

# ANNUAL STATEMENT

OF THE

**Insurors Indemnity Select Insurance Company**

TO THE

**Insurance Department**

OF THE

**STATE OF**

Texas

FOR THE YEAR ENDED  
DECEMBER 31, 2024

PROPERTY AND CASUALTY

# 2024



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2024

OF THE CONDITION AND AFFAIRS OF THE

### Insurors Indemnity Select Insurance Company

NAIC Group Code 3279 3279 NAIC Company Code 11496 Employer's ID Number 76-0702699  
(Current) (Prior)

Organized under the Laws of Texas, State of Domicile or Port of Entry TX  
Country of Domicile United States of America

Incorporated/Organized 08/12/2002 Commenced Business 05/01/2003

Statutory Home Office 225 South Fifth Street, Waco, TX, US 76701  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 225 South Fifth Street  
(Street and Number)  
Waco, TX, US 76701 254-759-3727  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 32577 Waco, TX, US 76703  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 225 South Fifth Street  
(Street and Number)  
Waco, TX, US 76701 254-759-3727  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.insurorsindemnity.com

Statutory Statement Contact Tammy Tieperman 254-759-3727  
(Name) (Area Code) (Telephone Number)  
Ttieperman@insurorsindemnity.com  
(E-mail Address) (FAX Number)

#### OFFICERS

President & CEO Dave E Talbert Treasurer Thomas G Chase Jr.  
Secretary Tammy Tieperman

#### OTHER

Somers W. Goodman, Vice President - Surety Michael Viereg, Vice President - Claims Rhett Dawson, Vice President - P&C & Bus Dev  
Tammy Tieperman, Vice President - Accounting

#### DIRECTORS OR TRUSTEES

Dave E Talbert Thomas G Chase Jr Felicia C Goodman  
William R Vance William A Nesbitt Lyndon L Olson  
Thomas George Chase III

State of Texas SS  
County of McLennan

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

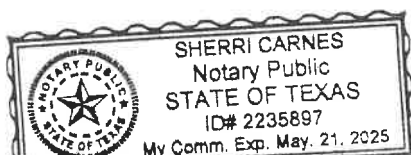
Dave E Talbert  
Dave E. Talbert  
President & CEO

Tammy Tieperman  
Tammy Tieperman  
Secretary

Thomas G. Chase, Jr.  
Thomas G. Chase, Jr.  
Treasurer

Subscribed and sworn to before me this 27th day of February 2025  
Sherril Carnes

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



ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	5,805,263		5,805,263	2,388,385
2. Stocks (Schedule D):				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	10,106,795		10,106,795	9,262,422
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....			0	0
3.2 Other than first liens.....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ .....2,936,913 , Schedule E - Part 1), cash equivalents (\$ .....24,243 , Schedule E - Part 2) and short-term investments (\$ .....0 , Schedule DA) .....	2,961,156		2,961,156	720,016
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives (Schedule DB) .....			0	0
8. Other invested assets (Schedule BA) .....			0	0
9. Receivable for securities .....			0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	18,873,214	0	18,873,214	12,370,823
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	51,266		51,266	13,329
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	1,667,725		1,667,725	633,264
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	109,003		109,003	48,509
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon ....			0	0
18.2 Net deferred tax asset .....			0	0
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....			0	4,860,000
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other-than-invested assets .....	366,667	0	366,667	416,667
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	21,067,875	0	21,067,875	18,342,592
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	21,067,875	0	21,067,875	18,342,592
DETAILS OF WRITE-INS				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Goodwill of purchase of Roadrunner Indemnity Company .....	366,667		366,667	416,667
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	366,667	0	366,667	416,667

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8) .....	0	0
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6) .....	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9) .....	0	0
4. Commissions payable, contingent commissions and other similar charges .....	232,433	138,972
5. Other expenses (excluding taxes, licenses and fees) .....	14,374	5,716
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	7,705	2,020
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses)) .....	237,799	90,330
7.2 Net deferred tax liability .....		
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ ..... 3,619,000 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... 0 for medical loss ratio rebate per the Public Health Service Act) .....		
10. Advance premium .....	48,891	28,535
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	830,621	206,504
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20) .....	0	0
14. Amounts withheld or retained by company for account of others .....		
15. Remittances and items not allocated .....		
16. Provision for reinsurance (including \$ ..... 0 certified) (Schedule F, Part 3, Column 78) .....	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....	88,046	28,141
20. Derivatives .....	0	0
21. Payable for securities .....		
22. Payable for securities lending .....		
23. Liability for amounts held under uninsured plans .....		
24. Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	1,459,869	500,218
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	1,459,869	500,218
29. Aggregate write-ins for special surplus funds .....	0	0
30. Common capital stock .....	2,500,000	2,500,000
31. Preferred capital stock .....		
32. Aggregate write-ins for other-than-special surplus funds .....	0	0
33. Surplus notes .....	0	
34. Gross paid in and contributed surplus .....	14,122,422	14,122,422
35. Unassigned funds (surplus) .....	2,985,584	1,219,952
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... ) .....		
36.2 ..... shares preferred (value included in Line 31 \$ ..... ) .....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) .....	19,608,006	17,842,374
38. TOTALS (Page 2, Line 28, Col. 3) .....	21,067,875	18,342,592
DETAILS OF WRITE-INS		
2501. ....		
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) .....	0	0
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) .....	0	0
3201. Guaranty Fund .....		0
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....	0	0
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above) .....	0	0

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....		
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7) .....	0	0
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1) .....	0	0
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2) .....	(680,497)	(105,442)
5. Aggregate write-ins for underwriting deductions .....	0	0
6. Total underwriting deductions (Lines 2 through 5) .....	(680,497)	(105,442)
7. Net income of protected cells .....		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) .....	680,497	105,442
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	334,420	102,118
10. Net realized capital gains (losses) less capital gains tax of \$ ..... (Exhibit of Capital Gains (Losses) ) .....	8,397	
11. Net investment gain (loss) (Lines 9 + 10) .....	342,817	102,118
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ ..... amount charged off \$ ..... ) .....	0	0
13. Finance and service charges not included in premiums .....	92,913	5,855
14. Aggregate write-ins for miscellaneous income .....	0	0
15. Total other income (Lines 12 through 14) .....	92,913	5,855
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) .....	1,116,227	213,415
17. Dividends to policyholders .....		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17) .....	1,116,227	213,415
19. Federal and foreign income taxes incurred .....	194,969	44,817
20. Net income (Line 18 minus Line 19)(to Line 22) .....	921,258	168,598
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) .....	17,842,374	35,352,964
22. Net income (from Line 20) .....	921,258	168,598
23. Net transfers (to) from Protected Cell accounts .....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ .....	844,374	(4,979,651)
25. Change in net unrealized foreign exchange capital gain (loss) .....		
26. Change in net deferred income tax .....		
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) .....		
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) .....	0	0
29. Change in surplus notes .....		
30. Surplus (contributed to) withdrawn from protected cells .....		
31. Cumulative effect of changes in accounting principles .....		
32. Capital changes:		
32.1 Paid in .....		
32.2 Transferred from surplus (Stock Dividend) .....		
32.3 Transferred to surplus .....		
33. Surplus adjustments:		
33.1 Paid in .....	0	(13,116,203)
33.2 Transferred to capital (Stock Dividend) .....		
33.3 Transferred from capital .....		
34. Net remittances from or (to) Home Office .....		
35. Dividends to stockholders .....		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) .....	0	0
37. Aggregate write-ins for gains and losses in surplus .....	0	416,666
38. Change in surplus as regards policyholders for the year (Lines 22 through 37) .....	1,765,632	(17,510,590)
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	19,608,006	17,842,374
DETAILS OF WRITE-INS		
0501. ....		
0502. ....		
0503. ....		
0598. Summary of remaining write-ins for Line 5 from overflow page .....	0	0
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0
1401. ....		
1402. ....		
1403. ....		
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0
3701. GOODWILL ON ROADRUNNER INDEMNITY COMPANY .....		416,666
3702. ....		
3703. ....		
3798. Summary of remaining write-ins for Line 37 from overflow page .....	0	0
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	416,666

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance .....	(389,986)	(153,135)
2. Net investment income .....	278,387	91,756
3. Miscellaneous income .....	92,913	5,855
4. Total (Lines 1 through 3) .....	(18,686)	(55,524)
5. Benefit and loss related payments .....	60,494	31,006
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	(788,301)	(252,150)
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	47,500	0
10. Total (Lines 5 through 9) .....	(680,307)	(221,144)
11. Net cash from operations (Line 4 minus Line 10) .....	661,621	165,620
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	579,821	289,603
12.2 Stocks .....	0	27,238,625
12.3 Mortgage loans .....	0	0
12.4 Real estate .....	0	0
12.5 Other invested assets .....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0
12.7 Miscellaneous proceeds .....	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	579,821	27,528,228
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	3,970,207	212,548
13.2 Stocks .....	0	9,262,422
13.3 Mortgage loans .....	0	0
13.4 Real estate .....	0	0
13.5 Other invested assets .....	0	0
13.6 Miscellaneous applications .....	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	3,970,207	9,474,970
14. Net increase/(decrease) in contract loans and premium notes .....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(3,390,386)	18,053,258
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	(13,116,203)
16.3 Borrowed funds .....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0
16.5 Dividends to stockholders .....	0	0
16.6 Other cash provided (applied) .....	4,969,905	(4,893,188)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	4,969,905	(18,009,391)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	2,241,140	209,487
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	720,016	510,529
19.2 End of period (Line 18 plus Line 19.1) .....	2,961,156	720,016

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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Underwriting and Investment Exhibit - Part 1 - Premiums Earned

**N O N E**

Underwriting and Investment Exhibit - Part 1A - Recapitulation of all Premiums

**N O N E**

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1	Reinsurance Assumed		Reinsurance Ceded		6
	Direct Business (a)	2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	Net Premiums Written Cols. 1+2+3-4-5
1. Fire .....	1,330,086			1,330,086		0
2.1 Allied lines .....	1,883,659			1,883,659		0
2.2 Multiple peril crop .....	0					0
2.3 Federal flood .....	0					0
2.4 Private crop .....	0					0
2.5 Private flood .....	0					0
3. Farmowners multiple peril .....	0					0
4. Homeowners multiple peril .....	3,448,033			3,231,400	216,633	0
5.1 Commercial multiple peril (non-liability portion) .....	1,330,365			1,330,365		0
5.2 Commercial multiple peril (liability portion) .....	274,174			274,174		0
6. Mortgage guaranty .....	0					0
8. Ocean marine .....	0					0
9.1 Inland marine .....	0					0
9.2 Pet insurance plans .....	93,575			93,575		0
10. Financial guaranty .....	0					0
11.1 Medical professional liability - occurrence .....	0					0
11.2 Medical professional liability - claims- made .....	0					0
12. Earthquake .....	0					0
13.1 Comprehensive (hospital and medical) individual .....	0					0
13.2 Comprehensive (hospital and medical) group .....	0					0
14. Credit accident and health (group and individual) .....	0					0
15.1 Vision only .....	0					0
15.2 Dental only .....	0					0
15.3 Disability income .....	0					0
15.4 Medicare supplement .....	0					0
15.5 Medicaid Title XIX .....	0					0
15.6 Medicare Title XVIII .....	0					0
15.7 Long-term care .....	0					0
15.8 Federal employees health benefits plan .....	0					0
15.9 Other health .....	0					0
16. Workers' compensation .....	0					0
17.1 Other liability - occurrence .....	1,387			1,387		0
17.2 Other liability - claims-made .....	0					0
17.3 Excess workers' compensation .....	0					0
18.1 Products liability - occurrence .....	1,126			1,126		0
18.2 Products liability - claims-made .....	0					0
19.1 Private passenger auto no-fault (personal injury protection) .....	0					0
19.2 Other private passenger auto liability.....	0					0
19.3 Commercial auto no-fault (personal injury protection) .....	0					0
19.4 Other commercial auto liability.....	0					0
21.1 Private passenger auto physical damage .....	0					0
21.2 Commercial auto physical damage .....	0					0
22. Aircraft (all perils) .....	0					0
23. Fidelity .....	0					0
24. Surety .....	0					0
26. Burglary and theft .....	0					0
27. Boiler and machinery .....	0					0
28. Credit .....	0					0
29. International .....	0					0
30. Warranty .....	0					0
31. Reinsurance - nonproportional assumed property .....	XXX					0
32. Reinsurance - nonproportional assumed liability .....	XXX					0
33. Reinsurance - nonproportional assumed financial lines .....	XXX					0
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0
35. TOTALS	8,362,405	0	0	8,145,772	216,633	0
DETAILS OF WRITE-INS						
3401. ....						
3402. ....						
3403. ....						
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis?    Yes [ X ]    No [   ]  
If yes:    1. The amount of such installment premiums \$ .....  
            2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$ .....



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1	2	3	4				
	Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A , Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire .....	13,806		13,806	0	0	0	0	0.0
2.1 Allied lines .....	467,640		467,640	0	0	0	0	0.0
2.2 Multiple peril crop .....	0			0	0	0	0	0.0
2.3 Federal flood .....	0			0	0	0	0	0.0
2.4 Private crop .....	0			0	0	0	0	0.0
2.5 Private flood .....	0			0	0	0	0	0.0
3. Farmowners multiple peril .....	0			0	0	0	0	0.0
4. Homeowners multiple peril .....	764,596		764,596	0	0	0	0	0.0
5.1 Commercial multiple peril (non-liability portion) .....	69,180		69,180	0	0	0	0	0.0
5.2 Commercial multiple peril (liability portion) .....	0			0	0	0	0	0.0
6. Mortgage guaranty .....	0			0	0	0	0	0.0
8. Ocean marine .....	0			0	0	0	0	0.0
9.1 Inland marine .....	0			0	0	0	0	0.0
9.2 Pet insurance plans .....	0			0	0	0	0	0.0
10. Financial guaranty .....	0			0	0	0	0	0.0
11.1 Medical professional liability - occurrence .....	0			0	0	0	0	0.0
11.2 Medical professional liability - claims-made .....	0			0	0	0	0	0.0
12. Earthquake .....	0			0	0	0	0	0.0
13.1 Comprehensive (hospital and medical) individual .....	0			0	0	0	0	0.0
13.2 Comprehensive (hospital and medical) group .....	0			0	0	0	0	0.0
14. Credit accident and health (group and individual) .....	0			0	0	0	0	0.0
15.1 Vision only .....	0			0	0	0	0	0.0
15.2 Dental only .....	0			0	0	0	0	0.0
15.3 Disability income .....	0			0	0	0	0	0.0
15.4 Medicare supplement .....	0			0	0	0	0	0.0
15.5 Medicaid Title XIX .....	0			0	0	0	0	0.0
15.6 Medicare Title XVIII .....	0			0	0	0	0	0.0
15.7 Long-term care .....	0			0	0	0	0	0.0
15.8 Federal employees health benefits plan .....	0			0	0	0	0	0.0
15.9 Other health .....	0			0	0	0	0	0.0
16. Workers' compensation .....	0			0	0	0	0	0.0
17.1 Other liability - occurrence .....	0			0	0	0	0	0.0
17.2 Other liability - claims-made .....	0			0	0	0	0	0.0
17.3 Excess workers' compensation .....	0			0	0	0	0	0.0
18.1 Products liability - occurrence .....	0			0	0	0	0	0.0
18.2 Products liability - claims-made .....	0			0	0	0	0	0.0
19.1 Private passenger auto no-fault (personal injury protection) .....	0			0	0	0	0	0.0
19.2 Other private passenger auto liability.....	0			0	0	0	0	0.0
19.3 Commercial auto no-fault (personal injury protection) .....	0			0	0	0	0	0.0
19.4 Other commercial auto liability.....	0			0	0	0	0	0.0
21.1 Private passenger auto physical damage .....	0			0	0	0	0	0.0
21.2 Commercial auto physical damage .....	0			0	0	0	0	0.0
22. Aircraft (all perils) .....	0			0	0	0	0	0.0
23. Fidelity .....	0			0	0	0	0	0.0
24. Surety .....	0			0	0	0	0	0.0
26. Burglary and theft .....	0			0	0	0	0	0.0
27. Boiler and machinery .....	0			0	0	0	0	0.0
28. Credit .....	0			0	0	0	0	0.0
29. International .....	0			0	0	0	0	0.0
30. Warranty .....	0			0	0	0	0	0.0
31. Reinsurance - nonproportional assumed property .....	XXX			0	0	0	0	0.0
32. Reinsurance - nonproportional assumed liability .....	XXX			0	0	0	0	0.0
33. Reinsurance - nonproportional assumed financial lines .....	XXX			0	0	0	0	0.0
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0.0
35. TOTALS .....	1,315,222	0	1,315,222	0	0	0	0	0.0
DETAILS OF WRITE-INS .....								
3401. ....								
3402. ....								
3403. ....								
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1	2	3	4	5	6	7		
	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1. Fire .....				0	32,126		32,126	0	
2.1 Allied lines .....	14,407		14,407	0	52,128		52,128	0	
2.2 Multiple peril crop .....				0				0	
2.3 Federal flood .....				0				0	
2.4 Private crop .....				0				0	
2.5 Private flood .....				0				0	
3. Farmowners multiple peril .....				0				0	
4. Homeowners multiple peril .....	6,500		6,500	0	73,478		73,478	0	
5.1 Commercial multiple peril (non-liability portion) .....	33,218		33,218	0	50,955		50,955	0	
5.2 Commercial multiple peril (liability portion) .....				0	18,156		18,156	0	
6. Mortgage guaranty .....				0				0	
8. Ocean marine .....				0				0	
9.1 Inland marine .....				0				0	
9.2 Pet insurance plans .....				0	2,303		2,303	0	
10. Financial guaranty .....				0				0	
11.1 Medical professional liability - occurrence .....				0				0	
11.2 Medical professional liability - claims-made .....				0				0	
12. Earthquake .....				0				0	
13.1 Comprehensive (hospital and medical) individual .....				0				(a)	0
13.2 Comprehensive (hospital and medical) group .....				0				(a)	0
14. Credit accident and health (group and individual) .....				0					0
15.1 Vision only .....				0				(a)	0
15.2 Dental only .....				0				(a)	0
15.3 Disability income .....				0				(a)	0
15.4 Medicare supplement .....				0				(a)	0
15.5 Medicaid Title XIX .....				0				(a)	0
15.6 Medicare Title XVIII .....				0				(a)	0
15.7 Long-term care .....				0				(a)	0
15.8 Federal employees health benefits plan .....				0				(a)	0
15.9 Other health .....				0				(a)	0
16. Workers' compensation .....				0					0
17.1 Other liability - occurrence .....				0	204		204	0	
17.2 Other liability - claims-made .....				0				0	
17.3 Excess workers' compensation .....				0				0	
18.1 Products liability - occurrence .....				0	198		198	0	
18.2 Products liability - claims-made .....				0				0	
19.1 Private passenger auto no-fault (personal injury protection) .....				0				0	
19.2 Other private passenger auto liability.....				0				0	
19.3 Commercial auto no-fault (personal injury protection) .....				0				0	
19.4 Other commercial auto liability.....				0				0	
21.1 Private passenger auto physical damage .....				0				0	
21.2 Commercial auto physical damage .....				0				0	
22. Aircraft (all perils) .....				0				0	
23. Fidelity .....				0				0	
24. Surety .....				0				0	
26. Burglary and theft .....				0				0	
27. Boiler and machinery .....				0				0	
28. Credit .....				0				0	
29. International .....				0				0	
30. Warranty .....				0				0	
31. Reinsurance - nonproportional assumed property .....	XXX			0	XXX			0	
32. Reinsurance - nonproportional assumed liability .....	XXX			0	XXX			0	
33. Reinsurance - nonproportional assumed financial lines .....	XXX			0	XXX			0	
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0
35. TOTALS .....	54,125	0	54,125	0	229,548	0	229,548	0	0
DETAILS OF WRITE-INS									
3401. ....									
3402. ....									
3403. ....									
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0

