or will be transferred to profit or loss			
Net change in fair value of financial assets classified as available for sale	(20)	8	62
Net change in fair value of financial assets classified as available for sale that was transferred to income statement	(4)	1	(5)
Loss from impairment of financial assets classified as available for sale that was transferred to income statement	1	-	-
Foreign currency translation differences for foreign activity	3	(5)	(24)
Group's share of the comprehensive income (loss) of investees	(298)	*5	259
Tax benefit (income tax) attributable to available-for-sale financial assets	5	(2)	(13)
Total other comprehensive income (loss) for the period that after initial recognition as part of comprehensive income was or will be transferred to profit or loss, net of tax	(313)	7	279
Other items of comprehensive income that will not be transferred to profit or loss			
Revaluation fund for fixed asset items in investee companies	19	*4	29
Remeasurement of a defined benefit plan	-	-	2
Taxes on income for other items of comprehensive income that will not be			
carried over to profit or loss	-		(1)
Other comprehensive income for the period that will not be transferred to profit or loss, net of tax	19	4	30
Other comprehensive income (loss) for the period, net of tax	(294)	11	309
Total comprehensive income (loss) for the period attributed to the Company's shareholders	326	254	1,518

* Reclassified

The additional information accompanying the separate interim financial statements is an integral part thereof.

Condensed Separate Interim Information on Changes in Equity

	Share capital and premium NIS million	Capital reserve for assets available for sale NIS million	Translation reserve for foreign activity NIS million	Capital reserve for share-based payment NIS million	Treasury stock NIS million	Capital reserve for transactions with non- controlling interests NIS million	Capital reserve for revaluation of fixed assets NIS million	Retained earnings NIS million	Total NIS million
For the three months ended March 31, 2022 (Unaudite									
Balance as at January 1, 2022	359	1,347	(252)	6	(163)	(49)	321	7,292	8,861
Comprehensive income (loss) for the period									
Profit for the period	-	-	-	-	-	-	-	620	620
Other comprehensive income (loss)	-	(335)	17	-	-	-	16	8	(294)
Total comprehensive income (loss) for the period	-	(335)	17	-	-	-	16	628	326
Transactions with shareholders recognized directly in equity									
Dividend distributed	-	-	-	-	-	-	-	(300)	(300)
Share-based payment	-	-	-	6	-	-	-	-	6
Purchase of Treasury stock	-	-	-	-	(12)	-	-	-	(12)
Balance as at March 31, 2022	359	1,012	(235)	12	(175)	(49)	337	7,620	8,881

The additional information accompanying the separate financial statements is an integral part thereof.

Condensed Separate Interim Information on Changes in Equity (contd.)

	Share capital and premium	Capital reserve for assets available for sale	Translation reserve for foreign activity	Capital reserve for share-based payment	Treasury stock	Capital reserve for transactions with non- controlling interests	Capital reserve for revaluation of fixed assets	Retained earnings	Total
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million
For the three months ended March 31, 2021 (Unaudited)									
Balance as at January 1, 2021	359	1,003	(194)	1	(123)	(49)	300	6,438	7,735
Comprehensive income (loss) for the period									
Profit for the period	-	-	-	-	-	-	-	243	243
Other comprehensive income (loss)	-	-	11	-	-	-	3	(3)	11
Total comprehensive income for the period	-	-	11	-	-	-	3	240	254
Transactions with shareholders recognized directly in equity									
Dividend distributed	-	-	-	-	-	-	-	(257)	(257)
Balance as at March 31, 2021	359	1,003	(183)	1	(123)	(49)	303	6,421	7,732

Condensed Separate Interim Information on Changes in Equity (contd.)

	Share capital and premium	Capital reserve for assets available for sale	Translation reserve for foreign activity	Capital reserve for share-based payment	Treasury stock	Capital reserve for transactions with non- controlling interests	Capital reserve for revaluation of fixed assets	Retained earnings	Total
	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million	NIS million
For the year ended December 31, 2021 (Audited)									
Balance as at January 1, 2021	359	1,003	(194)	1	(123)	(49)	300	6,438	7,735
Comprehensive income (loss) for the year									
Profit for the year	-	-	-	-	-	-	-	1,209	1,209
Other comprehensive income (loss)	-	344	(58)	-	-	-	21	2	309
Total comprehensive income (loss) for the year	-	344	(58)	-	-	-	21	1,211	1,518
Transactions with shareholders recognized directly in equity									
Dividend distributed	-	-	-	-	-	-	-	(357)	(357)
Share-based payment	-	-	-	5	-	-	-	-	5
Purchase of Treasury stock	-	-	-	-	(40)	-	-	-	(40)
Balance as at December 31, 2021	359	1,347	(252)	6	(163)	(49)	321	7,292	8,861

Condensed Separate Interim Information on Cash Flows

		For the three ended March 2022	2021	For the year ended December 31 2021
		(Unaudited)	(Unaudited)	(Audited)
Cash flows from an anating activities	Annex	NIS million	NIS million	NIS million
Cash flows from operating activities Before taxes on income	А	25	8	80
	A	35		80
Taxes paid		(5)	(4)	(27)
Net cash provided by operating activities		30	4	53
Cash flows from investing activities				
Investment in investees		(10)	(62)	(79)
Proceeds from the disposal of fixed assets		-	-	1
Dividends from investees		251	-	70
Financial investments, net		9	(1)	229
Repayment (provision) of loans and capital notes provided to investees		29	5	(165)
Net cash provided by (used in) investment activity		279	(58)	56
Cash flows from financing activity				
Repurchase of Company shares by the Company		(12)	-	(40)
Proceeds of issue of liability notes, net		-	-	247
Dividend to the Company's shareholders		(100)	(107)	(257)
Repayment of loans from banks and others		(13)	-	(454)
Loans received from banks and others		-	-	375
Repayment of lease liabilities		(1)	(1)	(3)
Net cash used for financing activity		(126)	(108)	(132)
Net increase (decrease) in cash and cash equivalents		183	(162)	(23)
Cash and cash equivalents at beginning of the period		202	225	225
Cash and cash equivalents at end of the period		385	63	202

Condensed Separate Interim Information on Cash Flows (contd.)

	For the three March 31	For the year ended December 31	
	2022 2021		2021
	(Unaudited)	(Audited)	
	NIS million	NIS million	NIS million
Annex A - Cash flows from operating activities			
Profit for the period attributed to the Company's shareholders	620	243	1,209
Items not involving cash flows			
Company's share of profits of equity accounted investees	(590)	(222)	(1,116)
Net losses (profits) from financial investments	(6)	1	(17)
Profit from sale of fixed assets	-	-	(1)
Change in fair value of investment property	(2)	(1)	(1)
Financing income, net	(8)	(6)	(12)
Taxes on income	10	7	31
Depreciation and amortization	1	-	2
Changes in other statement of financial position items			
Trade and other receivables	(50)	(22)	(20)
Trade and other payables	60	7	7
Liabilities for employee benefits, net	-	1	(2)
Total adjustments required to present cash flows from operating activities	(585)	(235)	(1,129)
Total cash flows provided by operating activities	35	8	80

NOTE 1 - Method of preparing the separate financial information

A. General

The following is condensed separate interim financial information from the Group's Condensed Consolidated Interim Financial Statements as at March 31, 2022 ("Consolidated Statements") which are published as part of the Periodic Reports ("Condensed Separate Interim Financial Information"), which are presented in accordance with the provisions of Regulation 38D ("the Regulation") and the Tenth Schedule to the Securities (Periodic and Immediate Reports) Regulations, 1970 ("Schedule no. 10"), concerning the condensed separate, interim financial information of the Company. This condensed, separate interim financial information should be read in conjunction with the separate financial information as at December 31, 2021, and with the consolidated financial statements.

B. Definitions

The Company	-	Harel Insurance Investments & Financial Services Ltd.
Consolidated companies / subsidiaries	-	Companies, including partnerships, whose reports are fully consolidated, directly or indirectly, with the reports of the Company.
Investee companies	-	Consolidated companies and companies, including partnerships, in which the Company's investment therein is included, directly or indirectly, in the financial statements on the equity basis.
Date of the Report	-	The date of the Statement of Financial Position

C. Method of preparing the financial information

The separate financial information was prepared in accordance with the accounting policy detailed in Note 1 to the Company's separate annual financial statements.

NOTE 2 - Material relationships, commitments and transactions with investees

- 1. As part of the permit to control and hold the means of control in insurers, the Company undertook to inject NIS 120 million into Harel Insurance should Harel Insurance fail to satisfy the regulatory capital requirements applicable to it in accordance with the Solvency model (SCR including transitional provisions). This undertaking is irrevocable and was in force until March 2022.
- 2. On the distribution of a dividend by Harel Insurance, see Note 8 to the consolidated financial statements.
- 3. In the Reporting Period, Harel Mutual Funds Ltd., a subsidiary of Harel Finance, a company wholly owned by the Company, made partial repayment of a capital note in the amount of NIS 24 million. The repayment was made from the independent sources of Harel Mutual Funds Ltd.
- 4. In the Reporting Period, Harel Finance, a company wholly owned by the Company, made partial repayment of a capital note in the amount of NIS 6 million. The repayment was made from the independent sources of Harel Finance.