(a) Including \$ ..... for present value of life indemnity claims reported in Lines 13 and 15.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct .....	268,296			268,296
1.2 Reinsurance assumed .....				0
1.3 Reinsurance ceded .....	268,296			268,296
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3) .....	0	0	0	0
2. Commission and brokerage:				
2.1 Direct excluding contingent .....		1,989,212		1,989,212
2.2 Reinsurance assumed, excluding contingent .....				0
2.3 Reinsurance ceded, excluding contingent .....		3,139,925		3,139,925
2.4 Contingent - direct .....				0
2.5 Contingent - reinsurance assumed .....				0
2.6 Contingent - reinsurance ceded .....				0
2.7 Policy and membership fees .....				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) ..	0	(1,150,713)	0	(1,150,713)
3. Allowances to managers and agents .....		136,692	3,115	139,807
4. Advertising .....		3		3
5. Boards, bureaus and associations .....		16,686		16,686
6. Surveys and underwriting reports .....				0
7. Audit of assureds' records .....				0
8. Salary and related items:				
8.1 Salaries .....		131,520	2,997	134,517
8.2 Payroll taxes .....		10,067	229	10,296
9. Employee relations and welfare .....		5,559	127	5,686
10. Insurance .....		12,577	287	12,864
11. Directors' fees .....				0
12. Travel and travel items .....		10		10
13. Rent and rent items .....				0
14. Equipment .....				0
15. Cost or depreciation of EDP equipment and software .....				0
16. Printing and stationery .....		50,325	7	50,332
17. Postage, telephone and telegraph, exchange and express .....		157	6	163
18. Legal and auditing .....		90,639	1,431	92,070
19. Totals (Lines 3 to 18) .....	0	454,235	8,199	462,434
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....		7,685		7,685
20.2 Insurance department licenses and fees .....		8,296		8,296
20.3 Gross guaranty association assessments .....				0
20.4 All other (excluding federal and foreign income and real estate) .....				0
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) .....	0	15,981	0	15,981
21. Real estate expenses .....				0
22. Real estate taxes .....				0
23. Reimbursements by uninsured plans .....				0
24. Aggregate write-ins for miscellaneous expenses .....	0	0	0	0
25. Total expenses incurred .....	0	(680,497)	8,199	(a) (672,298)
26. Less unpaid expenses - current year .....	0			0
27. Add unpaid expenses - prior year .....				0
28. Amounts receivable relating to uninsured plans, prior year .....				0
29. Amounts receivable relating to uninsured plans, current year .....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	0	(680,497)	8,199	(672,298)
DETAILS OF WRITE-INS				
2401. ....				
2402. ....				
2403. ....				
2498. Summary of remaining write-ins for Line 24 from overflow page .....	0	0	0	0
2499. Totals (Lines 2401 through 2403 plus 2498)(Line 24 above)	0	0	0	0

(a) Includes management fees of \$ 351,544 to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds .....	(a) ..... 43,477	..... 76,195
1.1	Bonds exempt from U.S. tax .....	(a) .....	.....
1.2	Other bonds (unaffiliated) .....	(a) ..... 153,811	..... 159,030
1.3	Bonds of affiliates .....	(a) .....	.....
2.1	Preferred stocks (unaffiliated) .....	(b) .....	.....
2.11	Preferred stocks of affiliates .....	(b) .....	.....
2.2	Common stocks (unaffiliated) .....	.....	.....
2.21	Common stocks of affiliates .....	.....	.....
3.	Mortgage loans .....	(c) .....	.....
4.	Real estate .....	(d) .....	.....
5	Contract loans .....	.....	.....
6	Cash, cash equivalents and short-term investments .....	(e) ..... 107,394	..... 107,394
7	Derivative instruments .....	(f) .....	.....
8.	Other invested assets .....	.....	.....
9.	Aggregate write-ins for investment income .....	..... 0	..... 0
10.	Total gross investment income .....	304,682	342,619
11.	Investment expenses .....		(g) ..... 8,199
12.	Investment taxes, licenses and fees, excluding federal income taxes .....		(g) ..... 0
13.	Interest expense .....		(h) .....
14.	Depreciation on real estate and other invested assets .....		(i) .....
15.	Aggregate write-ins for deductions from investment income .....		..... 0
16.	Total deductions (Lines 11 through 15) .....		..... 8,199
17.	Net investment income (Line 10 minus Line 16)		334,420
DETAILS OF WRITE-INS			
0901.	.....		
0902.	.....		
0903.	.....		
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	0	0
1501.	.....		
1502.	.....		
1503.	.....		
1598.	Summary of remaining write-ins for Line 15 from overflow page .....		0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$ .....18,520 accrual of discount less \$ .....424 amortization of premium and less \$ ..... 9,026 paid for accrued interest on purchases.
- (b) Includes \$ ..... 0 accrual of discount less \$ ..... 0 amortization of premium and less \$ ..... 0 paid for accrued dividends on purchases.
- (c) Includes \$ ..... 0 accrual of discount less \$ ..... 0 amortization of premium and less \$ ..... paid for accrued interest on purchases.
- (d) Includes \$ ..... for company's occupancy of its own buildings; and excludes \$ ..... interest on encumbrances.
- (e) Includes \$ ..... accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued interest on purchases.
- (f) Includes \$ ..... accrual of discount less \$ ..... amortization of premium.
- (g) Includes \$ ..... investment expenses and \$ ..... investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ ..... interest on surplus notes and \$ ..... interest on capital notes.
- (i) Includes \$ .....0 depreciation on real estate and \$ ..... depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds .....	..... 0	..... 0	..... 0	..... 0	..... 0
1.1	Bonds exempt from U.S. tax .....	..... 0	..... 0	..... 0	..... 0	..... 0
1.2	Other bonds (unaffiliated) .....	..... 8,397	..... 0	..... 8,397	..... 0	..... 0
1.3	Bonds of affiliates .....	..... 0	..... 0	..... 0	..... 0	..... 0
2.1	Preferred stocks (unaffiliated) .....	..... 0	..... 0	..... 0	..... 0	..... 0
2.11	Preferred stocks of affiliates .....	..... 0	..... 0	..... 0	..... 0	..... 0
2.2	Common stocks (unaffiliated) .....	..... 0	..... 0	..... 0	..... 0	..... 0
2.21	Common stocks of affiliates .....	..... 0	..... 0	..... 0	..... 844,374	..... 0
3.	Mortgage loans .....	..... 0	..... 0	..... 0	..... 0	..... 0
4.	Real estate .....	..... 0	..... 0	..... 0	..... 0	..... 0
5.	Contract loans .....	..... 0	..... 0	..... 0	..... 0	..... 0
6.	Cash, cash equivalents and short-term investments .....	..... 0	..... 0	..... 0	..... 0	..... 0
7.	Derivative instruments .....	..... 0	..... 0	..... 0	..... 0	..... 0
8.	Other invested assets .....	..... 0	..... 0	..... 0	..... 0	..... 0
9.	Aggregate write-ins for capital gains (losses) .....	..... 0	..... 0	..... 0	..... 0	..... 0
10.	Total capital gains (losses)	8,397	0	8,397	844,374	0
DETAILS OF WRITE-INS						
0901.	.....					
0902.	.....					
0903.	.....					
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	0	0	0	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....			
2. Stocks (Schedule D):			
2.1 Preferred stocks .....			
2.2 Common stocks .....			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....			
3.2 Other than first liens .....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....			
4.2 Properties held for the production of income .....			
4.3 Properties held for sale .....			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....			
6. Contract loans .....			
7. Derivatives (Schedule DB) .....			
8. Other invested assets (Schedule BA) .....			
9. Receivables for securities .....			
10. Securities lending reinvested collateral assets (Schedule DL) .....			
11. Aggregate write-ins for invested assets .....			
12. Subtotals, cash and invested assets (Lines 1 to 11) .....			
13. Title plants (for Title insurers only) .....			
14. Investment income due and accrued .....			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....			
15.3 Accrued retrospective premiums and contracts subject to redetermination .....			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....			
16.2 Funds held by or deposited with reinsured companies .....			
16.3 Other amounts receivable under reinsurance contracts .....			
17. Amounts receivable relating to uninsured plans .....			
18.1 Current federal and foreign income tax recoverable and interest thereon .....			
18.2 Net deferred tax asset .....			
19. Guaranty funds receivable or on deposit .....			
20. Electronic data processing equipment and software .....			
21. Furniture and equipment, including health care delivery assets .....			
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			
23. Receivables from parent, subsidiaries and affiliates .....			
24. Health care and other amounts receivable .....			
25. Aggregate write-ins for other-than-invested assets .....			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....			
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
28. Total (Lines 26 and 27)			
DETAILS OF WRITE-INS			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....			
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)			
2501. ....			
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....			
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)			

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of the company are presented on the basis of accounting practices prescribed by the Texas Department of Insurance. The Texas Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of Texas for determining and reporting the financial condition and results of operations. The accompanying financials statements have been prepared in conformity with the NAIC Accounting Practices and procedures Manual. While NAIC SAP has been adopted as a component of permitted practices by the state of Texas, the state has adopted certain practices that differ from those found in NAIC SAP. The Commissioner of Insurance has the right to permit specific practices that deviate from prescribed practices.

	SSAP #	F/S Page	F/S Line #		2024		2023
NET INCOME							
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$	921,258	\$	168,598
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:							
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$	921,258	\$	168,598
SURPLUS							
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$	19,608,006	\$	17,842,374
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:							
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$	19,608,006	\$	17,842,374

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. Actual results could differ from those estimates. IBNR ESTIMATES HAVE BEEN UPDATED FOR LOSS DEVELOPMENT FACTORS PER ACTUARIAL INPUT

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned Premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro-rate methods for direct business.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the company uses the following accounting policies:

- (1) Basis for Short-Term Investments  
The company has short-term investments that is carried at amortized cost of \$51,265.75
- (2) Basis for Bonds and Amortization Schedule  
Bonds not backed by other loans are stated at amortized cost using the scientific method
- (3) Basis for Common Stocks  
The company does not have any common stocks at this time
- (4) Basis for Preferred Stocks  
The company does not have any preferred stocks at this time.
- (5) Basis for Mortgage Loans  
The company does not have any Mortgage Loans
- (6) Basis of Loan-Backed Securities and Adjustment Methodology  
Loan-backed securities are stated at amortized cost.
- (7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities  
The company carries Roadrunner Indemnity Company on an equity basis.
- (8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities  
The company has no investment in joint ventures, partnerships or limited liability companies
- (9) Accounting Policies for Derivatives  
The company has no derivative instruments
- (10) Anticipated Investment Income used in Premium Deficiency Calculation  
The company anticipates invesment income as a factor in the premium deficiency calculation in accordance with SSAP No 53, PC Contracts - Premiums.
- (11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss / Claim Adjustments Expenses  
Unpaid losses and loss adjustment expenses includes an amount determined from individual case estimates and loss reports and an amount based on past experiences, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequated, the ultimate liability may be in excess of or less than the amount provided.  
The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.
- (12) Changes in Capitalization Policy and predefined thresholds from prior period  
The company has not modified its capitalization policy
- (13) Method Used to Estimated Pharmaceutical Rebate Receivables  
The company does not have any pharmaceutical rebate receivables

D. Going Concern

The company has no substantial doubt about the entity's ability to continue as a going concern

NOTES TO FINANCIAL STATEMENTS

NOTE 2 Accounting Changes and Corrections of Errors

The company has no accounting changes and corrections of errors to report

NOTE 3 Business Combinations and Goodwill

Effective 12/31/2023, Insurors Financial Corp. (IFC) reorganized its three insurance companies and injected an additional \$3,000,000 into the group to affect an increase in surplus in Insurors Indemnity Company (Company), the resulting top-tier company. Prior to the reorganization, Insurors Indemnity Select Insurance Company (Select) was the parent of IIC which was the parent of Roadrunner Indemnity Company (Roadrunner). Post reorganization, Company is the parent of Select which is now the parent of Roadrunner. To accomplish this, Select acquired all of the outstanding common stock in Roadrunner via a transfer of such stock by Company. IFC acquired all of the outstanding common stock in Company through a transfer of such stock by Select. Company acquired all of the outstanding common stock in Select through a contribution of such stock by IFC. Prior to the reorganization, Insurors Financial Corp. contributed \$3,000,000 to Select as surplus. Immediately following the reorganization, Insurors Indemnity Company contributed \$1,860,000 to Select. The transactions were obligations that were satisfied on January xx, 2024 by cash payments.

A. Statutory Purchase Method

The transaction was accounted for as a statutory purchase, and reflects the following:

1	2	3	4	5
Purchased Entity	Acquisition Date	Cost of Acquired Entity	Original Amount of Goodwill	Original Amount of Admitted Goodwill
Roadrunner Indemnity Company	12/31/2023	\$ 9,262,422	\$ 500,000	\$ 500,000
Total	XXX	\$ 9,262,422	\$ 500,000	\$ 500,000

1	6	7	8	9
Purchased Entity	Admitted Goodwill as of the Reporting Date	Amortized During the Reporting Period	Book Value of SCA	Admitted Goodwill Col. 6/Col. 8
Roadrunner Indemnity Company	\$ 366,667	\$ 50,000	\$ 10,106,795	3.6%
Total	\$ 366,667	\$ 50,000	\$ 10,106,795	XXX

B. Statutory Merger

none

C. Impairment Loss

none

D. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

none

NOTE 4 Discontinued Operations

The company has no discontinued operations

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans  
The company has no mortgage loans at this time

B. Debt Restructuring  
The company has no debt restructuring

C. Reverse Mortgages  
The company has no reverse mortgages

D. Loan-Backed Securities  
(1) Prepayment assumptions are obtained by our portfolio manager from broker dealer survey values. These assumptions are consistent with the current interest rate and economic environment. Bonds in an unrealized loss position are regularly reviewed for other-than-temporary declines in value. Factors considered in determining whether a decline is other-than-temporary include the length of time a bond has been in an unrealized loss position and the reasons for the decline in value. Assessments include judgments about an obligator's or guarantor's value for any collateral backing the obligations and the macro-economic and micro-economic outlooks for specific underlying collateral such as prepayment rates, default and recovery rates, existence of subordinated classes capable of absorbing losses and third party servicing abilities.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions  
The company has no repurchase agreements or securities lending transactions

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing  
The company has no repurchase agreement transactions accounted for as secured borrowing

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing  
The company has no reverse repurchase agreement transactions accounted for as secured borrowing

H. Repurchase Agreements Transactions Accounted for as a Sale  
The company has no repurchase agreement transactions accounted for as a sale

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale  
The company has no reverse repurchase agreement transactions accounted for as a sale

J. Real Estate  
(1) The company does not recognize any impairment loss on real estate  
  
(2) The company has not sold any real estate investment

NOTES TO FINANCIAL STATEMENTS

(3) The company has no plans to sale for an investment in real estate.

(4) The company does not engage in retail land sales operations.

(5) The company has no mortgage loan real estate

K. Low Income Housing tax Credits (LIHTC)  
The company has no investments in low income housing tax credits

L. Restricted Assets  
  
The company does not have any restricted assets

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

The company does not have any assets pledged as collateral not captured in other categories.

3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

The company does not have any other restricted assets

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

The company does not have any collateral received and reflected as assets within the reporting entity's financial statements

M. Working Capital Finance Investments  
The company has no working capital finance investments

N. Offsetting and Netting of Assets and Liabilities  
  
The company has no derivative, repurchase and reverse repurchase securities

O. 5GI Securities  
The company does not have any 5GI securities

P. Short Sales  
The company does not have any short sales

Q. Prepayment Penalty and Acceleration Fees  
The company does not have any prepayment penalty or acceleration fees

R. Reporting Entity's Share of Cash Pool by Asset Type  
The company does not have any entity share of cash pool by asset type

S. Aggregate Collateral Loans by Qualifying Investment Collateral  
  
The Company has no Collateral Loans by qualifying investment collateral

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies  
The company has no joint ventures, partnerships or limited liability companies

NOTE 7 Investment Income  
The Company has no non admitted investment Income during the reporting period

NOTE 8 Derivative Instruments  
The company has no derivative Instruments

NOTE 9 Income Taxes  
Net tax asset and liability is recognized. The DTA represents the tax effect of the cumulative haircuts incurred on the growth in loss and unearned premium reserves. The DTL represents the tax effect on the cumulative unrealized gain or loss in the capital and surplus.

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:  
1. The company does not have any net deferred tax asset at the end of the current period

B. The company does not have any unrecognized deferred tax liabilities

C. Current income taxes incurred consist of the following major components:

1. Current Income Tax
- (a) Federal
- (b) Foreign
- (c) Subtotal (1a+1b)
- (d) Federal income tax on net capital gains
- (e) Utilization of capital loss carry-forwards
- (f) Other
- (g) Federal and foreign income taxes incurred (1c+1d+1e+1f)

2. Deferred Tax Assets:
- (a) Ordinary:

(1) As of End of Current Period	(2) 12/31/2023	(3) (Col. 1 - 2) Change
\$ 194,969	\$ 44,817	\$ 150,152
		\$ -
\$ 194,969	\$ 44,817	\$ 150,152
		\$ -
		\$ -
		\$ -
\$ 194,969	\$ 44,817	\$ 150,152



NOTES TO FINANCIAL STATEMENTS

(1) Discounting of unpaid losses				\$	-	\$	-	\$	-
(2) Unearned premium reserve						\$	-	\$	-
(3) Policyholder reserves						\$	-	\$	-
(4) Investments						\$	-	\$	-
(5) Deferred acquisition costs						\$	-	\$	-
(6) Policyholder dividends accrual						\$	-	\$	-
(7) Fixed assets						\$	-	\$	-
(8) Compensation and benefits accrual						\$	-	\$	-
(9) Pension accrual						\$	-	\$	-
(10) Receivables - nonadmitted						\$	-	\$	-
(11) Net operating loss carry-forward						\$	-	\$	-
(12) Tax credit carry-forward						\$	-	\$	-
(13) Other						\$	-	\$	-
(99) Subtotal (sum of 2a1 through 2a13)	\$	-	\$	-	\$	-	\$	-	-
(b) Statutory valuation allowance adjustment						\$	-	\$	-
(c) Nonadmitted						\$	-	\$	-
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$	-	\$	-	\$	-	\$	-	-
(e) Capital:									
(1) Investments						\$	-	\$	-
(2) Net capital loss carry-forward						\$	-	\$	-
(3) Real estate						\$	-	\$	-
(4) Other						\$	-	\$	-
(99) Subtotal (2e1+2e2+2e3+2e4)	\$	-	\$	-	\$	-	\$	-	-
(f) Statutory valuation allowance adjustment						\$	-	\$	-
(g) Nonadmitted						\$	-	\$	-
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$	-	\$	-	\$	-	\$	-	-
(i) Admitted deferred tax assets (2d + 2h)	\$	-	\$	-	\$	-	\$	-	-
3. Deferred Tax Liabilities:									
(a) Ordinary:									
(1) Investments						\$	-	\$	-
(2) Fixed assets						\$	-	\$	-
(3) Deferred and uncollected premium						\$	-	\$	-
(4) Policyholder reserves						\$	-	\$	-
(5) Other						\$	-	\$	-
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$	-	\$	-	\$	-	\$	-	-
(b) Capital:									
(1) Investments						\$	-	\$	-
(2) Real estate						\$	-	\$	-
(3) Other						\$	-	\$	-
(99) Subtotal (3b1+3b2+3b3)	\$	-	\$	-	\$	-	\$	-	-
(c) Deferred tax liabilities (3a99 + 3b99)	\$	-	\$	-	\$	-	\$	-	-
4. Net deferred tax assets/liabilities (2i - 3c)	\$	-	\$	-	\$	-	\$	-	-

D. The provision for federal income taxes is different from that which would be obtained by applying the enacted federal income tax rate to income before taxes

- E. (1) Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits: NONE  
(2) The income tax expense for the current year and prior years that is available for recoupment in the event of future losses is: -0-  
(3) The Company's aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Service Code was -0- at December 31, 2024.

F. 1.The Company's federal income tax return is consolidated with the following entities:

Insurors Financial Corp.EIN: 74-2505719  
Insurors Indemnity CompanyEIN: 74-2262949  
Roadrunner Indemnity CompanyEIN: 75-1791515  
ValueSure Agency, Inc.EIN: 75-2908348  
Insurors Indemnity General Agency, Inc. EIN: 74-2760157

G. Federal or Foreign Federal Income Tax Loss Contingencies: NONE

H. Repatriation Transition Tax (RTT)  
not applicable

I. Alternative Minimum Tax (AMT) Credit  
not applicable

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

- A. Insurors Financial Corp. owns 100% of Insurors Indemnity Company which owns 100% of Insurors Indemnity Select Insurance Company which owns 100% of Roadrunner Indemnity Company.  
Insurors Financial Corp. owns 100% of Insurors Indemnity General Agency, Inc. which owns 100% of ValueSure Agency, Inc. These entities are affiliates of the companies.
- B. Transactions On December 31, 2023 Insurors Financial Corp, committed to contribute \$3,000,000 to the surplus of Insurors Indemnity Select which was set up as a receivable on Company's statement. On December 31, 2023 following the reorganization described in Note 3, Insurors Indemnity Company contributed \$1,860,000 to the surplus of Insurors Indemnity Select.These transactions were considered in HCS # 1148324 Exemption filing.  
All other transactions between the affiliates in excess of the limits of Chapter 823.102 have been submitted to the TDI for review and approval or no action.
- C. Transactions with related party who are not reported on Schedule Y  
NONE
- D. D.Amounts due to or from Related Parties  
The company does not have any amounts due related parties at this time.
- E. E.Material Contracts with Affiliates

NOTES TO FINANCIAL STATEMENTS

The company has a Managing General Agency Agreement with its affiliate, Insurors Indemnity General Agency, Inc., dba Insurors Indemnity Underwriters (IIU). Under the agreement, IIU has the authority to carry out the day-to-day operations of Insurors Indemnity and its affiliates through IIU's employees. Insurors Indemnity Company has an affiliated reinsurance agreement with Insurors Indemnity Select (IIS) and Roadrunner Indemnity Company, covering 100% of the business written by each. The company's federal income tax return is consolidated with Insurors Financial Corp, Insurors Indemnity Company, Roadrunner Indemnity Company, Insurors Indemnity General Agency, Inc. and ValueSure Agency, Inc. effective April 1, 2022.

F. There are no guarantees or undertakings for related parties.

G. G.Nature of the Relationship

There is no control relationship that would result in the operating results or financial position of the company being significantly different from those that would have been obtained if the enterprises were autonomous except as disclosed in Note 10 F.

H. There is no amount deducted from the value of an upstream intermediate entity

I. I.Investments in SCA that Exceed 10% of Admitted Assets

The Company owns 100% of Roadrunner Indemnity Company. This common stock investment is recorded at its statutory equity value of \$9,262,422.

J. The company has no investments in impaired SCA's

K. There are no investments in a foreign insurance subsidiary

L. There is no investment in a downstream noninsurance holding company

M. The company does not have any investments in non-insurance subsidiary controlled and affiliated entities

N. The company has no investments in SCA entities utilizing prescribed or permitted practices

O. The company has no SCA Loss tracking

NOTE 11 Debt

A. The company has no debt notes

B. FHLB (Federal Home Loan Bank) Agreements  
(1) The comany does not have an agreement with FHLB

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

A. Defined Benefit Plan

NONE

B. Investment Policies and Strategies  
The company has an investment policy and strategy that they follow

C. The fair value of each class of plan assets  
The Company has no fiar value of plan assets

D. Basis Used to Determine Expected Long-Term Rate of Return  
The company has no expected long term rate of return

E. Defined Contribution Plan  
  
The company with other affiliated companies in the parent company, Insurors Financial Corp, participate in a defined contribution 401(k) plan. Employees are eligible to participate in the plan once they have been employed for one year and reach the age of 21. This is part of the MGA agreement with Insurors Indemnity General Agency, Inc.

F. Multiemployer Plans  
the company does not participate in a multiemployer plan

G. Consolidated/Holding Company Plans  
  
The company with other affiliated companies in the parent company, Insurors Financial Corp, participate in a defined contribution 401(k) plan. Employees are eligible to participate in the plan once they have been employed for one year and reach the age of 21. This is part of the MGA agreement with Insurors Indemnity General Agency, Inc.

H. Postemployment Benefits and Compensated Absences  
The company has no postemployment benefits and compensated absences

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)  
The company has no defined plan for which this medicare act applies

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

- A. The company has 5,000,000 shares authorized and 2,500,000 shares issued and outstanding. All shares are class A shares at \$1 par.
- B. The company has no preferred stock
- C. Under the Insurance Holding Company system Regulatory Act, Article 21.49.1, Section 4 without prior approval of its domiciliary commissioner, dividend distributions to shareholders are limited by the laws of the company's sate of incorporation, Texas, to the greater of 10% of surplus or the prior year's earnings.
- D. No dividends were paid during the reporting year
- E. There are no restrictions placed on the portion of company profits that may be paid as ordinary dividends to stockholders.
- F. There were no restrictions placed on the company's surplus
- G. There are no advances to surplus unpaid
- H. There is no stock held by the company for special purposes
- I. There are no changes in the balance of special surplus funds

NOTES TO FINANCIAL STATEMENTS

- J.     The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is  
\$844,374
- K.     The Company issued the following surplus debentures or similar obligations:  
The company does not have a surplus debenture
- L.     The impact of any restatement due to prior quasi-reorganizations is as follows:  
The company had no quasi-reorganization
- M.     Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization  
The company has had no quasi-reorganization in the past ten years

NOTE 14   Liabilities, Contingencies and Assessments

- A.     Contingent Commitments  
  
The company does not have any contingent commitments
- B.     Assessments  
The company is not aware of any assessments which could have a material financial effect.
- C.     Gain Contingencies  
The company has no gain contingencies
- D.     Claims related extra contractual obligations and bad faith losses stemming from lawsuits  
The company has no pending legal proceedings which could result in gain contingencies.
- E.     Product Warranties  
The company does not have any product warranties
- F.     Joint and Several Liabilities  
The company does not have any joint and several liabilities
- G.     All Other Contingencies  
The company does not have any other contingencies

NOTE 15   Leases

- A.     Lessee Operating Lease:  
(1) The company has no lessee operating lease.

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

The company does not have any financial instruments with off balance sheet risk or credit risk

NOTE 17   Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A.     Transfers of Receivables Reported as Sales  
The company has no transfer of receivables reported as sales
- B.     Transfer and Servicing of Financial Assets  
The company has no transfer and servicing of financial assets to report
- C.     Wash Sales  
The company has no wash sales to report

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

The company does not administer an uninsured or partially insured accident and health plan

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

Name and Address of Managing General Agent or Third Party Administrator	FEIN NUMBER	Exclusive Contract	Types of Business Written	Type of Authority Granted	Total Direct Premiums Written/ Produced By
Denali Specialty Group, LLC	27-0771349	No	Surplus Lines	P	\$ 46,842
iMGA, LLC		No	Surplus Lines	P	\$ 6,209,536
Germania General Agency, Inc.		No	Surplus Lines	P	\$ 139,239
Total	XXX	XXX	XXX	XXX	\$ 6,395,617

C - Claims Payment  
CA - Claims Adjustment  
R - Reinsurance Ceding  
B - Binding Authority  
P - Premium Collection  
U - Underwriting

NOTE 20   Fair Value Measurements

- A.     The company's assets and liabilities measured at fair value have been classified based on a hierarchy defined in statement of statutory accounting principles No 100R. The three level fair value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
--	-----------	-----------	-----------	-----------------------	-------

NOTES TO FINANCIAL STATEMENTS

a. Assets at fair value Cash Equivalents	\$	24,243				\$	24,243
Total assets at fair value/NAV	\$	24,243	\$	-	\$	-	\$ 24,243

- (2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy  
The company has no assets or liabilities that are Level 3
- (3) Policies when Transfers Between Levels are Recognized  
The company has no assets / liabilities transferred between levels
- (4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement  
Fair values for the company's portfolio are provided by our investment custodian.
- (5) The company has no derivative assets or liabilities

- B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements  
The company does not disclose fair value information under other accounting prouncements

- C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 5,763,882	\$ 5,805,264	\$ 2,376,648	\$ 3,387,233			
Cash Equivalents	\$ 24,243	\$ 24,243	\$ 24,243				

- D. Not Practicable to Estimate Fair Value

The company has no assets or liabilities that are not practicable to estimate at fair value

- E. NAV Practical Expedient Investments  
The company has no NAV practical expedient investments

NOTE 21 Other Items

- A. Unusual or Infrequent Items  
The company does not have any unusual or infrequent items
- B. Troubled Debt Restructuring: Debtors  
The company has no troubled debt restructuring debtors
- C. Other Disclosures  
The company has no other disclosures
- D. Business Interruption Insurance Recoveries  
The company had no business interruption insurance recoveries
- E. State Transferable and Non-transferable Tax Credits  
The company had no state transferrable and non-transferrable tax credits this year.
- F. Subprime Mortgage Related Risk Exposure  
The company had no subprime mortgage related risk exposure
- G. Insurance-Linked Securities (ILS) Contracts  
The company had no insurance linked securities ILS contracts
- H. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy  
The company has no life insurance where the reporting entity is owner and beneficiary or has otherwise obtained rights to control the policy.

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:

On January 31, 2024 Insurors Financial Corp. contributed \$3,000,000 cash to Company in satisfaction of its December 31, 2023 obligation.  
On January 11, 2024 Insurors Indemnity Company contributed \$1,860,000 cash to Company in satisfaction of its December 31, 2023 obligation.

Type II – Nonrecognized Subsequent Events:  
NONE

NOTE 23 Reinsurance

- A. Unsecured Reinsurance Recoverables  
The company does not have any unsecured reinsurance recoverables exceeding 3% of policyholder surplus
- B. Reinsurance Recoverable in Dispute  
The company does not have any reinsurance recoverable in dispute
- C. Reinsurance Assumed and Ceded  
(1)

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates			\$ 3,619,000		\$ (3,619,000)	\$ -
b. All Other					\$ -	\$ -
c. Total (a+b)	\$ -	\$ -	\$ 3,619,000	\$ -	\$ (3,619,000)	\$ -
d. Direct Unearned Premium Reserve						\$ 3,618,546

(2)

NOTES TO FINANCIAL STATEMENTS

	Direct	Assumed	Ceded	Net
a. Contingent Commission				\$ -
b. Sliding Scale Adjustments				\$ -
c. Other Profit Commission Arrangements				\$ -
d. TOTAL (a+b+c)	\$ -	\$ -	\$ -	\$ -

(3)

- D. Uncollectible Reinsurance  
The company does not have any uncollectible reinsurance for the reporting period
- E. Commutation of Reinsurance Reflected in Income and Expenses.  
The company has no commutation of reinsurance to report for the current year.
- F. Retroactive Reinsurance  
The company has no retroactive reinsurance agreements
- G. Reinsurance Accounted for as a Deposit  
The company does not have any reinsurance agreement determined to be of a deposit type nature
- H. Disclosures for the Transfer of Property and Casualty Run-off Agreements  
The company has no transfer of property and casualty run off agreements
- I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation  
The company has no certified reinsurer rating downgrades or status subject to revocation
- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation  
The company has no reinsurance agreements qualifying for reinsuer aggregation
- K. Reinsurance Credit  
the company does not have any reinsurance contracts subject to A-791 that limits the reinsurer's assumption of significant risks identified as A-791

**NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination**  
A. The company had no retrospectively rated contracts and contracts subject to redetermination

**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**

The company had no significant changes in methodologies and assumptions used in calculating the incurred losses and loss adjustment expenses

B. Information about Significant Changes in Methodologies and Assumptions

**NOTE 26 Intercompany Pooling Arrangements**  
The company had no pooling arrangements

**NOTE 27 Structured Settlements**  
The company has no structured settlements

**NOTE 28 Health Care Receivables**  
The company does not write Health insurance

**NOTE 29 Participating Policies**  
The company does not issue participating policies

**NOTE 30 Premium Deficiency Reserves**  
The company is not required to have a premium deficiency at this time.

**NOTE 31 High Deductibles**  
The company has no reserve credit recored for high deductibles on unpaid claims

**NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**  
The company does not discount liabilities for unpaid losses or unpaid loss adjustment expenses

**NOTE 33 Asbestos/Environmental Reserves**  
The company is not exposed to asbestos / environmental claims

**NOTE 34 Subscriber Savings Accounts**  
The company is not a reciprocol insurance company and does not have subscriber savings accounts

**NOTE 35 Multiple Peril Crop Insurance**  
The company does not write Crop Insurance

**NOTE 36 Financial Guaranty Insurance**  
The company does not sell Financial Guaranty Insurance

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? .....  
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

Yes [ X ] No [ ]

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? .....

Yes [ X ] No [ ] N/A [ ]

1.3

State Regulating? .....

Texas

1.4

Is the reporting entity publicly traded or a member of a publicly traded group? .....

Yes [ ] No [ X ]

1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....

Yes [ ] No [ X ]

2.2

If yes, date of change: .....

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made. ....

12/31/2022

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. ....

12/31/2022

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). ....

05/31/2024

3.4

By what department or departments?  
TEXAS DEPARTMENT OF INSURANCE .....

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? .....

Yes [ X ] No [ ] N/A [ ]

3.6

Have all of the recommendations within the latest financial examination report been complied with? .....

Yes [ X ] No [ ] N/A [ ]

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.11 sales of new business? .....  
4.12 renewals? .....

Yes [ ] No [ X ]  
Yes [ ] No [ X ]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
4.21 sales of new business? .....  
4.22 renewals? .....

Yes [ ] No [ X ]  
Yes [ ] No [ X ]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....  
If yes, complete and file the merger history data file with the NAIC.

Yes [ ] No [ X ]

5.2

If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? .....

Yes [ ] No [ X ]

6.2

If yes, give full information  
.....

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? .....

Yes [ ] No [ X ]

7.2

If yes,  
7.21 State the percentage of foreign control ..... %  
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

- 8.1

Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? .....

Yes [ ] No [ X ]
- 8.2

If the response to 8.1 is yes, please identify the name of the DIHC.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms? .....

Yes [ ] No [ X ]
- 8.4

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

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

- 8.5

Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? .....

Yes [ ] No [ X ]
- 8.6

If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? .....

Yes [ ] No [ X ] N/A [ ]
9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? Jaynes, Reitmeier, Boyd, & Therrell, PC 5400 Bosque Blvd Suite 500 Waco, TX 76710 .....
- 10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? .....

Yes [ ] No [ X ]
- 10.2

If the response to 10.1 is yes, provide information related to this exemption: .....
- 10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? .....

Yes [ ] No [ X ]
- 10.4

If the response to 10.3 is yes, provide information related to this exemption: .....
- 10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? .....

Yes [ X ] No [ ] N/A [ ]
- 10.6

If the response to 10.5 is no or n/a, please explain. ....
11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? Pat Whatley of the Burkhalter Group 1701 N Collins Richardson, Texas Independent Consultant .....
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? .....

Yes [ ] No [ X ]
- 12.11

Name of real estate holding company ...
- 12.12

Number of parcels involved .....
- 12.13

Total book/adjusted carrying value .....

\$
- 12.2

If yes, provide explanation .....
13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity? .....
- 13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? .....

Yes [ ] No [ X ]
- 13.3

Have there been any changes made to any of the trust indentures during the year? .....

Yes [ ] No [ X ]
- 13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? .....

Yes [ ] No [ X ] N/A [ ]
- 14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? .....

Yes [ X ] No [ ]
- a.

Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- b.

Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- c.

Compliance with applicable governmental laws, rules and regulations;
- d.

The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e.

Accountability for adherence to the code.
- 14.11

If the response to 14.1 is No, please explain: .....
- 14.2

Has the code of ethics for senior managers been amended? .....

Yes [ ] No [ X ]
- 14.21

If the response to 14.2 is yes, provide information related to amendment(s). ....
- 14.3

Have any provisions of the code of ethics been waived for any of the specified officers? .....

Yes [ ] No [ X ]
- 14.31

If the response to 14.3 is yes, provide the nature of any waiver(s). ....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [ ] No [ X ]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [ X ] No [ ]
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [ X ] No [ ]
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [ X ] No [ ]

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [ ] No [ X ]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers\$

20.12 To stockholders not officers\$

20.13 Trustees, supreme or grand (Fraternal Only) \$
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers\$

20.22 To stockholders not officers\$

20.23 Trustees, supreme or grand (Fraternal Only) \$
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [ ] No [ X ]
- 21.2 If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others\$

21.22 Borrowed from others\$

21.23 Leased from others \$

21.24 Other \$
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [ ] No [ X ]
- 22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment \$

22.22 Amount paid as expenses \$

22.23 Other amounts paid \$
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [ ] No [ X ]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [ ] No [ X ]
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

- 25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03) Yes [ X ] No [ ]



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

25.02 If no, give full and complete information, relating thereto

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions.

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs.

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending?

25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

25.093 Total payable for securities lending reported on the liability page

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03).

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements

26.22 Subject to reverse repurchase agreements

26.23 Subject to dollar repurchase agreements

26.24 Subject to reverse dollar repurchase agreements

26.25 Placed under option agreements

26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock

26.27 FHLB Capital Stock

26.28 On deposit with states

26.29 On deposit with other regulatory bodies

26.30 Pledged as collateral - excluding collateral pledged to an FHLB

26.31 Pledged as collateral to FHLB - including assets backing funding agreements

26.32 Other

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

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

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108

27.42 Permitted accounting practice

27.43 Other accounting guidance

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

27.5.1 The reporting entity has obtained explicit approval from the domiciliary state.

27.5.2 Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.

27.5.3 Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.

27.5.4 Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

28.2 If yes, state the amount thereof at December 31 of the current year.

29. Excluding items in Schedule E, Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

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

1 Name of Custodian(s)	2 Custodian's Address
US BANK	2204 LAKESHORE DR., STE 302 BIRMINGHAM, AL 35209

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

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

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

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [ ] No [ X ]

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

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

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
NEW ENGLAND ASSET MANAGEMENT, INC. ....	U.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [ X ] No [ ]

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ X ] No [ ]

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
	NEW ENGLAND ASSET MANAGEMENT, INC. ....	KURB5EPS4GQF2TFC130 .....	U.S. SECURITIES AND EXCHANGE COMMISSION .....	No.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? ..... Yes [ ] No [ X ]

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2999 - Total		0

30.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds .....	5,805,264	5,763,882	(41,382)
31.2 Preferred stocks .....	0		0
31.3 Totals	5,805,264	5,763,882	(41,382)

31.4 Describe the sources or methods utilized in determining the fair values:  
Fair Values are based on end of period provided by independent pricing services such as Refinitiv, ICE Data Serves .....

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? ..... Yes [ X ] No [ ]

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? ..... Yes [ X ] No [ ]

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:  
.....

33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? ..... Yes [ X ] No [ ]

33.2 If no, list exceptions:  
.....

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:  
a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.  
b. Issuer or obligor is current on all contracted interest and principal payments.  
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.  
Has the reporting entity self-designated 5GI securities? ..... Yes [ ] No [ X ]

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:  
a. The security was either:  
i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or  
ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").  
b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.  
c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.  
d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.  
Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? ..... Yes [ ] No [ X ]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:  
a. The shares were purchased prior to January 1, 2019.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.  
d. The fund only or predominantly holds bonds in its portfolio.  
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.  
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.  
Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [ X ]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:  
a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.  
b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.  
c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.  
d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.  
Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? ..... Yes [ X ] No [ ] N/A [ ]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

- 38.1 Does the reporting entity directly hold cryptocurrencies? ..... Yes [ ] No [ X ]
- 38.2 If the response to 38.1 is yes, on what schedule are they reported?  
.....
- 39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? ..... Yes [ ] No [ X ]
- 39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?  
39.21 Held directly ..... Yes [ ] No [ X ]  
39.22 Immediately converted to U.S. dollars ..... Yes [ ] No [ X ]
- 39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1	2	3
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums

OTHER

- 40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ ..... 16,600
- 40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.
- | 1             | 2            |
|---------------|--------------|
| Name          | Amount Paid  |
| AM BEST ..... | ..... 16,600 |
|               |              |
- 41.1 Amount of payments for legal expenses, if any? .....\$ .....
- 41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.
- | 1    | 2           |
|------|-------------|
| Name | Amount Paid |
|      |             |
- 42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any? .....\$ .....
- 42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.
- | 1    | 2           |
|------|-------------|
| Name | Amount Paid |
|      |             |

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force? .....

Yes [ ] No [ X ]

1.2

If yes, indicate premium earned on U. S. business only. ....

\$ .....

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? .....

\$ .....

1.31

Reason for excluding .....

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. ....

\$ .....

1.5

Indicate total incurred claims on all Medicare Supplement insurance. ....

\$ .....0

1.6

Individual policies:

Most current three years:

1.61

Total premium earned .....

\$ .....0

1.62

Total incurred claims .....

\$ .....0

1.63

Number of covered lives .....

.....0

All years prior to most current three years:

1.64

Total premium earned .....

\$ .....0

1.65

Total incurred claims .....

\$ .....0

1.66

Number of covered lives .....

.....0

1.7

Group policies:

Most current three years:

1.71

Total premium earned .....

\$ .....0

1.72

Total incurred claims .....

\$ .....0

1.73

Number of covered lives .....

.....0

All years prior to most current three years:

1.74

Total premium earned .....

\$ .....0

1.75

Total incurred claims .....

\$ .....0

1.76

Number of covered lives .....

.....0

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator .....

.....

.....

2.2

Premium Denominator .....

.....

.....

2.3

Premium Ratio (2.1/2.2) .....

.....0.000

.....0.000

2.4

Reserve Numerator .....

.....

.....

2.5

Reserve Denominator .....

.....0

.....0

2.6

Reserve Ratio (2.4/2.5) .....

.....0.000

.....0.000

3.1

Did the reporting entity issue participating policies during the calendar year? .....

Yes [ ] No [ X ]

3.2

If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year:

3.21

Participating policies .....

\$ .....

3.22

Non-participating policies .....

\$ .....

4.

For mutual reporting Entities and Reciprocal Exchanges only:

4.1

Does the reporting entity issue assessable policies? .....

Yes [ ] No [ X ]

4.2

Does the reporting entity issue non-assessable policies? .....