NOTE 3 – Material events in the Reporting Period

- 1. On March 28, 2022, the Company's Board of Directors approved the distribution of a cash dividend in the amount of NIS 300 million (NIS 1.41 per share). The Board of Directors made its decision after taking into account the Company's financial results as at December 31, 2021. The Board of Directors was presented with information on the distributable profits, capital surpluses of the Company's subsidiaries and the Group's cash requirements, in various scenarios. The Board of Directors reviewed the Company's compliance with the profit test and solvency test prescribed in Section 203(a) of the Companies Law. Following this review, the Board of Directors confirmed that the Company was in compliance with the distribution test. The dividend was paid on April 26, 2022.
- 2. On the repurchase of shares performed as part of a share repurchase plan approved by the Company's Board of Directors on June 30, 2021, see Note 8 to the consolidated financial statements.
- 3. On affirmation of a rating for the Company and Series 1 bonds issued by the Company, by Midroog, see Note 6 to the consolidated financial statements.
- 4. On the expected termination of office by the Corporate Counsel and appointment of a Corporate Counsel, see Note 9 to the consolidated financial statements.



Harel Insurance Investments and Financial Services Ltd.

Report concerning the effectiveness of internal control over financial reporting and disclosure

Quarterly report concerning the effectiveness of the internal control over financial reporting and disclosure as per Regulation 38C(a)

Management, under the oversight of the Board of Directors of Harel Insurance Investments and Financial Services Ltd. ("the Company"), is responsible for defining and maintaining due internal control over the Company's financial reporting and disclosure.

In this instance, management consists of:

- A. Mr. Michel Siboni CEO of the Company, Chairman of the Board of Directors of Harel Insurance Company Ltd..
- B. Mr. Arik Peretz the Company's VP Finance, Deputy CEO and Head of the Finance and Resources Division of Harel Insurance Company Ltd,.
- C. Ms. Nataly Mishan-Zakai General Counsel to the Company and the Group's companies, deputy CEO of Harel Insurance Company Ltd.
- D. Mr. Sami Babecov VP of the Company and manager of the Group's investments, deputy CEO and manager of the investment division of Harel Insurance Company Ltd.
- E. Ms. Osnat Manor Zisman Internal Auditor of the Company and companies in the Group.
- F. Mr. Nir Cohen CEO of Harel Insurance Company Ltd.
- G. Mr. Tal Kedem CEO of Harel Finance Holdings Ltd.
- H. Mr. Tomer Goldberg Director of the Group's strategic and alternative investments.

Internal control over financial reporting and disclosure includes the Company's existing controls and procedures that were planned by the general manager and the most senior financial officer or are monitored by them or by the person who actually performs these duties, under the oversight of the Company's board of directors. The purpose of these controls and procedures is to provide a reasonable measure of assurance as to the reliability of financial reporting and the preparation of the financial statements pursuant to the provisions of the law, and to ensure that the information that the Company is required to disclose in its published reports in accordance with the provisions of the law, is collected, processed, summarized and reported on the dates and in the format prescribed by law.

Among other things, the internal control consists of controls and procedures designed to ensure that the information that the Company is required to disclose, as noted, is accumulated and submitted to the Company's management, including to the CEO and most senior financial officer, or to the person who actually performs these duties, so as to ensure that decisions are made at the appropriate time, with respect to the disclosure requirement.

Due to its inherent limitations, internal control over financial reporting and disclosure is not intended to provide absolute assurance that a misstatement or omission of information in the report can be prevented or detected.

With respect to the assessment of the internal control over financial reporting, Harel Insurance Company Ltd. and the Company's subsidiaries are financial institutions governed by the instructions of the Commissioner of the Capital Market, Insurance and Savings in the Ministry of Finance.

In relation to the internal control in the aforementioned subsidiaries, the Company applies the following instructions:

- Financial Institutions Circular 2010-9-7 from November 2010 "Internal control over financial reporting attestations, statements, and disclosures";
- Financial Institutions Circular 2010-9-6 from November 2010 "Management's responsibility for the internal control over financial reporting Amendment" (amendment to Financial Institutions Circular 2009-9-10);
- Financial Institutions Circular 2009-9-10, from June 2009 "Management's responsibility for the internal control over financial reporting".

In the quarterly report concerning the effectiveness of the internal control over financial reporting and disclosure that was included in the periodic report for the period ended September 30, 2020 (hereinafter – the last quarterly report on internal control), the internal control was found to be effective.

Prior to the date of the report, the Board of Directors and management received no information regarding any event or matter that might change the assessment of the effectiveness of the internal control, as found in the last quarterly report on internal control;

At the date of the report, based on the information in the last quarterly report on internal control, and based on information submitted to management and the Board of Directors, as noted above, the internal control is effective.