Yes [ ] No [ X ]

4.3

If assessable policies are issued, what is the extent of the contingent liability of the policyholders? .....

% .....

4.4

Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. ....

\$ .....

5.

For Reciprocal Exchanges Only:

5.1

Does the Exchange appoint local agents? .....

Yes [ ] No [ X ]

5.2

If yes, is the commission paid:

5.21

Out of Attorney's-in-fact compensation.....

Yes [ ] No [ ] N/A [ X ]

5.22

As a direct expense of the exchange.....

Yes [ ] No [ ] N/A [ X ]

5.3

What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? .....

5.4

Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? .....

Yes [ ] No [ X ]

5.5

If yes, give full information .....

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

6.1

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?  
The company does not write Worker's Compensation Insurance .....

6.2

Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:  
The company has a Reinsurance agreement that cedes 100% of Losses to Insurors Indemnity Company .....

6.3

What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  
The company has a 100% ceded reinsurance agreement with Insurors Indemnity Company and ILC has purchased Catastrophe excess of loss reinsurance on all property business .....

6.4

Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? .....

Yes [ X ] No [ ]

6.5

If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss  
.....

7.1

Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?.....

Yes [ ] No [ X ]

7.2

If yes, indicate the number of reinsurance contracts containing such provisions. ....

7.3

If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?.....

Yes [ ] No [ X ]

8.1

Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? .....

Yes [ ] No [ X ]

8.2

If yes, give full information  
.....

9.1

Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;  
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;  
(c) Aggregate stop loss reinsurance coverage;  
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;  
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or  
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. ....

Yes [ ] No [ X ]

9.2

Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:  
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or  
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. ....

Yes [ ] No [ X ]

9.3

If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4

Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? .....

Yes [ ] No [ X ]

9.5

If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6

The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:  
(a) The entity does not utilize reinsurance; or, .....  
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or .....  
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. ....

Yes [ ] No [ X ]  
Yes [ X ] No [ ]  
Yes [ ] No [ X ]

10.

If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? .....

Yes [ ] No [ ] N/A [ X ]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? ..... Yes [ ] No [ X ]

11.2 If yes, give full information  
.....

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:

12.11 Unpaid losses .....\$ .....

12.12 Unpaid underwriting expenses (including loss adjustment expenses) .....\$ .....

12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral and other funds. ....\$ .....

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? ..... Yes [ ] No [ ] N/A [ X ]

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:

12.41 From ..... %

12.42 To..... %

12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves , including unpaid losses under loss deductible features of commercial policies? ..... Yes [ ] No [ X ]

12.6 If yes, state the amount thereof at December 31 of the current year:

12.61 Letters of Credit .....\$ .....

12.62 Collateral and other funds.....\$ .....

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): .....\$ .....150,000

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? ..... Yes [ ] No [ X ]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. ....

14.1 Is the company a cedant in a multiple cedant reinsurance contract? ..... Yes [ ] No [ X ]

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:  
.....

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? ..... Yes [ ] No [ X ]

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? ..... Yes [ ] No [ X ]

14.5 If the answer to 14.4 is no, please explain:  
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? ..... Yes [ ] No [ X ]

15.2 If yes, give full information  
.....

16.1 Does the reporting entity write any warranty business? ..... Yes [ ] No [ X ]  
If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home .....					
16.12 Products .....					
16.13 Automobile .....					
16.14 Other*					

\* Disclose type of coverage:

.....

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance? ..... Yes [ ] No [ X ]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance .....\$ .....

17.12 Unfunded portion of Interrogatory 17.11 .....\$ .....

17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11....\$ .....

17.14 Case reserves portion of Interrogatory 17.11 .....\$ .....

17.15 Incurred but not reported portion of Interrogatory 17.11 .....\$ .....

17.16 Unearned premium portion of Interrogatory 17.11 .....\$ .....

17.17 Contingent commission portion of Interrogatory 17.11 .....\$ .....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 18.1

Do you act as a custodian for health savings accounts? .....

Yes [ ☐ ] No [ ☒ ]
- 18.2

If yes, please provide the amount of custodial funds held as of the reporting date. ....

\$ .....
- 18.3

Do you act as an administrator for health savings accounts? .....

Yes [ ☐ ] No [ ☒ ]
- 18.4

If yes, please provide the balance of funds administered as of the reporting date. ....

\$ .....
19.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? .....

Yes [ ☒ ] No [ ☐ ]
- 19.1

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? .....

Yes [ ☐ ] No [ ☐ ]



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2024	2 2023	3 2022	4 2021	5 2020
<b>Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11, 16, 17, 18 & 19) .....	2,513	3,434	0	0	382,050
2. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	3,307,320	1,309,285	1,040,737	246,237	2,747,939
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	5,052,572	1,510,777	882,823	1,015,342	10,321,183
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	0	0	0	0	0
5. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
6. Total (Line 35) .....	8,362,405	2,823,496	1,923,560	1,261,579	13,451,172
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11, 16, 17, 18 & 19) .....	0	0	0	0	0
8. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	0	0	0	0	0
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	0	0	0	0	0
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	0	0	0	0	0
11. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
12. Total (Line 35) .....	0	0	0	0	0
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8) .....	680,497	105,442	160,309	270,562	(57,555)
14. Net investment gain (loss) (Line 11) .....	342,817	102,118	51,506	62,186	15,047
15. Total other income (Line 15) .....	92,913	5,855	5,173	3,512	51,385
16. Dividends to policyholders (Line 17) .....					0
17. Federal and foreign income taxes incurred (Line 19) .....	194,969	44,817	45,513	70,613	1,426
18. Net income (Line 20) .....	921,258	168,598	171,475	265,647	7,451
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3) .....	21,067,875	18,342,592	35,574,159	36,051,457	2,714,259
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1) .....	1,667,725	633,264	359,444	293,037	0
20.2 Deferred and not yet due (Line 15.2) .....	0	0	0	0	0
20.3 Accrued retrospective premiums (Line 15.3) .....	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26) .....	1,459,869	500,218	221,195	345,142	12,759
22. Losses (Page 3, Line 1) .....	0	0	0	0	0
23. Loss adjustment expenses (Page 3, Line 3) .....	0	0	0	0	0
24. Unearned premiums (Page 3, Line 9) .....					0
25. Capital paid up (Page 3, Lines 30 & 31) .....	2,500,000	2,500,000	2,500,000	2,500,000	0
26. Surplus as regards policyholders (Page 3, Line 37) .....	19,608,006	17,842,374	35,352,964	35,706,315	2,701,500
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11) .....	661,621	165,620	(80,193)	292,158	39,681
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital .....	19,608,006	17,842,374	35,352,964	35,706,315	2,701,500
29. Authorized control level risk-based capital .....	1,172,836	1,082,776	3,733,481	3,793,929	11,167
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0</b>					
30. Bonds (Line 1) .....	30.8	19.3	7.0	5.5	73.4
31. Stocks (Lines 2.1 & 2.2) .....	53.6	74.9	91.6	91.6	0.0
32. Mortgage loans on real estate (Lines 3.1 and 3.2) .....	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 & 4.3) .....	0.0	0.0	0.0	0.0	0.0
34. Cash, cash equivalents and short-term investments (Line 5) .....	15.7	5.8	1.5	2.9	26.6
35. Contract loans (Line 6) .....	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7) .....	0.0	0.0	0.0	0.0	0.0
37. Other invested assets (Line 8) .....	0.0	0.0	0.0	0.0	0.0
38. Receivables for securities (Line 9) .....	0.0	0.0	0.0	0.0	0.0
39. Securities lending reinvested collateral assets (Line 10) .....	0.0	0.0	0.0	0.0	0.0
40. Aggregate write-ins for invested assets (Line 11) .....	0.0	0.0	0.0	0.0	0.0
41. Cash, cash equivalents and invested assets (Line 12) .....	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1) .....				0	0
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1) .....				0	0
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1) .....	10,106,795	9,262,422	32,218,276	32,741,378	0
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10) .....	0	0	0		0
46. Affiliated mortgage loans on real estate .....					
47. All other affiliated .....					
48. Total of above Lines 42 to 47 .....	10,106,795	9,262,422	32,218,276	32,741,378	0
49. Total Investment in Parent included in Lines 42 to 47 above .....					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0) .....	51.5	51.9	91.1	91.7	0.0

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2024	2 2023	3 2022	4 2021	5 2020
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24) .....	844,374	(4,979,651)	(524,826)	5,500,543	(137)
52. Dividends to stockholders (Line 35) .....					0
53. Change in surplus as regards policyholders for the year (Line 38) .....	1,765,632	(17,510,590)	(353,351)	33,004,815	7,314
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11, 16, 17, 18 & 19) .....	0	0	0	0	4,557
55. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	481,446	274,295	98,487	0	1,012,667
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	833,776	500,818	85,482	16,198	6,112,782
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	0	0	0	0	0
58. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
59. Total (Line 35) .....	1,315,222	775,113	183,969	16,198	7,130,006
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11, 16, 17, 18 & 19) .....	0	0	0	0	0
61. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	0	0	0	0	0
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	0	0	0	0	0
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	0	0	0	0	0
64. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
65. Total (Line 35) .....	0	0	0	0	0
<b>Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0</b>					
66. Premiums earned (Line 1) .....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2) .....	0.0	0.0	0.0	0.0	0.0
68. Loss expenses incurred (Line 3) .....	0.0	0.0	0.0	0.0	0.0
69. Other underwriting expenses incurred (Line 4) .....	0.0	0.0	0.0	0.0	0.0
70. Net underwriting gain (loss) (Line 8) .....	0.0	0.0	0.0	0.0	0.0
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) .....	0.0	0.0	0.0	0.0	0.0
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .....	0.0	0.0	0.0	0.0	0.0
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0) .....	0.0	0.0	0.0	0.0	0.0
<b>One Year Loss Development (\$000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11) .....	0	0	0	0	0
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0).....	0.0	0.0	0.0	0.0	0.0
<b>Two Year Loss Development (\$000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) .....	0	0	0	0	0
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0) .....	0.0	0.0	0.0	0.0	0.0

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? .....

Yes [     ] No [     ]

If no, please explain: .....



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279 BUSINESS IN THE STATE OF Kansas DURING THE YEAR 2024 NAIC Company Code 11496

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3  Dividends Paid or Credited to Policyholders on Direct Business	4  Direct Unearned Premium Reserves	5  Direct Losses Paid (deducting salvage)	6  Direct Losses Incurred	7  Direct Losses Unpaid	8  Direct Defense and Cost Containment Expense Paid	9  Direct Defense and Cost Containment Expense Incurred	10  Direct Defense and Cost Containment Expense Unpaid	11  Commissions and Brokerage Expenses	12  Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire .....												
2.1	Allied Lines .....												
2.2	Multiple Peril Crop .....												
2.3	Federal Flood .....												
2.4.	Private Crop .....												
2.5	Private Flood .....												
3.	Farmowners Multiple Peril .....												
4.	Homeowners Multiple Peril .....												
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	31,436	23,718		19,255							2,321	
5.2	Commercial Multiple Peril (Liability Portion) .....	5,135	3,517		2,946							387	
6.	Mortgage Guaranty .....												
8.	Ocean Marine .....												
9.1	Inland Marine .....												
9.2	Pet Insurance Plans .....												
10.	Financial Guaranty .....												
11.1	Medical Professional Liability - Occurrence .....												
11.2	Medical Professional Liability - Claims-Made .....												
12.	Earthquake .....												
13.1	Comprehensive (hospital and medical) ind (b) .....												
13.2	Comprehensive (hospital and medical) group (b) .....												
14.	Credit A&H (Group and Individual) .....												
15.1	Vision Only (b).....												
15.2	Dental Only (b) .....												
15.3	Disability Income (b) .....												
15.4	Medicare Supplement (b) .....												
15.5	Medicaid Title XIX (b) .....												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b) .....												
15.8	Federal Employees Health Benefits Plan (b) .....												
15.9	Other Health (b) .....												
16.	Workers' Compensation .....												
17.1	Other Liability - Occurrence .....		343										
17.2	Other Liability - Claims-Made .....												
17.3	Excess Workers' Compensation .....												
18.1	Products Liability - Occurrence .....												
18.2	Products Liability - Claims-Made .....												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....												
19.2	Other Private Passenger Auto Liability .....												
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....												
19.4	Other Commercial Auto Liability .....												
21.1	Private Passenger Auto Physical Damage .....												
21.2	Commercial Auto Physical Damage .....												
22.	Aircraft (all perils) .....												
23.	Fidelity .....												
24.	Surety .....												
26.	Burglary and Theft .....												
27.	Boiler and Machinery .....												
28.	Credit .....												
29.	International .....												
30.	Warranty .....												
31.	Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	36,571	27,578	0	22,201	0	0	0	0	0	0	2,708	0
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ ..... and number of persons insured under indemnity only products .....

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2024

NAIC Company Code 11496

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire .....												
2.1 Allied Lines .....												
2.2 Multiple Peril Crop .....												
2.3 Federal Flood .....												
2.4. Private Crop .....												
2.5 Private Flood .....												
3. Farmowners Multiple Peril .....												
4. Homeowners Multiple Peril .....												
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	5,165	3,023		2,142							620	
5.2 Commercial Multiple Peril (Liability Portion) .....	1,331	800		531							160	
6. Mortgage Guaranty .....												
8. Ocean Marine .....												
9.1 Inland Marine .....												
9.2 Pet Insurance Plans .....												
10. Financial Guaranty .....												
11.1 Medical Professional Liability - Occurrence .....												
11.2 Medical Professional Liability - Claims-Made .....												
12. Earthquake .....												
13.1 Comprehensive (hospital and medical) ind (b) .....												
13.2 Comprehensive (hospital and medical) group (b) .....												
14. Credit A&H (Group and Individual) .....												
15.1 Vision Only (b).....												
15.2 Dental Only (b) .....												
15.3 Disability Income (b) .....												
15.4 Medicare Supplement (b) .....												
15.5 Medicaid Title XIX (b) .....												
15.6 Medicare Title XVIII (b).....												
15.7 Long-Term Care (b) .....												
15.8 Federal Employees Health Benefits Plan (b) .....												
15.9 Other Health (b) .....												
16. Workers' Compensation .....												
17.1 Other Liability - Occurrence .....	1,387	528		1,315							166	
17.2 Other Liability - Claims-Made .....												
17.3 Excess Workers' Compensation .....												
18.1 Products Liability - Occurrence .....	1,126	755		1,067							135	
18.2 Products Liability - Claims-Made .....												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection) .....												
19.2 Other Private Passenger Auto Liability .....												
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....												
19.4 Other Commercial Auto Liability .....												
21.1 Private Passenger Auto Physical Damage .....												
21.2 Commercial Auto Physical Damage .....												
22. Aircraft (all perils) .....												
23. Fidelity .....												
24. Surety .....												
26. Burglary and Theft .....												
27. Boiler and Machinery .....												
28. Credit .....												
29. International .....												
30. Warranty .....												
31. Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business .....	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a) .....	9,009	5,106	0	5,055	0	0	0	0	0	0	1,081	0
DETAILS OF WRITE-INS												
3401. ....												
3402. ....												
3403. ....												
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ ..... and number of persons insured under indemnity only products .....

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279 BUSINESS IN THE STATE OF Texas DURING THE YEAR 2024 NAIC Company Code 11496

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3  Dividends Paid or Credited to Policyholders on Direct Business	4  Direct Unearned Premium Reserves	5  Direct Losses Paid (deducting salvage)	6  Direct Losses Incurred	7  Direct Losses Unpaid	8  Direct Defense and Cost Containment Expense Paid	9  Direct Defense and Cost Containment Expense Incurred	10  Direct Defense and Cost Containment Expense Unpaid	11  Commissions and Brokerage Expenses	12  Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire .....	1,330,086	999,809		543,015	13,806	32,225	32,126				315,792	2,542
2.1	Allied Lines .....	1,883,659	1,450,063		773,365	467,640	501,186	66,535				447,223	3,600
2.2	Multiple Peril Crop .....												
2.3	Federal Flood .....												
2.4	Private Crop .....												
2.5	Private Flood .....												
3.	Farmowners Multiple Peril .....												
4.	Homeowners Multiple Peril .....	3,448,033	2,677,675		1,264,815	764,596	812,056	79,978				829,462	6,590
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	1,293,764	620,977		819,038	69,180	140,150	84,173				307,169	2,473
5.2	Commercial Multiple Peril (Liability Portion) .....	267,708	130,447		151,393		16,118	18,156				63,560	512
6.	Mortgage Guaranty .....												
8.	Ocean Marine .....												
9.1	Inland Marine .....												
9.2	Pet Insurance Plans .....	93,575	86,549		39,664		(736)	2,303				22,217	175
10.	Financial Guaranty .....												
11.1	Medical Professional Liability - Occurrence .....												
11.2	Medical Professional Liability - Claims-Made .....												
12.	Earthquake .....												
13.1	Comprehensive (hospital and medical) ind (b) .....												
13.2	Comprehensive (hospital and medical) group (b) .....												
14.	Credit A&H (Group and Individual) .....												
15.1	Vision Only (b).....												
15.2	Dental Only (b) .....												
15.3	Disability Income (b) .....												
15.4	Medicare Supplement (b) .....												
15.5	Medicaid Title XIX (b) .....												
15.6	Medicare Title XVIII (b).....												
15.7	Long-Term Care (b) .....												
15.8	Federal Employees Health Benefits Plan (b) .....												
15.9	Other Health (b) .....												
16.	Workers' Compensation .....												
17.1	Other Liability - Occurrence .....		222				126	204					
17.2	Other Liability - Claims-Made .....												
17.3	Excess Workers' Compensation .....												
18.1	Products Liability - Occurrence .....		89				118	198					
18.2	Products Liability - Claims-Made .....												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....												
19.2	Other Private Passenger Auto Liability .....												
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....												
19.4	Other Commercial Auto Liability .....												
21.1	Private Passenger Auto Physical Damage .....												
21.2	Commercial Auto Physical Damage .....												
22.	Aircraft (all perils) .....												
23.	Fidelity .....												
24.	Surety .....												
26.	Burglary and Theft .....												
27.	Boiler and Machinery .....												
28.	Credit .....												
29.	International .....												
30.	Warranty .....												
31.	Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	8,316,825	5,965,831	0	3,591,290	1,315,222	1,501,243	283,673	0	0	0	1,985,423	15,892
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2024 NAIC Company Code 11496

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3  Dividends Paid or Credited to Policyholders on Direct Business	4  Direct Unearned Premium Reserves	5  Direct Losses Paid (deducting salvage)	6  Direct Losses Incurred	7  Direct Losses Unpaid	8  Direct Defense and Cost Containment Expense Paid	9  Direct Defense and Cost Containment Expense Incurred	10  Direct Defense and Cost Containment Expense Unpaid	11  Commissions and Brokerage Expenses	12  Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire .....	1,330,086	999,809	0	543,015	13,806	32,225	32,126	0	0	0	315,792	2,542
2.1	Allied Lines .....	1,883,659	1,450,063	0	773,365	467,640	501,186	66,535	0	0	0	447,223	3,600
2.2	Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
2.4.	Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood .....	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril .....	3,448,033	2,677,675	0	1,264,815	764,596	812,056	79,978	0	0	0	829,462	6,590
5.1	Commercial Multiple Peril (Non-Liability Portion) .....	1,330,365	647,718	0	840,435	69,180	140,150	84,173	0	0	0	310,110	2,473
5.2	Commercial Multiple Peril (Liability Portion) .....	274,174	134,764	0	154,870	0	16,118	18,156	0	0	0	64,107	512
6.	Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine .....	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans .....	93,575	86,549	0	39,664	0	(736)	2,303	0	0	0	22,217	175
10.	Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence .....	1,387	1,093	0	1,315	0	126	204	0	0	0	166	0
17.2	Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence .....	1,126	844	0	1,067	0	118	198	0	0	0	135	0
18.2	Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety .....	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit .....	0	0	0	0	0	0	0	0	0	0	0	0
29.	International .....	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0
31.	Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business .....	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a) .....	8,362,405	5,998,515	0	3,618,546	1,315,222	1,501,243	283,673	0	0	0	1,989,212	15,892
DETAILS OF WRITE-INS													
3401.	.....												
3402.	.....												
3403.	.....												
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ .....0  
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .

Schedule F - Part 1 - Assumed Reinsurance

**N O N E**

Schedule F - Part 2 - Premium Portfolio Reinsurance Effected or (Canceled)

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1  ID Number	2  NAIC Com- pany Code	3  Name of Reinsurer	4  Domiciliary Jurisdiction	5  Special Code	6  Reinsurance Premiums Ceded	Reinsurance Recoverable On									16  Amount in Dispute included in Column 15	Reinsurance Payable		19  Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20  Funds Held by Company Under Reinsurance Treaties
						7  Paid Losses	8  Paid LAE	9  Known Case Loss Reserves	10  Known Case LAE Reserves	11  IBNR Loss Reserves	12  IBNR LAE Reserves	13  Unearned Premiums	14  Contingent Commis- sions	15  Columns 7 through 14 Totals		17  Ceded Balances Payable	18  Other Amounts Due to Reinsurers		
74-2262949	.43273	INSURORS INDEMNITY COMPANY	TX		8,146	109	0	54	2	225	24	3,541	0	3,955	0	798	0	3,157	0
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other					8,146	109	0	54	2	225	24	3,541	0	3,955	0	798	0	3,157	0
0499999. Total Authorized - Affiliates - U.S. Non-Pool					8,146	109	0	54	2	225	24	3,541	0	3,955	0	798	0	3,157	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0899999. Total Authorized - Affiliates					8,146	109	0	54	2	225	24	3,541	0	3,955	0	798	0	3,157	0
05-0316605	.21482	FACTORY MUTUAL INSURANCE CO	RI		216	0	0	0	0	5	0	78	0	83	0	32	0	51	0
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					216	0	0	0	0	5	0	78	0	83	0	32	0	51	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					8,362	109	0	54	2	230	24	3,619	0	4,038	0	830	0	3,208	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3699999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					8,362	109	0	54	2	230	24	3,619	0	4,038	0	830	0	3,208	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals					8,362	109	0	54	2	230	24	3,619	0	4,038	0	830	0	3,208	0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)  
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
74-2262949 ..	INSURORS INDEMNITY COMPANY .....	0	0		0	798	3,157	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other		0	0	XXX	0	798	3,157	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	XXX	0	798	3,157	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
0899999. Total Authorized - Affiliates		0	0	XXX	0	798	3,157	0	0	0	0	0	0	0	XXX	0	0
05-0316605 ..	FACTORY MUTUAL INSURANCE CO .....	0	0		0	32	51	0	83	100	32	68	0	68	1	0	1
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		0	0	XXX	0	32	51	0	83	100	32	68	0	68	XXX	0	1
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	0	XXX	0	830	3,208	0	83	100	32	68	0	68	XXX	0	1
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999. Total Unauthorized - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3299999. Total Certified - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999. Total Certified - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non- U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	0	XXX	0	830	3,208	0	83	100	32	68	0	68	XXX	0	1
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals		0	0	XXX	0	830	3,208	0	83	100	32	68	0	68	XXX	0	1

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44  Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45  Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46  Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47  Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48  Amounts Received Prior 90 Days	49  Percentage Overdue Col. 42/Col. 43	50  Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51  Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52  Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53  Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37  Current	Overdue				43  Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38  1 - 29 Days	39  30 - 90 Days	40  91 - 120 Days	41  Over 120 Days											
74-2262949 .. INSURORS INDEMNITY COMPANY .....	0	109	0	0	0	109	109	0	0	109	0	0	100.0	0.0	0.0	YES	0
0399999. Total Authorized - Affiliates - U.S. Non-Pool - Other	0	109	0	0	0	109	109	0	0	109	0	0	100.0	0.0	0.0	XXX	0
0499999. Total Authorized - Affiliates - U.S. Non-Pool	0	109	0	0	0	109	109	0	0	109	0	0	100.0	0.0	0.0	XXX	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
0899999. Total Authorized - Affiliates	0	109	0	0	0	109	109	0	0	109	0	0	100.0	0.0	0.0	XXX	0
05-0316605 .. FACTORY MUTUAL INSURANCE CO .....	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
0999999. Total Authorized - Other U.S. Unaffiliated Insurers	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	109	0	0	0	109	109	0	0	109	0	0	100.0	0.0	0.0	XXX	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
2299999. Total Unauthorized - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
3299999. Total Certified - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
3699999. Total Certified - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
5099999. Total Reciprocal Jurisdiction - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	109	0	0	0	109	109	0	0	109	0	0	100.0	0.0	0.0	XXX	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
9999999 Totals	0	109	0	0	0	109	109	0	0	109	0	0	100.0	0.0	0.0	XXX	0

**SCHEDULE F - PART 3 (Continued)**

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															
		54  Certified Reinsurer Rating (1 through 6)	55  Effective Date of Certified Reinsurer Rating	56  Percent Collateral Required for Full Credit (0% through 100%)	57  Catastrophe Recoverables Qualifying for Collateral Deferral	58  Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	59  Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60  Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	61  Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63  Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	64  Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	65  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Complete if Col. 52 = "No"; Otherwise Enter 0			69  Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
														66  Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	67  Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	68  20% of Amount in Col. 67	
74-2262949 ..	INSURORS INDEMNITY COMPANY .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
03999999. Total Authorized - Affiliates - U.S. Non-Pool - Other				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
04999999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
07999999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
08999999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
05-0316605 ..	FACTORY MUTUAL INSURANCE CO .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
09999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
14999999. Total Authorized Excluding Protected Cells (Sum of 08999999, 09999999, 10999999, 11999999 and 12999999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
18999999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
21999999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
22999999. Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
28999999. Total Unauthorized Excluding Protected Cells (Sum of 22999999, 23999999, 24999999, 25999999 and 26999999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32999999. Total Certified - Affiliates - U.S. Non-Pool				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
35999999. Total Certified - Affiliates - Other (Non-U.S.)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
36999999. Total Certified - Affiliates				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
42999999. Total Certified Excluding Protected Cells (Sum of 36999999, 37999999, 38999999, 39999999 and 40999999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
46999999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
49999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
50999999. Total Reciprocal Jurisdiction - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
56999999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 50999999, 51999999, 52999999, 53999999 and 54999999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
57999999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 14999999, 28999999, 42999999 and 56999999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
58999999. Total Protected Cells (Sum of 13999999, 27999999, 41999999 and 55999999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
99999999 Totals				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)  
(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70  20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
74-2262949	INSURORS INDEMNITY COMPANY	0	XXX	XXX	0	0	0	XXX	XXX	0
0399999	Total Authorized - Affiliates - U.S. Non-Pool - Other	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
05-0316605	FACTORY MUTUAL INSURANCE CO	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	XXX	XXX	0	0	0	XXX	XXX	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	XXX	XXX	0	0	0	XXX	XXX	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	XXX	XXX	XXX	0	XXX	0
2299999	Total Unauthorized - Affiliates	0	0	0	XXX	XXX	XXX	0	XXX	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	0	XXX	XXX	XXX	0	XXX	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
5099999	Total Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	XXX	XXX	0	0	0	XXX	XXX	0
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	0	0	0	0	0	0	0	0
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0
9999999	Totals	0	0	0	0	0	0	0	0	0

Schedule F - Part 4 - Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3

**N O N E**

Schedule F - Part 5 - Interrogatories for Schedule F - Part 3

**N O N E**

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12) .....	18,873,214		18,873,214
2. Premiums and considerations (Line 15) .....	1,667,725	3,619,000	5,286,725
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	109,003	310,000	419,003
4. Funds held by or deposited with reinsured companies (Line 16.2) .....	0		0
5. Other assets .....	417,933		417,933
6. Net amount recoverable from reinsurers .....			0
7. Protected cell assets (Line 27) .....	0		0
8. Totals (Line 28) .....	21,067,875	3,929,000	24,996,875
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	0	310,000	310,000
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	492,311		492,311
11. Unearned premiums (Line 9) .....		3,619,000	3,619,000
12. Advance premiums (Line 10) .....	48,891		48,891
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....	830,621		830,621
15. Funds held by company under reinsurance treaties (Line 13) .....	0		0
16. Amounts withheld or retained by company for account of others (Line 14) .....			0
17. Provision for reinsurance (Line 16) .....	0		0
18. Other liabilities .....	88,046		88,046
19. Total liabilities excluding protected cell business (Line 26) .....	1,459,869	3,929,000	5,388,869
20. Protected cell liabilities (Line 27) .....			0
21. Surplus as regards policyholders (Line 37)	19,608,006	XXX	19,608,006
22. Totals (Line 38)	21,067,875	3,929,000	24,996,875

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements? ..... Yes [        ] No [ X    ]

If yes, give full explanation: .....

Schedule H - Part 1 - Analysis of Underwriting Operations

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES**

**SCHEDULE P - PART 1 - SUMMARY**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2015.....	8,837.....	8,837.....	0.....	4,713.....	4,713.....	133.....	133.....	212.....	212.....	411.....	0.....	XXX.....
3. 2016.....	11,823.....	11,823.....	0.....	6,680.....	6,680.....	191.....	191.....	418.....	418.....	82.....	0.....	XXX.....
4. 2017.....	12,956.....	12,956.....	0.....	4,913.....	4,913.....	298.....	298.....	358.....	358.....	92.....	0.....	XXX.....
5. 2018.....	13,650.....	13,650.....	0.....	2,846.....	2,846.....	37.....	37.....	261.....	261.....	34.....	0.....	XXX.....
6. 2019.....	14,726.....	14,726.....	0.....	6,374.....	6,374.....	18.....	18.....	277.....	277.....	81.....	0.....	XXX.....
7. 2020.....	13,236.....	13,236.....	0.....	5,421.....	5,421.....	2.....	2.....	317.....	317.....	22.....	0.....	XXX.....
8. 2021.....	616.....	616.....	0.....	16.....	16.....	0.....	0.....	4.....	4.....	0.....	0.....	XXX.....
9. 2022.....	1,804.....	1,804.....	0.....	505.....	505.....	0.....	0.....	65.....	65.....	0.....	0.....	XXX.....
10. 2023.....	2,335.....	2,335.....	0.....	500.....	500.....	0.....	0.....	80.....	80.....	0.....	0.....	XXX.....
11. 2024.....	5,999.....	5,999.....	0.....	1,269.....	1,269.....	0.....	0.....	140.....	140.....	0.....	0.....	XXX.....
12. Totals.....	XXX.....	XXX.....	XXX.....	33,237.....	33,237.....	679.....	679.....	2,132.....	2,132.....	722.....	0.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	2
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	1
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024	54	54	229	229	0	0	5	5	20	20	0	0	4
12. Totals	54	54	229	229	0	0	5	5	20	20	0	0	7

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2015.....	5,058.....	5,058.....	0.....	57.2.....	57.2.....	0.0.....	0.....	0.....		0.....	0.....
3. 2016.....	7,289.....	7,289.....	0.....	61.7.....	61.7.....	0.0.....	0.....	0.....		0.....	0.....
4. 2017.....	5,569.....	5,569.....	0.....	43.0.....	43.0.....	0.0.....	0.....	0.....		0.....	0.....
5. 2018.....	3,144.....	3,144.....	0.....	23.0.....	23.0.....	0.0.....	0.....	0.....		0.....	0.....
6. 2019.....	6,669.....	6,669.....	0.....	45.3.....	45.3.....	0.0.....	0.....	0.....		0.....	0.....
7. 2020.....	5,740.....	5,740.....	0.....	43.4.....	43.4.....	0.0.....	0.....	0.....		0.....	0.....
8. 2021.....	20.....	20.....	0.....	3.2.....	3.2.....	0.0.....	0.....	0.....		0.....	0.....
9. 2022.....	570.....	570.....	0.....	31.6.....	31.6.....	0.0.....	0.....	0.....		0.....	0.....
10. 2023.....	580.....	580.....	0.....	24.8.....	24.8.....	0.0.....	0.....	0.....		0.....	0.....
11. 2024.....	1,717.....	1,717.....	0.....	28.6.....	28.6.....	0.0.....	0.....	0.....		0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.



SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2015.....	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	XXX	XXX
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	XXX	XXX
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX	XXX
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX.....
2. 2015.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2016.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
4. 2017.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
5. 2018.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
6. 2019.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
7. 2020.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
8. 2021.....	.....391	.....391	.....0	.....0	.....0	.....0	.....0	.....1	.....1	.....0	.....0	.....3
9. 2022.....	.....1,165	.....1,165	.....0	.....371	.....371	.....0	.....0	.....46	.....46	.....0	.....0	.....64
10. 2023.....	.....1,017	.....1,017	.....0	.....288	.....288	.....0	.....0	.....47	.....47	.....0	.....0	.....70
11. 2024.....	.....2,678	.....2,678	.....0	.....575	.....575	.....0	.....0	.....64	.....64	.....0	.....0	.....98
12. Totals.....	XXX.....	XXX.....	XXX.....	.....1,234	.....1,234	.....0	.....0	.....158	.....158	.....0	.....0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024.....	7	7	69	69	0	0	0	0	7	7	0	0	1
12. Totals.....	7	7	69	69	0	0	0	0	7	7	0	0	1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2015.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2016.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2017.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2018.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2019.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2020.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2021.....	1.....	1.....	0.....	0.3.....	0.3.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2022.....	417.....	417.....	0.....	35.8.....	35.8.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2023.....	335.....	335.....	0.....	32.9.....	32.9.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2024.....	722.....	722.....	0.....	27.0.....	27.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

Schedule P - Part 1B - Private Passenger Auto Liability/Medical  
**N O N E**

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical  
**N O N E**

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	6,967	6,967	0	4,434	4,434	118	118	180	180	387	0	262
3. 2016.....	8,852	8,852	0	5,957	5,957	187	187	359	359	22	0	435
4. 2017.....	9,662	9,662	0	4,217	4,217	287	287	279	279	91	0	392
5. 2018.....	10,245	10,245	0	2,411	2,411	17	17	209	209	32	0	272
6. 2019.....	11,346	11,346	0	4,100	4,100	10	10	212	212	51	0	363
7. 2020.....	10,229	10,229	0	4,731	4,731	2	2	256	256	21	0	369
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	168	168	0	0	0	0	0	0	0	0	0	0
11. 2024.....	782	782	0	69	69	0	0	3	3	0	0	5
12. Totals	XXX	XXX	XXX	25,919	25,919	621	621	1,498	1,498	604	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024	33	33	69	69	0	0	5	5	4	4	0	0	1
12. Totals	33	33	69	69	0	0	5	5	4	4	0	0	1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	.....0	.....0
2. 2015.....	4,732	4,732	.....0	67.9	67.9	.....0.0	.....0	.....0	.....0.0	.....0	.....0
3. 2016.....	6,503	6,503	.....0	73.5	73.5	.....0.0	.....0	.....0	.....0.0	.....0	.....0
4. 2017.....	4,783	4,783	.....0	49.5	49.5	.....0.0	.....0	.....0	.....0.0	.....0	.....0
5. 2018.....	2,637	2,637	.....0	25.7	25.7	.....0.0	.....0	.....0	.....0.0	.....0	.....0
6. 2019.....	4,322	4,322	.....0	38.1	38.1	.....0.0	.....0	.....0	.....0.0	.....0	.....0
7. 2020.....	4,989	4,989	.....0	48.8	48.8	.....0.0	.....0	.....0	.....0.0	.....0	.....0
8. 2021.....	0	0	.....0	0.0	0.0	.....0.0	.....0	.....0	.....0.0	.....0	.....0
9. 2022.....	0	0	.....0	0.0	0.0	.....0.0	.....0	.....0	.....0.0	.....0	.....0
10. 2023.....	0	0	.....0	0.0	0.0	.....0.0	.....0	.....0	.....0.0	.....0	.....0
11. 2024.....	183	183	0	23.4	23.4	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

**N O N E**

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

**N O N E**

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	415	415	0	5	5	5	5	1	1	0	0	3
3. 2016.....	419	419	0	0	0	4	4	3	3	0	0	2
4. 2017.....	400	400	0	28	28	0	0	2	2	0	0	1
5. 2018.....	395	395	0	4	4	19	19	7	7	1	0	7
6. 2019.....	401	401	0	2	2	7	7	4	4	1	0	6
7. 2020.....	323	323	0	10	10	0	0	1	1	1	0	5
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	1	1	0	0	0	0	0	0	0	0	0	0
11. 2024.....	1	1	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	49	49	35	35	18	18	3	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	2
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	1
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	3

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	.....0	.....0
2. 2015.....	11.....	11.....	.....0	.....2.7	.....2.7	.....0.0	.....0	.....0	.....0.0	.....0	.....0
3. 2016.....	7.....	7.....	.....0	.....1.7	.....1.7	.....0.0	.....0	.....0	.....0.0	.....0	.....0
4. 2017.....	30.....	30.....	.....0	.....7.5	.....7.5	.....0.0	.....0	.....0	.....0.0	.....0	.....0
5. 2018.....	30.....	30.....	.....0	.....7.6	.....7.6	.....0.0	.....0	.....0	.....0.0	.....0	.....0
6. 2019.....	13.....	13.....	.....0	.....3.2	.....3.2	.....0.0	.....0	.....0	.....0.0	.....0	.....0
7. 2020.....	11.....	11.....	.....0	.....3.4	.....3.4	.....0.0	.....0	.....0	.....0.0	.....0	.....0
8. 2021.....	0.....	0.....	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.0	.....0	.....0
9. 2022.....	0.....	0.....	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.0	.....0	.....0
10. 2023.....	0.....	0.....	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....0.0	.....0	.....0
11. 2024.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported Direct and Assumed
	Direct and Assumed	Ceded	Net (1 - 2)	4	5	6	7	8	9	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												
3. 2016.....												
4. 2017.....												
5. 2018.....												
6. 2019.....												
7. 2020.....												
8. 2021.....												
9. 2022.....												
10. 2023.....												
11. 2024.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
12. Totals													

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015.....											
3. 2016.....											
4. 2017.....											
5. 2018.....											
6. 2019.....											
7. 2020.....											
8. 2021.....											
9. 2022.....											
10. 2023.....											
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	1,415	1,415	0	243	243	0	0	30	30	24	0	XXX.....
3. 2016.....	2,512	2,512	0	722	722	0	0	55	55	59	0	XXX.....
4. 2017.....	2,855	2,855	0	654	654	10	10	75	75	0	0	XXX.....
5. 2018.....	2,970	2,970	0	431	431	1	1	45	45	1	0	XXX.....
6. 2019.....	2,932	2,932	0	2,272	2,272	1	1	61	61	29	0	XXX.....
7. 2020.....	2,647	2,647	0	679	679	0	0	60	60	0	0	XXX.....
8. 2021.....	225	225	0	16	16	0	0	3	3	0	0	XXX.....
9. 2022.....	639	639	0	134	134	0	0	19	19	0	0	XXX.....
10. 2023.....	1,148	1,148	0	212	212	0	0	33	33	0	0	XXX.....
11. 2024.....	2,450	2,450	0	625	625	0	0	73	73	0	0	XXX.....
12. Totals	XXX	XXX	XXX	5,988	5,988	12	12	454	454	113	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid		Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024.....	14	14	89	89	0	0	0	0	9	9	0	0	2
12. Totals	14	14	89	89	0	0	0	0	9	9	0	0	2

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2015.....	273	273	0	19.3	19.3	0.0	0	0	0.0	0	0
3. 2016.....	777	777	0	30.9	30.9	0.0	0	0	0.0	0	0
4. 2017.....	739	739	0	25.9	25.9	0.0	0	0	0.0	0	0
5. 2018.....	477	477	0	16.1	16.1	0.0	0	0	0.0	0	0
6. 2019.....	2,334	2,334	0	79.6	79.6	0.0	0	0	0.0	0	0
7. 2020.....	739	739	0	27.9	27.9	0.0	0	0	0.0	0	0
8. 2021.....	19	19	0	8.4	8.4	0.0	0	0	0.0	0	0
9. 2022.....	153	153	0	23.9	23.9	0.0	0	0	0.0	0	0
10. 2023.....	245	245	0	21.3	21.3	0.0	0	0	0.0	0	0
11. 2024.....	810	810	0	33.1	33.1	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0



Schedule P - Part 1J - Auto Physical Damage  
**N O N E**

Schedule P - Part 1K - Fidelity/Surety  
**N O N E**

Schedule P - Part 1L - Other (Including Credit, Accident and Health)  
**N O N E**

Schedule P - Part 1M - International  
**N O N E**

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property  
**N O N E**

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability  
**N O N E**

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	40	40	0	31	31	10	10	1	1	0	0	4
3. 2016.....	40	40	0	1	1	0	0	1	1	1	0	2
4. 2017.....	39	39	0	14	14	1	1	2	2	1	0	3
5. 2018.....	40	40	0	0	0	0	0	0	0	0	0	0
6. 2019.....	47	47	0	0	0	0	0	0	0	0	0	0
7. 2020.....	37	37	0	1	1	0	0	0	0	0	0	1
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	1	1	0	0	0	0	0	0	0	0	0	0
11. 2024.....	1	1	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	47	47	11	11	4	4	2	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2015.....	42.....	42.....	0.....	105.0.....	105.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2016.....	2.....	2.....	0.....	5.0.....	5.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2017.....	17.....	17.....	0.....	43.6.....	43.6.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2018.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2019.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2020.....	1.....	1.....	0.....	2.7.....	2.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2021.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2022.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2023.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2024.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

**N O N E**

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

**N O N E**

Schedule P - Part 1T - Warranty

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1U - PET INSURANCE PLANS**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1  Direct and Assumed	2  Ceded	3  Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10  Salvage and Subrogation Received	11  Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
				4  Direct and Assumed	5  Ceded	6  Direct and Assumed	7  Ceded	8  Direct and Assumed	9  Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
11. 2024.....	87	87	0	0	0	0	0	0	0	0	0	XXX.....
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024.....	0	0	2	2	0	0	0	0	0	0	0	0	0
12. Totals	0	0	2	2	0	0	0	0	0	0	0	0	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0
2. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2022.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2023.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2024.....	2	2	0	2.3	2.3	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),  
BOILER AND MACHINERY)

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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**SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....										0	0	0
2. 2015.....							0	0	0	0	0	0
3. 2016.....	XXX						0	0	0	0	0	0
4. 2017.....	XXX	XXX					0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX				0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX			0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX			0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

**SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2K - FIDELITY/SURETY**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2M - INTERNATIONAL**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2N - REINSURANCE  
NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX									
7. 2020.....	XXX	XXX	XXX	XXX								
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2P - REINSURANCE  
NONPROPORTIONAL ASSUMED FINANCIAL LINES

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												



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**SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

**SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2T - WARRANTY**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2U - PET INSURANCE PLANS**

1. Prior.....										0	0	0
2. 2015.....										0	0	0
3. 2016.....	XXX									0	0	0
4. 2017.....	XXX	XXX								0	0	0
5. 2018.....	XXX	XXX	XXX							0	0	0
6. 2019.....	XXX	XXX	XXX	XXX						0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX					0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	.....
2. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2016.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2017.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2018.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	3.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	28.....	36.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	32.....	38.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	61.....	36.....