Certification

I, Michel Siboni, hereby certify that:

- 1. I have reviewed the quarterly report of Harel Insurance Investments and Financial Services Ltd. (hereinafter the Company) for Q1 2022 ("the Reports");
- 2. Based on my knowledge, the Reports contains no misstatement of a material fact nor do they omit any statement of a material fact necessary to ensure that the presentations that they contain, in light of the circumstances under which such presentations were included, shall not be misleading with respect to the period covered in the Reports;
- 3. Based on my knowledge, the financial statements and other financial information contained in the Reports reasonably reflect, in all material respects, the financial position, results of operations, and cash flows of the Company at the dates and periods covered in the Reports;
- 4. Based on my most recent assessment of the internal control over financial reporting and disclosure, I disclosed to the auditors, to the Board of Directors and the Audit Committee and Financial Reports Committee of the Company:
 - A. Any significant deficiencies and material weaknesses in the determination or application of the internal control over financial reporting and disclosure that might reasonably compromise the Insurance Company's ability to record, process, summarize and report financial information in a manner that may cast doubt on the reliability of the financial reporting and preparation of the financial reports pursuant to the provisions of the law; and –
 - B. Any fraud, whether material or immaterial, that involves the General Manager (CEO) or any person directly accountable to him or other employees who hold a significant role in the internal control over financial reporting and disclosure;
- 5. I, myself or together with others in the Company:
 - A. Defined controls and procedures, or ensured that such controls and procedures are determined and in place under my oversight, for the purpose of ensuring that material information relating to the Company, including its subsidiaries as they are defined in the Securities (Annual Financial Reports) Regulations, 2010, is brought to my attention by others in the Company and the subsidiaries, particularly during the preparation of the Report; and -
 - B. Defined controls and procedures, or ensured that such controls and procedures are determined and in place under my oversight, for the purpose of providing a reasonable measure of certainty as to the reliability of the financial reporting and to ensure that the financial reports are prepared in accordance with the provisions of the law, including in accordance with generally accepted accounting standards;
 - C. No event or matter which took place during the period between the date of the last report (quarterly or periodic, as applicable) and the date of this report was brought to my attention, that might alter the conclusion of the Board of Directors and Management in relation to the effectiveness of the Company's internal control over financial reporting and disclosure.

The foregoing shall not derogate from my responsibility or from the responsibility of any other person, under any law.

May 30,2022

Michel Siboni CEO

Certification

I, Arik Peretz, hereby certify that:

- 1. I have reviewed the interim financial statements and other financial information contained in the interim financial statements of Harel Insurance Investments and Financial Services Ltd. ("the Company") for Q1 2022 ("the Reports" or "the Interim Reports");
- 2. Based on my knowledge, the interim financial statements and other financial information contained in the Interim Reports contain no misstatement of a material fact nor do they omit any statement of a material fact necessary to ensure that the statements they contain, in light of the circumstances under which such statements were included, shall not be misleading with respect to the period covered in the Reports;
- 3. Based on my knowledge, the Interim Reports and other financial information contained in the Interim Reports reasonably reflect, in all material respects, the financial position, results of operations, and cash flows of the Company at the dates and for the periods covered in the Reports;
- 4. Based on my most recent assessment of the internal control over financial reporting and disclosure, I disclosed to the auditors, to the Board of Directors and the Audit Committee and Financial Reports Committee of the Company:
 - A. Any significant deficiencies and material weaknesses in the determination or application of the internal control over financial reporting and disclosure to the extent that it relates to the interim financial statements and to any other information contained in the Interim Reports, that might reasonably compromise the Company's ability to record, process, summarize or report financial information in a manner that may cast doubt on the reliability of the financial reporting and preparation of the financial reports pursuant to the provisions of the law; and –
 - B. Any fraud, whether material or immaterial, that involves the General Manager (CEO) or any person directly accountable to him or other employees who hold a significant role in the internal control over financial reporting and disclosure;
- 5. I, myself or together with others in the Company:
 - A. Defined controls and procedures, or ensured that such controls and procedures are determined and in place under my oversight, for the purpose of ensuring that material information relating to the Company, including its subsidiaries as they are defined in the Securities (Annual Financial Reports) Regulations, 2010, is brought to my attention by others in the Company and the subsidiaries, particularly during the preparation of the Report; and -
 - B. Defined controls and procedures, or ensured that such controls and procedures are determined and in place under my oversight, for the purpose of providing a reasonable measure of certainty as to the reliability of the financial reporting and to ensure that the financial reports are prepared in accordance with the provisions of the law, including in accordance with generally accepted accounting standards;
 - C. No event or matter that took place during the period between the date of the last report (quarterly or periodic, as applicable) and the date of this report, in relation to the interim financial statements and to any other financial information contained in the Interim Financial Reports, was brought to my attention, that might, in my opinion, alter the conclusion of the Board of Directors and Management in relation to the effectiveness of the Corporation's internal control over financial reporting and disclosure.

The foregoing shall not derogate from my responsibility or from the responsibility of any other person, under any law.

May 30, 2022

Arik Peretz CFO