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

SCHEDULE P - PART 3D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	17.....	.....
2. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	176.....	86.....
3. 2016.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	252.....	183.....
4. 2017.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	199.....	193.....
5. 2018.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	154.....	118.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	219.....	144.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	178.....	191.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	2.....	2.....	2.....

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SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	000.....										XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....	XXX.....										XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....0
3. 2016.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....1
4. 2017.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....0
5. 2018.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....2
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....2
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....3
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....0
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....0
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....0
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....		

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

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**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000									0	XXX	XXX
2. 2015.....							0	0	0	0	XXX	XXX
3. 2016.....	XXX						0	0	0	0	XXX	XXX
4. 2017.....	XXX	XXX					0	0	0	0	XXX	XXX
5. 2018.....	XXX	XXX	XXX				0	0	0	0	XXX	XXX
6. 2019.....	XXX	XXX	XXX	XXX			0	0	0	0	XXX	XXX
7. 2020.....	XXX	XXX	XXX	XXX	XXX			0	0	0	XXX	XXX
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX	XXX
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

**SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE**

1. Prior.....	000											
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

**SCHEDULE P - PART 3K - FIDELITY/SURETY**

1. Prior.....	000										XXX	XXX
2. 2015.....											XXX	XXX
3. 2016.....	XXX										XXX	XXX
4. 2017.....	XXX	XXX									XXX	XXX
5. 2018.....	XXX	XXX	XXX								XXX	XXX
6. 2019.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

**SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

1. Prior.....	000										XXX	XXX
2. 2015.....											XXX	XXX
3. 2016.....	XXX										XXX	XXX
4. 2017.....	XXX	XXX									XXX	XXX
5. 2018.....	XXX	XXX	XXX								XXX	XXX
6. 2019.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

**SCHEDULE P - PART 3M - INTERNATIONAL**

1. Prior.....	000										XXX	XXX
2. 2015.....											XXX	XXX
3. 2016.....	XXX										XXX	XXX
4. 2017.....	XXX	XXX									XXX	XXX
5. 2018.....	XXX	XXX	XXX								XXX	XXX
6. 2019.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3N - REINSURANCE  
NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....										XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....	XXX.....										XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

SCHEDULE P - PART 3O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	000.....										XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....	XXX.....										XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

SCHEDULE P - PART 3P - REINSURANCE  
NONPROPORTIONAL ASSUMED FINANCIAL LINES

1. Prior.....	000.....										XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....	XXX.....										XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

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**SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	.....
2. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	1.....
3. 2016.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	0.....
4. 2017.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	1.....
5. 2018.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	1.....	0.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	.....	.....

**SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

**SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

1. Prior.....	000.....										XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....	XXX.....										XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

**SCHEDULE P - PART 3T - WARRANTY**

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

**SCHEDULE P - PART 3U - PET INSURANCE PLANS**

1. Prior.....	000.....									0.....	XXX.....	XXX.....
2. 2015.....										0.....	XXX.....	XXX.....
3. 2016.....	XXX.....									0.....	XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....								0.....	XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....							0.....	XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						0.....	XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					0.....	XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				0.....	XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			0.....	XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		0.....	XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	XXX.....	XXX.....

SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0								
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XX						
7. 2020.....	XXX	XXX	XX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XX	XXX	XXX					
8. 2021.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XX	XXX	XXX					
8. 2021.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XX	XXX	XXX					
8. 2021.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	



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**SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										0
2. 2015.....										0
3. 2016.....	XXX									0
4. 2017.....	XXX	XXX								0
5. 2018.....	XXX	XXX	XXX							0
6. 2019.....	XXX	XXX	XXX	XXX						0
7. 2020.....	XXX	XXX	XXX	XXX	XXX					0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4K - FIDELITY/SURETY**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4M - INTERNATIONAL**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4N - REINSURANCE  
NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XX	XX						
7. 2020.....	XXX	XXX	XX	XX	XX					
8. 2021.....	XXX	XXX	XX	XX	XX	XX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4P - REINSURANCE  
NONPROPORTIONAL ASSUMED FINANCIAL LINES

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XX	XX						
7. 2020.....	XXX	XXX	XX	XX	XX					
8. 2021.....	XXX	XXX	XX	XX	XX	XX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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**SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4T - WARRANTY**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4U - PET INSURANCE PLANS**

1. Prior.....										0
2. 2015.....										0
3. 2016.....	XXX									0
4. 2017.....	XXX	XXX								0
5. 2018.....	XXX	XXX	XXX							0
6. 2019.....	XXX	XXX	XXX	XXX						0
7. 2020.....	XXX	XXX	XXX	XXX	XXX					0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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**SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS**

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	25	28
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	32
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0				
3. 2016.....	XXX	0	0	0	0	0				
4. 2017.....	XXX	XXX	0	0	0	0				
5. 2018.....	XXX	XXX	XXX	0	0	0				
6. 2019.....	XXX	XXX	XXX	XXX	0	0				
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0				
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9		
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0		0	0
3. 2016.....	XXX	0	0	0	0	0	0		0	0
4. 2017.....	XXX	XXX	0	0	0	0	0		0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0		0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0		0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0		0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	9	9	2	3
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52	49	64
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45	70
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1  
**N O N E**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2  
**N O N E**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3  
**N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1  
**N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2  
**N O N E**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3  
**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1  
**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2  
**N O N E**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3  
**N O N E**

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**SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL**

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	25	15	1	0	1	0	0	0	0	
2. 2015.....	94	153	171	171	173	176	176	176	176	176
3. 2016.....	XXX	151	224	241	243	252	252	252	252	252
4. 2017.....	XXX	XXX	143	191	197	199	204	204	204	199
5. 2018.....	XXX	XXX	XXX	110	144	154	157	157	157	154
6. 2019.....	XXX	XXX	XXX	XXX	142	219	226	226	226	219
7. 2020.....	XXX	XXX	XXX	XXX	XXX	178	264	264	264	178
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	14	2	0	0	0	0	0	0	0	
2. 2015.....	48	14	7	1	1	0				
3. 2016.....	XXX	101	31	13	3	0				
4. 2017.....	XXX	XXX	60	17	9	5				
5. 2018.....	XXX	XXX	XXX	30	6	3				
6. 2019.....	XXX	XXX	XXX	XXX	35	7				
7. 2020.....	XXX	XXX	XXX	XXX	XXX	86				
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	15	9	0	0	0	2	0	0	0	0
2. 2015.....	225	258	259	260	262	262	262	262	262	262
3. 2016.....	XXX	390	423	435	435	436	435	435	435	435
4. 2017.....	XXX	XXX	351	388	393	397	397	397	397	392
5. 2018.....	XXX	XXX	XXX	250	267	275	275	275	275	272
6. 2019.....	XXX	XXX	XXX	XXX	261	370	370	370	370	363
7. 2020.....	XXX	XXX	XXX	XXX	XXX	455	455	455	455	369
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A  
**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A  
**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A  
**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B  
**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B  
**N O N E**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	1	0	0	0	0	0	0	0	0	
2. 2015.....	1	3	3	3	3	3	3	3	3	3
3. 2016.....	XXX	1	1	1	1	1	1	1	1	1
4. 2017.....	XXX	XXX	1	1	1	1	1	1	1	1
5. 2018.....	XXX	XXX	XXX	1	3	3	3	3	3	3
6. 2019.....	XXX	XXX	XXX	XXX	3	3	3	3	3	3
7. 2020.....	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	1	0	0	0	0	0	0	0	
2. 2015.....	1	0	0	0	0	0				
3. 2016.....	XXX	1	1	1	0	0				
4. 2017.....	XXX	XXX	0	0	0	0				
5. 2018.....	XXX	XXX	XXX	2	1	0				2
6. 2019.....	XXX	XXX	XXX	XXX	3	0				1
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0				
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	1	0	0	0	0	0	0	0	0
2. 2015.....	2	3	3	3	3	3	3	3	3	3
3. 2016.....	XXX	2	2	2	2	2	2	2	2	2
4. 2017.....	XXX	XXX	1	1	1	1	1	1	1	1
5. 2018.....	XXX	XXX	XXX	6	7	7	5	5	5	7
6. 2019.....	XXX	XXX	XXX	XXX	6	6	5	5	5	6
7. 2020.....	XXX	XXX	XXX	XXX	XXX	5	5	5	5	5
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0



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**SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE**

**SECTION 1B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2B**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XX							
6. 2019.....	XXX	XXX	XX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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**SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	1	0	1	0	0	0	0	0	
2. 2015.....	1	3	3	3	3	3	3	3	3	3
3. 2016.....	XXX	1	2	2	3	2	2	2	2	2
4. 2017.....	XXX	XXX	2	3	2	2	2	2	2	2
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	2	1	1	0	0	0	0	0	0	
2. 2015.....	2	0	0	0	0	0				
3. 2016.....	XXX	1	0	0	0	0				
4. 2017.....	XXX	XXX	0	0	0	0				
5. 2018.....	XXX	XXX	XXX	0	0	0				
6. 2019.....	XXX	XXX	XXX	XXX	0	0				
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0				
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	3	4	4	4	4	4	4	4	4	4
3. 2016.....	XXX	2	2	2	2	2	2	2	2	2
4. 2017.....	XXX	XXX	2	3	3	3	3	3	3	3
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

**N O N E**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

**N O N E**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

**N O N E**

Schedule P - Part 5T - Warranty - Section 1

**N O N E**

Schedule P - Part 5T - Warranty - Section 2

**N O N E**

Schedule P - Part 5T - Warranty - Section 3

**N O N E**

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

**N O N E**

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

**N O N E**

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

**N O N E**

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

**N O N E**

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**SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL**

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0	0	0	0	0	
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	10,229	10,229	10,229	10,229	10,229	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	168	168	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	782	782
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	782
13. Earned Premiums (Sch P-Pt. 1)	6,967	8,852	9,662	10,245	11,346	10,229	0	0	168	782	XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0	0	0	0	0	
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	10,229	10,229	10,229	10,229	10,229	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	168	168	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	782	782
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	782
13. Earned Premiums (Sch P-Pt. 1)	6,967	8,852	9,662	10,245	11,346	10,229	0	0	168	782	XXX

**SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0	0	0	0	0	
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	323	323	323	323	323	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sch P-Pt. 1)	415	419	400	395	401	323	0	0	1	1	XXX

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0	0	0	0	0	
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	323	323	323	323	323	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sch P-Pt. 1)	415	419	400	395	401	323	0	0	1	1	XXX

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B  
**N O N E**

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B  
**N O N E**

Schedule P - Part 6M - International - Section 1  
**N O N E**

Schedule P - Part 6M - International - Section 2  
**N O N E**

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1  
**N O N E**

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2  
**N O N E**

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1  
**N O N E**

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0	0	0	0	0	
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2019.....	XXX	XXX	XXX	XXX	47	47	47	47	47	47	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	37	37	37	37	37	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sch P-Pt. 1)	40	40	39	40	47	37	0	0	1	1	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2015.....	0	0	0	0	0	0	0	0	0	0	
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	37	37	37	37	37	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sch P-Pt. 1)	40	40	39	40	47	37	0	0	1	1	XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

**N O N E**

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or “ERE”) benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? ..... Yes [    ] No [ X ]  
If the answer to question 1.1 is “no”, leave the following questions blank. If the answer to question 1.1 is “yes”, please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? .....\$ .....
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? ..... Yes [    ] No [ X ]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? ..... Yes [    ] No [ X ]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? ..... Yes [    ] No [    ] N/A [ X ]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior .....	.....	.....
1.602	2015 .....	.....	.....
1.603	2016 .....	.....	.....
1.604	2017 .....	.....	.....
1.605	2018 .....	.....	.....
1.606	2019 .....	.....	.....
1.607	2020 .....	.....	.....
1.608	2021 .....	.....	.....
1.609	2022 .....	.....	.....
1.610	2023 .....	.....	.....
1.611	2024 .....	.....	.....
1.612	Totals	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as “Defense and Cost Containment” and “Adjusting and Other” ) reported in compliance with these definitions in this statement? ..... Yes [ X ] No [    ]
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? ..... Yes [ X ] No [    ]
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? ..... Yes [    ] No [ X ]  
  
If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.  
Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums in force at the end of the year for:  
(in thousands of dollars)  

5.1 Fidelity .....  
5.2 Surety .....
6. Claim count information is reported per claim or per claimant (Indicate which) ..... per claim.....  
If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? ..... Yes [    ] No [ X ]
- 7.2 (An extended statement may be attached.)  
.....



SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories									
States, Etc.	1	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4	5	6	7	8	9
		2	3						
	Active Status (a)	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges Not Included in Premiums	Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. District of Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	E	36,571	27,578	0	0	0	0	
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	E	9,009	5,106	0	0	0	0	
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	D	8,316,825	5,965,831	0	1,315,222	1,501,243	283,673	
45. Utah	UT	N							
46. Vermont	VT	N							
47. Virginia	VA	N							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0
59. Totals	XXX	8,362,405	5,998,515	0	1,315,222	1,501,243	283,673	0	0
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 0

2. R - Registered - Non-domiciled RRGs..... 0

3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)..... 2

4. Q - Qualified - Qualified or accredited reinsurer..... 0

5. D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile..... 1

6. N - None of the above - Not allowed to write business in the state... 54

(b) Explanation of basis of allocation of premiums by states, etc.

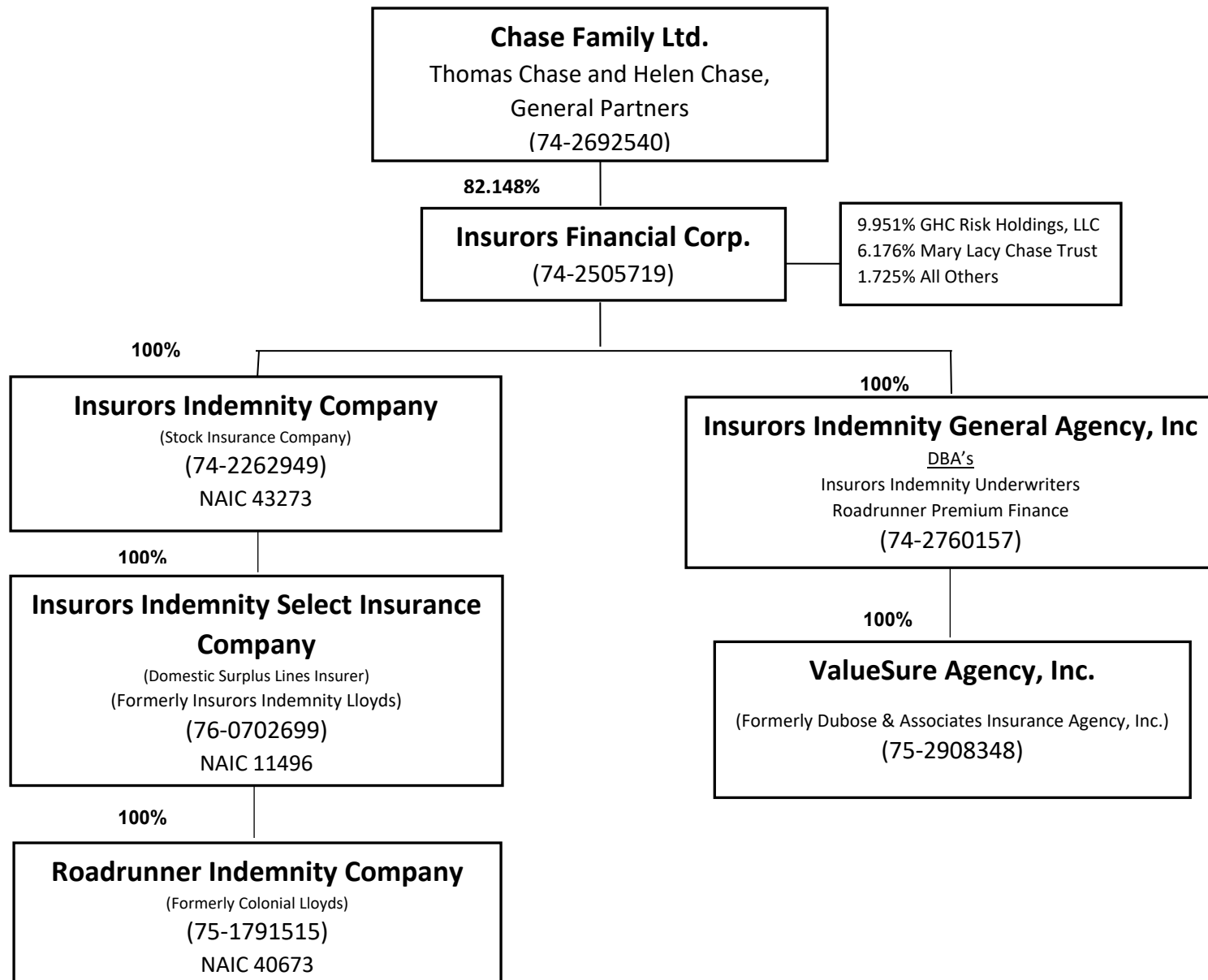
AMOUNT OF DIRECT WRITTEN PREMIUM OF POLICIES WRITTEN IN THE ALLOCATED BY STATE

SCHEDULE T - PART 2  
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

NONE



Effective: 8/14/2024

**SCHEDULE Y**  
**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

Asterisk	

# NONE

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

## SCHEDULE Y

## PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

[illegible]

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

## SCHEDULE Y

**PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL**

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.




		Responses
MARCH FILING		
1.	Will an actuarial opinion be filed by March 1? .....	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?.....	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? .....	YES
6.	Will Management’s Discussion and Analysis be filed by April 1? .....	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1? .....	YES
MAY FILING		
8.	Will this company be included in a combined annual statement which is filed with the NAIC by May 1? .....	WAIVED
JUNE FILING		
9.	Will an audited financial report be filed by June 1? .....	YES
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES

SUPPLEMENTAL FILINGS

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

MARCH FILING		
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? .....	NO
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?.....	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....	NO
14.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? .....	NO
15.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....	NO
16.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? .....	NO
17.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? ...	NO
18.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
19.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?..	YES
20.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? .....	NO
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
24.	Will an approval from the reporting entity’s state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? .....	NO
25.	Will an approval from the reporting entity’s state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? .....	NO
26.	Will an approval from the reporting entity’s state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	NO
27.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?.....	NO
28.	Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1? .....	YES
29.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?.....	YES
APRIL FILING		
30.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
31.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	NO
32.	Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	NO
33.	Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1? .....	NO
34.	Will the Cybersecurity Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
35.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? .....	NO
36.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
37.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
AUGUST FILING		
38.	Will Management’s Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	NO
Explanations:		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
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Bar Codes:

8.	Combined Statement [Document Identifier 201]	
11.	SIS Stockholder Information Supplement [Document Identifier 420]	
12.	Financial Guaranty Insurance Exhibit [Document Identifier 240]	
13.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
14.	Supplement A to Schedule T [Document Identifier 455]	
15.	Trusteed Surplus Statement [Document Identifier 490]	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

16.	Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	 <div>1 1 4 9 6 2 0 2 4 3 8 5 0 0 0 0 0</div>
17.	Reinsurance Summary Supplemental Filing [Document Identifier 401]	 <div>1 1 4 9 6 2 0 2 4 4 0 1 0 0 0 0 0</div>
18.	Medicare Part D Coverage Supplement [Document Identifier 365]	 <div>1 1 4 9 6 2 0 2 4 3 6 5 0 0 0 0 0</div>
20.	Reinsurance Attestation Supplement [Document Identifier 399]	 <div>1 1 4 9 6 2 0 2 4 3 9 9 0 0 0 0 0</div>
21.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 <div>1 1 4 9 6 2 0 2 4 4 0 0 0 0 0 0 0</div>
22.	Bail Bond Supplement [Document Identifier 500]	 <div>1 1 4 9 6 2 0 2 4 5 0 0 0 0 0 0 0</div>
23.	Director and Officer Insurance Coverage Supplement [Document Identifier 505]	 <div>1 1 4 9 6 2 0 2 4 5 0 5 0 0 0 0 0</div>
24.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 <div>1 1 4 9 6 2 0 2 4 2 2 4 0 0 0 0 0</div>
25.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 <div>1 1 4 9 6 2 0 2 4 2 2 5 0 0 0 0 0</div>
26.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 <div>1 1 4 9 6 2 0 2 4 2 2 6 0 0 0 0 0</div>
27.	Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]	 <div>1 1 4 9 6 2 0 2 4 5 5 5 0 0 0 0 0</div>
30.	Credit Insurance Experience Exhibit [Document Identifier 230]	 <div>1 1 4 9 6 2 0 2 4 2 3 0 0 0 0 0 0</div>
31.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 <div>1 1 4 9 6 2 0 2 4 3 0 6 0 0 0 0 0</div>
32.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 <div>1 1 4 9 6 2 0 2 4 2 1 0 0 0 0 0 0</div>
33.	Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 <div>1 1 4 9 6 2 0 2 4 2 1 6 0 0 0 0 0</div>
34.	Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]	 <div>1 1 4 9 6 2 0 2 4 5 5 0 0 0 0 0 0</div>
35.	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 <div>1 1 4 9 6 2 0 2 4 2 9 0 0 0 0 0 0</div>
36.	Private Flood Insurance Supplement [Document Identifier 560]	 <div>1 1 4 9 6 2 0 2 4 5 6 0 0 0 0 0 0</div>
37.	Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]	 <div>1 1 4 9 6 2 0 2 4 5 6 5 0 0 0 0 0</div>
38.	Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]	 <div>1 1 4 9 6 2 0 2 4 2 2 3 0 0 0 0 0</div>



**OVERFLOW PAGE FOR WRITE-INS**

**NONE**

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1	2	3	4	5	6
	Amount	Percentage of Column 1 Line 13	Amount	Securities Lending Reinvested Collateral Amount	Total (Col. 3 + 4) Amount	Percentage of Column 5 Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. governments .....	2,390,606	12.667	2,390,606	0	2,390,606	12.667
1.02 All other governments .....		0.000	0	0	0	0.000
1.03 U.S. states, territories and possessions, etc. guaranteed .....		0.000	0	0	0	0.000
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed .....		0.000	0	0	0	0.000
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed .....	2,000,454	10.599	2,000,454	0	2,000,454	10.599
1.06 Industrial and miscellaneous .....	919,203	4.870	919,203	0	919,203	4.870
1.07 Hybrid securities .....		0.000	0	0	0	0.000
1.08 Parent, subsidiaries and affiliates .....		0.000	0	0	0	0.000
1.09 SVO identified funds .....		0.000	0	0	0	0.000
1.10 Unaffiliated bank loans .....		0.000	0	0	0	0.000
1.11 Unaffiliated certificates of deposit .....	495,000	2.623	495,000	0	495,000	2.623
1.12 Total long-term bonds .....	5,805,263	30.759	5,805,263	0	5,805,263	30.759
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated) .....		0.000	0	0	0	0.000
2.02 Parent, subsidiaries and affiliates .....		0.000	0	0	0	0.000
2.03 Total preferred stocks .....	0	0.000	0	0	0	0.000
3. Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated) .....	0	0.000	0	0	0	0.000
3.02 Industrial and miscellaneous Other (Unaffiliated) .....	0	0.000	0	0	0	0.000
3.03 Parent, subsidiaries and affiliates Publicly traded .....	0	0.000	0	0	0	0.000
3.04 Parent, subsidiaries and affiliates Other .....	10,106,795	53.551	10,106,795	0	10,106,795	53.551
3.05 Mutual funds .....	0	0.000	0	0	0	0.000
3.06 Unit investment trusts .....	0	0.000	0	0	0	0.000
3.07 Closed-end funds .....	0	0.000	0	0	0	0.000
3.08 Exchange traded funds .....	0	0.000	0	0	0	0.000
3.09 Total common stocks .....	10,106,795	53.551	10,106,795	0	10,106,795	53.551
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages .....	0	0.000	0	0	0	0.000
4.02 Residential mortgages .....	0	0.000	0	0	0	0.000
4.03 Commercial mortgages .....	0	0.000	0	0	0	0.000
4.04 Mezzanine real estate loans .....	0	0.000	0	0	0	0.000
4.05 Total valuation allowance .....		0.000	0	0	0	0.000
4.06 Total mortgage loans .....	0	0.000	0	0	0	0.000
5. Real estate (Schedule A):						
5.01 Properties occupied by company .....		0.000	0	0	0	0.000
5.02 Properties held for production of income .....		0.000	0	0	0	0.000
5.03 Properties held for sale .....		0.000	0	0	0	0.000
5.04 Total real estate .....	0	0.000	0	0	0	0.000
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1) .....	2,936,913	15.561	2,936,913	0	2,936,913	15.561
6.02 Cash equivalents (Schedule E, Part 2) .....	24,243	0.128	24,243	0	24,243	0.128
6.03 Short-term investments (Schedule DA) .....		0.000	0	0	0	0.000
6.04 Total cash, cash equivalents and short-term investments .....	2,961,156	15.690	2,961,156	0	2,961,156	15.690
7. Contract loans .....	0	0.000	0	0	0	0.000
8. Derivatives (Schedule DB) .....	0	0.000	0	0	0	0.000
9. Other invested assets (Schedule BA) .....	0	0.000	0	0	0	0.000
10. Receivables for securities .....	0	0.000	0	0	0	0.000
11. Securities Lending (Schedule DL, Part 1).....	0	0.000	0	XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11) .....	0	0.000	0	0	0	0.000
13. Total invested assets	18,873,214	100.000	18,873,214	0	18,873,214	100.000

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1. Book/adjusted carrying value, December 31 of prior year

2. Cost of acquired:

2.1 Actual cost at time of acquisition (Part 2, Column 6)

2.2 Additional investment made after acquisition (Part 2, Column 9)

3. Current year change in encumbrances:

3.1 Totals, Part 1, Column 13

3.2 Totals, Part 3, Column 11

4. Total gain (loss) on disposals, Part 3, Column 18

5. Deduct amounts received on disposals, Part 3, Column 15

6. Total foreign exchange change in book/adjusted carrying value:

6.1 Totals, Part 1, Column 15

6.2 Totals, Part 3, Column 13

7. Deduct current year's other-than-temporary impairment recognized:

7.1 Totals, Part 1, Column 12

7.2 Totals, Part 3, Column 10

8. Deduct current year's depreciation:

8.1 Totals, Part 1, Column 11

8.2 Totals, Part 3, Column 9

9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)

10. Deduct total nonadmitted amounts

11. Statement value at end of current period (Line 9 minus Line 10)

NONE

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

1. Book value/recorded investment excluding accrued interest, December 31 of prior year

2. Cost of acquired:

2.1 Actual cost at time of acquisition (Part 2, Column 7)

2.2 Additional investment made after acquisition (Part 2, Column 8)

3. Capitalized deferred interest and other:

3.1 Totals, Part 1, Column 12

3.2 Totals, Part 3, Column 11

4. Accrual of discount

5. Unrealized valuation increase/(decrease):

5.1 Totals, Part 1, Column 9

5.2 Totals, Part 3, Column 8

6. Total gain (loss) on disposals, Part 3, Column 18

7. Deduct amounts received on disposals, Part 3, Column 15

8. Deduct amortization of premium and mortgage interest points and commitment fees

9. Total foreign exchange change in book value/recorded investment excluding accrued interest:

9.1 Totals, Part 1, Column 13

9.2 Totals, Part 3, Column 13

10. Deduct current year's other-than-temporary impairment recognized:

10.1 Totals, Part 1, Column 11

10.2 Totals, Part 3, Column 10

11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)

12. Total valuation allowance

13. Subtotal (Line 11 plus Line 12)

14. Deduct total nonadmitted amounts

15. Statement value of mortgages owned at end of current period (Line 13 minus Line 14)

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year .....	
2.	Cost of acquired:	
	2.1 Actual cost at time of acquisition (Part 2, Column 8) .....	
	2.2 Additional investment made after acquisition (Part 2, Column 9) .....	
3.	Capitalized deferred interest and other:	
	3.1 Totals, Part 1, Column 16 .....	
	3.2 Totals, Part 3, Column 12 .....	
4.	Accrual of discount .....	
5.	Unrealized valuation increase/(decrease):	
	5.1 Totals, Part 1, Column 13 .....	
	5.2 Totals, Part 3, Column 9 .....	
6.	Total gain (loss) on disposals, Part 3, Column 19 .....	
7.	Deduct amounts received on disposals, Part 3, Column 16 .....	
8.	Deduct amortization of premium and depreciation .....	
9.	Total foreign exchange change in book/adjusted carrying value:	
	9.1 Totals, Part 1, Column 17 .....	
	9.2 Totals, Part 3, Column 14 .....	
10.	Deduct current year's other-than-temporary impairment recognized:	
	10.1 Totals, Part 1, Column 15 .....	
	10.2 Totals, Part 3, Column 11 .....	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	
12.	Deduct total nonadmitted amounts .....	
13.	Statement value at end of current period (Line 11 minus Line 12) .....	

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year .....	11,650,807
2.	Cost of bonds and stocks acquired, Part 3, Column 7 .....	3,970,207
3.	Accrual of discount .....	18,520
4.	Unrealized valuation increase/(decrease):	
	4.1. Part 1, Column 12 .....	0
	4.2. Part 2, Section 1, Column 15 .....	
	4.3. Part 2, Section 2, Column 13 .....	844,374
	4.4. Part 4, Column 11 .....	0
		844,374
5.	Total gain (loss) on disposals, Part 4, Column 19 .....	8,397
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7 .....	579,821
7.	Deduct amortization of premium .....	424
8.	Total foreign exchange change in book/adjusted carrying value:	
	8.1. Part 1, Column 15 .....	0
	8.2. Part 2, Section 1, Column 19 .....	
	8.3. Part 2, Section 2, Column 16 .....	0
	8.4. Part 4, Column 15 .....	0
		0
9.	Deduct current year's other-than-temporary impairment recognized:	
	9.1. Part 1, Column 14 .....	0
	9.2. Part 2, Section 1, Column 17 .....	
	9.3. Part 2, Section 2, Column 14 .....	0
	9.4. Part 4, Column 13 .....	0
		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2 .....	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	15,912,060
12.	Deduct total nonadmitted amounts .....	0
13.	Statement value at end of current period (Line 11 minus Line 12) .....	15,912,060

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States ..... 2. Canada ..... 3. Other Countries .....	2,390,606 0 0	2,384,494 0 0	2,387,895 0 0	2,408,000 0 0
	4. Totals	2,390,606	2,384,494	2,387,895	2,408,000
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals				
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals				
U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7. Totals	2,000,454	1,955,746	1,997,983	2,056,417
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans, Unaffiliated Certificates of Deposit and Hybrid Securities (unaffiliated)	8. United States ..... 9. Canada ..... 10. Other Countries .....	1,414,203 0 0	1,423,642 0 0	1,394,359 0 0	1,450,297 0 0
	11. Totals	1,414,203	1,423,642	1,394,359	1,450,297
Parent, Subsidiaries and Affiliates	12. Totals				
	13. Total Bonds	5,805,263	5,763,882	5,780,237	5,914,714
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States ..... 15. Canada ..... 16. Other Countries .....	0 0 0	0 0 0	0 0 0	
	17. Totals	0	0	0	
Parent, Subsidiaries and Affiliates	18. Totals				
	19. Total Preferred Stocks	0	0	0	
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds	20. United States ..... 21. Canada ..... 22. Other Countries .....	0 0 0	0 0 0	0 0 0	
	23. Totals	0	0	0	
Parent, Subsidiaries and Affiliates	24. Totals	10,106,795	10,106,795	9,262,422	
	25. Total Common Stocks	10,106,795	10,106,795	9,262,422	
	26. Total Stocks	10,106,795	10,106,795	9,262,422	
	27. Total Bonds and Stocks	15,912,058	15,870,677	15,042,659	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company  
**SCHEDULE D - PART 1A - SECTION 1**

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments												
1.1 NAIC 1	1,956	2,386,663	1,987	0	0	XXX	2,390,606	41.2	10,466	0.4	2,390,606	0
1.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.7 Totals	1,956	2,386,663	1,987	0	0	XXX	2,390,606	41.2	10,466	0.4	2,390,606	0
2. All Other Governments												
2.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions etc., Guaranteed												
3.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions , Guaranteed												
4.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1	182,146	581,980	546,191	549,755	140,382	XXX	2,000,454	34.5	679,281	28.4	2,000,454	0
5.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.7 Totals	182,146	581,980	546,191	549,755	140,382	XXX	2,000,454	34.5	679,281	28.4	2,000,454	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company  
**SCHEDULE D - PART 1A - SECTION 1 (Continued)**

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)												
6.1 NAIC 1 .....	153,708	765,495	0	0	0	XXX	919,203	15.8	953,637	39.9	919,203	0
6.2 NAIC 2 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.3 NAIC 3 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.4 NAIC 4 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.5 NAIC 5 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.6 NAIC 6 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.7 Totals	153,708	765,495	0	0	0	XXX	919,203	15.8	953,637	39.9	919,203	0
7. Hybrid Securities												
7.1 NAIC 1 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.2 NAIC 2 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.3 NAIC 3 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.4 NAIC 4 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.5 NAIC 5 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.6 NAIC 6 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.2 NAIC 2 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.3 NAIC 3 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.4 NAIC 4 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.5 NAIC 5 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.6 NAIC 6 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
9. SVO Identified Funds												
9.1 NAIC 1 .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.2 NAIC 2 .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.3 NAIC 3 .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.4 NAIC 4 .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.5 NAIC 5 .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.6 NAIC 6 .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.7 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
10. Unaffiliated Bank Loans												
10.1 NAIC 1 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.2 NAIC 2 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.3 NAIC 3 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.4 NAIC 4 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.5 NAIC 5 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.6 NAIC 6 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11. Unaffiliated Certificates of Deposit												
11.1 NAIC 1 .....	495,000	0	0	0	0	XXX	495,000	8.5	745,000	31.2	495,000	0
11.2 NAIC 2 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.3 NAIC 3 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.4 NAIC 4 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.5 NAIC 5 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.6 NAIC 6 .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.7 Totals	495,000	0	0	0	0	XXX	495,000	8.5	745,000	31.2	495,000	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company  
**SCHEDULE D - PART 1A - SECTION 1 (Continued)**

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
12. Total Bonds Current Year												
12.1 NAIC 1 .....	(d) .....832,810	.....3,734,138	.....548,178	.....549,755	.....140,382	.....0	.....5,805,263	.....100.0	.....XXX.	.....XXX.	.....5,805,263	.....0
12.2 NAIC 2 .....	(d) .....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....XXX.	.....XXX.	.....0	.....0
12.3 NAIC 3 .....	(d) .....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....XXX.	.....XXX.	.....0	.....0
12.4 NAIC 4 .....	(d) .....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....XXX.	.....XXX.	.....0	.....0
12.5 NAIC 5 .....	(d) .....0	.....0	.....0	.....0	.....0	.....0	(c) .....0	.....0.0	.....XXX.	.....XXX.	.....0	.....0
12.6 NAIC 6 .....	(d) .....0	.....0	.....0	.....0	.....0	.....0	(c) .....0	.....0.0	.....XXX.	.....XXX.	.....0	.....0
12.7 Totals .....	.....832,810	.....3,734,138	.....548,178	.....549,755	.....140,382	.....0	(b) .....5,805,263	.....100.0	.....XXX.	.....XXX.	.....5,805,263	.....0
12.8 Line 12.7 as a % of Col. 7	.....14.3	.....64.3	.....9.4	.....9.5	.....2.4	.....0.0	.....100.0	.....XXX	.....XXX	.....XXX	.....100.0	.....0.0
13. Total Bonds Prior Year												
13.1 NAIC 1 .....	.....370,746	.....1,589,720	.....190,162	.....191,049	.....46,707	.....0	.....XXX.	.....XXX.	.....2,388,384	.....100.0	.....2,388,384	.....0
13.2 NAIC 2 .....							.....XXX.	.....XXX.	.....0	.....0.0	.....0	.....0
13.3 NAIC 3 .....							.....XXX.	.....XXX.	.....0	.....0.0	.....0	.....0
13.4 NAIC 4 .....							.....XXX.	.....XXX.	.....0	.....0.0	.....0	.....0
13.5 NAIC 5 .....							.....XXX.	.....XXX.	(c) .....0	.....0.0	.....0	.....0
13.6 NAIC 6 .....							.....XXX.	.....XXX.	(c) .....0	.....0.0	.....0	.....0
13.7 Totals .....	.....370,746	.....1,589,720	.....190,162	.....191,049	.....46,707	.....0	.....XXX.	.....XXX.	(b) .....2,388,384	.....100.0	.....2,388,384	.....0
13.8 Line 13.7 as a % of Col. 9	.....15.5	.....66.6	.....8.0	.....8.0	.....2.0	.....0.0	.....XXX	.....XXX	.....100.0	.....XXX	.....100.0	.....0.0
14. Total Publicly Traded Bonds												
14.1 NAIC 1 .....	.....832,811	.....3,734,138	.....548,178	.....549,755	.....140,382	.....0	.....5,805,264	.....100.0	.....2,388,384	.....100.0	.....5,805,264	.....XXX.
14.2 NAIC 2 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....0	.....XXX.
14.3 NAIC 3 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....0	.....XXX.
14.4 NAIC 4 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....0	.....XXX.
14.5 NAIC 5 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....0	.....XXX.
14.6 NAIC 6 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....0	.....XXX.
14.7 Totals .....	.....832,811	.....3,734,138	.....548,178	.....549,755	.....140,382	.....0	.....5,805,264	.....100.0	.....2,388,384	.....100.0	.....5,805,264	.....XXX.
14.8 Line 14.7 as a % of Col. 7	.....14.3	.....64.3	.....9.4	.....9.5	.....2.4	.....0.0	.....100.0	.....XXX.	.....XXX.	.....XXX.	.....100.0	.....XXX.
14.9 Line 14.7 as a % of Line 12.7, Col. 7, Section 12	.....14.3	.....64.3	.....9.4	.....9.5	.....2.4	.....0.0	.....100.0	.....XXX	.....XXX	.....XXX	.....100.0	.....XXX
15. Total Privately Placed Bonds												
15.1 NAIC 1 .....	.....(1)	.....0	.....0	.....0	.....0	.....0	.....(1)	.....0.0	.....0	.....0.0	.....XXX.	.....(1)
15.2 NAIC 2 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....XXX.	.....0
15.3 NAIC 3 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....XXX.	.....0
15.4 NAIC 4 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....XXX.	.....0
15.5 NAIC 5 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....XXX.	.....0
15.6 NAIC 6 .....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0	.....0.0	.....XXX.	.....0
15.7 Totals .....	.....(1)	.....0	.....0	.....0	.....0	.....0	.....(1)	.....0.0	.....0	.....0.0	.....XXX.	.....(1)
15.8 Line 15.7 as a % of Col. 7	.....100.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....100.0	.....XXX.	.....XXX.	.....XXX.	.....XXX.	.....100.0
15.9 Line 15.7 as a % of Line 12.7, Col. 7, Section 12	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....XXX	.....XXX	.....XXX	.....XXX	.....0.0

(a) Includes \$ .....0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.  
(b) Includes \$ .....0 current year of bonds with Z designations and \$ .....0 prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.  
(c) Includes \$ .....0 current year, \$ .....0 prior year of bonds with 5GI designations and \$ .....0 current year, \$ .....0 prior year of bonds with 6\* designations. "5GI" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6\*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.  
(d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ .....0 ; NAIC 2 \$ .....0 ; NAIC 3 \$ .....0 ; NAIC 4 \$ .....0 ; NAIC 5 \$ .....0 ; NAIC 6 \$ .....0



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE D - PART 1A - SECTION 2**

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
1. U.S. Governments												
1.01 Issuer Obligations .....	0	2,381,827	0	0	0	XXX	2,381,827	41.0	0	0.0	2,381,827	0
1.02 Residential Mortgage-Backed Securities .....	1,956	4,836	1,987	0	0	XXX	8,779	0.2	10,466	0.4	8,779	0
1.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.05 Totals	1,956	2,386,663	1,987	0	0	XXX	2,390,606	41.2	10,466	0.4	2,390,606	0
2. All Other Governments												
2.01 Issuer Obligations .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.02 Residential Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.02 Residential Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01 Issuer Obligations .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.02 Residential Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed												
5.01 Issuer Obligations .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.02 Residential Mortgage-Backed Securities .....	182,146	581,980	546,191	549,755	140,382	XXX	2,000,454	34.5	679,281	28.4	2,000,454	0
5.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.05 Totals	182,146	581,980	546,191	549,755	140,382	XXX	2,000,454	34.5	679,281	28.4	2,000,454	0
6. Industrial and Miscellaneous												
6.01 Issuer Obligations .....	0	713,916	0	0	0	XXX	713,916	12.3	703,664	29.5	713,916	0
6.02 Residential Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.04 Other Loan-Backed and Structured Securities ...	153,708	51,578	0	0	0	XXX	205,286	3.5	249,973	10.5	205,287	(1)
6.05 Totals	153,708	765,494	0	0	0	XXX	919,202	15.8	953,637	39.9	919,203	(1)
7. Hybrid Securities												
7.01 Issuer Obligations .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.02 Residential Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.02 Residential Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.05 Affiliated Bank Loans - Issued .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.06 Affiliated Bank Loans - Acquired .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.07 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company  
**SCHEDULE D - PART 1A - SECTION 2 (Continued)**

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

	1	2	3	4	5	6	7	8	9	10	11	12
Distribution by Type	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 12.09	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.02 Unaffiliated Bank Loans - Acquired .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.03 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11. Unaffiliated Certificates of Deposit												
11.01 Totals	495,000	0	0	0	0	XXX	495,000	8.5	745,000	31.2	495,000	0
12. Total Bonds Current Year												
12.01 Issuer Obligations .....	0	3,095,743	0	0	0	XXX	3,095,743	53.3	XXX	XXX	3,095,743	0
12.02 Residential Mortgage-Backed Securities .....	184,102	586,816	548,178	549,755	140,382	XXX	2,009,233	34.6	XXX	XXX	2,009,233	0
12.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.04 Other Loan-Backed and Structured Securities ..	153,708	51,578	0	0	0	XXX	205,286	3.5	XXX	XXX	205,287	(1)
12.05 SVO Identified Funds .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
12.06 Affiliated Bank Loans .....	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.07 Unaffiliated Bank Loans .....	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.08 Unaffiliated Certificates of Deposit .....	495,000	0	0	0	0	XXX	495,000	8.5	XXX	XXX	495,000	0
12.09 Totals .....	832,810	3,734,137	548,178	549,755	140,382	0	5,805,262	100.0	XXX	XXX	5,805,263	(1)
12.10 Line 12.09 as a % of Col. 7	14.3	64.3	9.4	9.5	2.4	0.0	100.0	XXX	XXX	XXX	100.0	0.0
13. Total Bonds Prior Year												
13.01 Issuer Obligations .....	0	703,664	0	0	0	XXX	XXX	XXX	703,664	29.5	703,664	0
13.02 Residential Mortgage-Backed Securities .....	58,954	202,875	190,162	191,049	46,707	XXX	XXX	XXX	689,747	28.9	689,747	0
13.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
13.04 Other Loan-Backed and Structured Securities ..	61,792	188,181	0	0	0	XXX	XXX	XXX	249,973	10.5	249,973	0
13.05 SVO Identified Funds .....	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	0	0.0	0	0
13.06 Affiliated Bank Loans .....	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
13.07 Unaffiliated Bank Loans .....	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
13.08 Unaffiliated Certificates of Deposit .....	250,000	495,000	0	0	0	XXX	XXX	XXX	745,000	31.2	745,000	0
13.09 Totals .....	370,746	1,589,720	190,162	191,049	46,707	0	XXX	XXX	2,388,384	100.0	2,388,384	0
13.10 Line 13.09 as a % of Col. 9	15.5	66.6	8.0	8.0	2.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
14. Total Publicly Traded Bonds												
14.01 Issuer Obligations .....	0	3,095,743	0	0	0	XXX	3,095,743	53.3	703,664	29.5	3,095,743	XXX
14.02 Residential Mortgage-Backed Securities .....	184,102	586,817	548,178	549,755	140,382	XXX	2,009,234	34.6	689,747	28.9	2,009,234	XXX
14.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.04 Other Loan-Backed and Structured Securities ..	153,708	51,578	0	0	0	XXX	205,286	3.5	249,973	10.5	205,286	XXX
14.05 SVO Identified Funds .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	XXX
14.06 Affiliated Bank Loans .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.07 Unaffiliated Bank Loans .....	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.08 Unaffiliated Certificates of Deposit .....	495,000	0	0	0	0	XXX	495,000	8.5	745,000	31.2	495,000	XXX
14.09 Totals .....	832,810	3,734,138	548,178	549,755	140,382	0	5,805,263	100.0	2,388,384	100.0	5,805,263	XXX
14.10 Line 14.09 as a % of Col. 7	14.3	64.3	9.4	9.5	2.4	0.0	100.0	XXX	XXX	XXX	100.0	XXX
14.11 Line 14.09 as a % of Line 12.09, Col. 7, Section 12	14.3	64.3	9.4	9.5	2.4	0.0	100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.01 Issuer Obligations .....	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.02 Residential Mortgage-Backed Securities .....	0	(1)	0	0	0	XXX	(1)	0.0	0	0.0	XXX	(1)
15.03 Commercial Mortgage-Backed Securities .....	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.04 Other Loan-Backed and Structured Securities ..	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.05 SVO Identified Funds .....	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	XXX	0
15.06 Affiliated Bank Loans .....	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.07 Unaffiliated Bank Loans .....	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.08 Unaffiliated Certificates of Deposit .....	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.09 Totals .....	0	(1)	0	0	0	0	(1)	0.0	0	0.0	XXX	(1)
15.10 Line 15.09 as a % of Col. 7	0.0	100.0	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	XXX	100.0
15.11 Line 15.09 as a % of Line 12.09, Col. 7, Section 12	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year .....	1	1	0	0	0
2. Cost of short-term investments acquired .....	0				
3. Accrual of discount .....	0				
4. Unrealized valuation increase/(decrease) .....	0				
5. Total gain (loss) on disposals .....	0				
6. Deduct consideration received on disposals .....	0				
7. Deduct amortization of premium .....	1	1			
8. Total foreign exchange change in book/adjusted carrying value .....	0				
9. Deduct current year's other-than-temporary impairment recognized .....	0				
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	0	0	0	0	0
11. Deduct total nonadmitted amounts .....	0				
12. Statement value at end of current period (Line 10 minus Line 11)	0	0	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards  
**N O N E**

Schedule DB - Part B - Verification - Futures Contracts  
**N O N E**

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open  
**N O N E**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open  
**N O N E**

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of  
Derivatives  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS**

(Cash Equivalents)

	1	2	3	4
	Total	Bonds	Money Market Mutual funds	Other (a)
1. Book/adjusted carrying value, December 31 of prior year .....	222,469	0	222,469	0
2. Cost of cash equivalents acquired .....	1,466,031	0	1,466,031	0
3. Accrual of discount .....	0	0	0	0
4. Unrealized valuation increase/(decrease) .....	0	0	0	0
5. Total gain (loss) on disposals .....	0	0	0	0
6. Deduct consideration received on disposals .....	1,664,257	0	1,664,257	0
7. Deduct amortization of premium .....	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value .....	0	0	0	0
9. Deduct current year's other-than-temporary impairment recognized .....	0	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	24,243	0	24,243	0
11. Deduct total nonadmitted amounts .....	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	24,243	0	24,243	0

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:

Schedule A - Part 1 - Real Estate Owned

**N O N E**

Schedule A - Part 2 - Real Estate Acquired and Additions Made

**N O N E**

Schedule A - Part 3 - Real Estate Disposed

**N O N E**

Schedule B - Part 1 - Mortgage Loans Owned

**N O N E**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

**N O N E**

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

**N O N E**

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned

**N O N E**

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

**N O N E**

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	C o d e	F o r e i g n	Bond Char	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
91282C-JU-2 .....	UNITED STATES TREASURY NOTE .....	.....	.....	.....	1.A .....	1,481,900	..98.6560	1,479,844	1,500,000	1,484,861	.....0	2,961	.....0	.....0	4.000	4.272	JJ .....	25,109	30,000	02/13/2024	01/31/2029
91282C-KD-2 .....	UNITED STATES TREASURY NOTE .....	.....	.....	.....	1.A .....	401,267	..99.5630	398,250	400,000	401,084	.....0	(183)	.....0	.....0	4.250	4.178	FA .....	5,776	8,500	03/13/2024	02/28/2029
91282C-KT-7 .....	US TREASURY N/B .....	.....	.....	.....	1.A .....	249,102	100.5160	251,289	250,000	249,198	.....0	95	.....0	.....0	4.500	4.581	MN .....	989	5,625	05/30/2024	05/31/2029
91282C-MA-6 .....	UNITED STATES TREASURY NOTE .....	.....	.....	.....	1.A .....	246,681	..98.9060	247,266	250,000	246,684	.....0	3	.....0	.....0	4.125	4.428	MN .....	850	.....0	12/27/2024	11/30/2029
0019999999. Subtotal - Bonds - U.S. Governments - Issuer Obligations						2,378,950	XXX	2,376,649	2,400,000	2,381,827	0	2,876	0	0	XXX	XXX	XXX	32,724	44,125	XXX	XXX
38374L-RZ-6 .....	GOVERNMENT NATIONAL MORTGAGE A 05-56 JA .....	.....	.....	.....	1.A FE .....	8,945	..98.0670	7,845	8,000	8,779	.....0	(153)	.....0	.....0	5.000	1.701	MON .....	33	400	02/01/2013	05/17/2035
0029999999. Subtotal - Bonds - U.S. Governments - Residential Mortgage-Backed Securities						8,945	XXX	7,845	8,000	8,779	0	(153)	0	0	XXX	XXX	XXX	33	400	XXX	XXX
0109999999. Total - U.S. Government Bonds						2,387,895	XXX	2,384,494	2,408,000	2,390,606	0	2,723	0	0	XXX	XXX	XXX	32,757	44,525	XXX	XXX
0309999999. Total - All Other Government Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
0509999999. Total - U.S. States, Territories and Possessions Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
0709999999. Total - U.S. Political Subdivisions Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
3132DS-LC-4 .....	UMBS - POOL SD4823 .....	.....	.....	.....	1.A FE .....	1,368,887	..97.1960	1,370,767	1,410,315	1,369,749	.....0	3,237	.....0	.....0	5.000	5.406	MON .....	5,876	58,763	02/13/2024	12/01/2053
3140LX-CA-1 .....	UMBS - POOL BT8164 .....	.....	.....	4 .....	1.A FE .....	210,393	..89.0260	196,677	220,921	211,542	.....0	990	.....0	.....0	3.500	4.144	MON .....	644	7,732	09/07/2022	06/01/2052
3140QP-2F-3 .....	UMBS - POOL CB4373 .....	.....	.....	4 .....	1.A FE .....	418,703	..91.3260	388,302	425,181	419,163	.....0	678	.....0	.....0	4.000	4.182	MON .....	1,417	17,007	09/06/2022	06/01/2052
0829999999. Subtotal - Bonds - U.S. Special Revenues - Residential Mortgage-Backed Securities						1,997,983	XXX	1,955,746	2,056,417	2,000,454	0	4,905	0	0	XXX	XXX	XXX	7,937	83,502	XXX	XXX
0909999999. Total - U.S. Special Revenues Bonds						1,997,983	XXX	1,955,746	2,056,417	2,000,454	0	4,905	0	0	XXX	XXX	XXX	7,937	83,502	XXX	XXX
756109-BG-8 .....	REALTY INCOME CORP .....	.....	.....	1 .....	1.G FE .....	235,440	..98.1130	245,283	250,000	241,705	.....0	2,876	.....0	.....0	3.950	5.323	FA .....	3,731	9,875	09/29/2022	08/15/2027
89236T-KJ-3 .....	TOYOTA MOTOR CREDIT CORP .....	.....	.....	1 .....	1.E FE .....	246,113	100.0950	250,238	250,000	247,755	.....0	754	.....0	.....0	4.550	4.907	MS .....	3,191	11,375	10/05/2022	09/20/2027
976656-CM-8 .....	WISCONSIN ELECTRIC POWER .....	.....	.....	1 .....	1.F FE .....	212,548	..90.6340	226,584	250,000	224,456	.....0	6,622	.....0	.....0	1.700	4.954	JD .....	189	4,250	02/27/2023	06/15/2028
1019999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations						694,101	XXX	722,105	750,000	713,916	0	10,252	0	0	XXX	XXX	XXX	7,111	25,500	XXX	XXX
98163V-AD-0 .....	WORLD OMNI AUTO RECEIVABLES TR 22-D A3 .....	.....	.....	2,4 .....	1.A FE .....	205,259	100.6050	206,538	205,297	205,287	.....0	(75)	.....0	.....0	5.610	5.618	MON .....	512	11,517	11/09/2022	02/15/2028
1049999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Other Loan-Backed and Structured Securities						205,259	XXX	206,538	205,297	205,287	0	(75)	0	0	XXX	XXX	XXX	512	11,517	XXX	XXX
1109999999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						899,360	XXX	928,643	955,297	919,203	0	10,177	0	0	XXX	XXX	XXX	7,623	37,017	XXX	XXX
1309999999. Total - Hybrid Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
1509999999. Total - Parent, Subsidiaries and Affiliates Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
1909999999. Subtotal - Bonds - Unaffiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
17284D-BS-0 .....	CIT BANK NA .....	.....	.....	.....	1.A FE .....	200,000	100.0000	200,000	200,000	200,000	.....0	.....0	.....0	.....0	2.950	2.953	JD .....	469	5,916	06/03/2015	06/03/2025
254672-TE-8 .....	DISCOVER BANK .....	.....	.....	.....	1.A FE .....	95,000	100.0000	95,000	95,000	95,000	.....0	.....0	.....0	.....0	3.000	3.003	FA .....	1,163	2,858	08/05/2015	08/05/2025
38148J-ZR-5 .....	GOLDMAN SACHS BANK USA .....	.....	.....	.....	1.A FE .....	100,000	100.0000	100,000	100,000	100,000	.....0	.....0	.....0	.....0	3.050	3.053	JJ .....	1,304	3,058	07/29/2015	07/29/2025
73319F-AK-5 .....	POPPY BANK .....	.....	.....	.....	1.A FE .....	100,000	100.0000	100,000	100,000	100,000	.....0	.....0	.....0	.....0	1.100	1.100	MON .....	12	1,103	03/27/2020	03/27/2025
2019999999. Subtotal - Bonds - Unaffiliated Certificates of Deposit						495,000	XXX	495,000	495,000	495,000	0	0	0	0	XXX	XXX	XXX	2,948	12,935	XXX	XXX
2419999999. Total - Issuer Obligations						3,073,051	XXX	3,098,754	3,150,000	3,095,743	0	13,128	0	0	XXX	XXX	XXX	39,835	69,625	XXX	XXX
2429999999. Total - Residential Mortgage-Backed Securities						2,006,928	XXX	1,963,591	2,064,417	2,009,233	0	4,752	0	0	XXX	XXX	XXX	7,970	83,902	XXX	XXX
2439999999. Total - Commercial Mortgage-Backed Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2449999999. Total - Other Loan-Backed and Structured Securities						205,259	XXX	206,538	205,297	205,287	0	(75)	0	0	XXX	XXX	XXX	512	11,517	XXX	XXX
2459999999. Total - SVO Identified Funds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2469999999. Total - Affiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2479999999. Total - Unaffiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2489999999. Total - Unaffiliated Certificates of Deposit						495,000	XXX	495,000	495,000	495,000	0	0	0	0	XXX	XXX	XXX	2,948	12,935	XXX	XXX
2509999999. Total Bonds						5,780,238	XXX	5,763,883	5,914,714	5,805,263	0	17,805	0	0	XXX	XXX	XXX	51,265	177,979	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

1.

Line Number	Book/Adjusted Carrying Value by NAIC Designation Category Footnote:									
1A	1A ...\$	5,091,347	1B ..\$	0	1C ..\$	0	1D ..\$	0	1E ..\$	247,755
1B	2A ...\$	0	2B ..\$	0	2C ..\$	0	1F ..\$	224,456	1G ..\$	241,705
1C	3A ...\$	0	3B ..\$	0	3C ..\$	0				
1D	4A ...\$	0	4B ..\$	0	4C ..\$	0				
1E	5A ...\$	0	5B ..\$	0	5C ..\$	0				
1F	6 .....\$	0								



## SCHEDULE D - PART 2 - SECTION 1

[illegible]

Line Number	Book/Adjusted Carrying Value by NAIC Designation Category Footnote:						
1A	1A ..\$ .....	1B ..\$ .....	1C ..\$ .....	1D ..\$ .....	1E ..\$ .....	1F ..\$ .....	1G ..\$ .....
1B	2A ..\$ .....	2B ..\$ .....	2C ..\$ .....				
1C	3A ..\$ .....	3B ..\$ .....	3C ..\$ .....				
1D	4A ..\$ .....	4B ..\$ .....	4C ..\$ .....				
1E	5A ..\$ .....	5B ..\$ .....	5C ..\$ .....				
1F	6 ..\$ .....						

## SCHEDULE D - PART 2 - SECTION 2

[illegible]

Line Number	Book/Adjusted Carrying Value by NAIC Designation Category Footnote:							
1A	1A ...\$	1B ..\$	1C ..\$	1D ..\$	1E ..\$	1F ..\$	1G ..\$	
1B	2A ...\$	2B ..\$	2C ..\$					
1C	3A ...\$	3B ..\$	3C ..\$					
1D	4A ...\$	4B ..\$	4C ..\$					
1E	5A ...\$	5B ..\$	5C ..\$					
1F	6 ....\$							

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends
91282C-JW-2 .....	UNITED STATES TREASURY NOTE .....		...02/13/2024 ...	NOMURA SECURITIES INTERNATIONAL INC. ....		..... 1,481,900	..... 1,500,000	.....2,308
91282C-KD-2 .....	UNITED STATES TREASURY NOTE .....		...03/13/2024 ...	NOMURA SECURITIES INTERNATIONAL INC. ....		.....401,267	.....400,000	..... 647
91282C-KT-7 .....	US TREASURY N/B .....		...05/30/2024 ...	BOFA SECURITIES INC. ....		.....249,102	.....250,000	..... 0
91282C-MA-6 .....	UNITED STATES TREASURY NOTE .....		...12/27/2024 ...	NOMURA SECURITIES INTERNATIONAL INC. ....		.....246,681	.....250,000	..... 850
0109999999. Subtotal - Bonds - U.S. Governments						2,378,950	2,400,000	3,805
3132DS-LC-4 .....	UMBS - POOL SD4823 .....		...02/13/2024 ...	NOMURA SECURITIES INTERNATIONAL INC. ....		1,449,745	1,493,620	2,904
0909999999. Subtotal - Bonds - U.S. Special Revenues						1,449,745	1,493,620	2,904
2509999997. Total - Bonds - Part 3						3,828,695	3,893,620	6,709
2509999998. Total - Bonds - Part 5						141,512	150,000	2,317
2509999999. Total - Bonds						3,970,207	4,043,620	9,026
4509999997. Total - Preferred Stocks - Part 3						0	XXX	0
4509999998. Total - Preferred Stocks - Part 5							XXX	
4509999999. Total - Preferred Stocks						0	XXX	0
5989999997. Total - Common Stocks - Part 3						0	XXX	0
5989999998. Total - Common Stocks - Part 5							XXX	
5989999999. Total - Common Stocks						0	XXX	0
5999999999. Total - Preferred and Common Stocks						0	XXX	0
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
6009999999 - Totals						3,970,207	XXX	9,026

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21
										11	12	13	14	15						
CUSIP Identi- fication	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Con- sideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other- Than- Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Value (11+12-13)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date
38374L-RZ-6	GOVERNMENT NATIONAL MORTGAGE A 05-56 JA		12/01/2024	MBS PAYDOWN 100.0000		1,521	1,521	1,700	1,533	0	(13)	0	(13)	0	1,521	0	0	0	45	05/17/2035
0109999999. Subtotal - Bonds - U.S. Governments						1,521	1,521	1,700	1,533	0	(13)	0	(13)	0	1,521	0	0	0	45	XXX
3132DS-LC-4	UMBS - POOL SD4823		12/01/2024	MBS PAYDOWN 100.0000		83,305	83,305	80,858	0	0	72	0	72	0	83,305	0	0	0	2,043	12/01/2053
3140LX-CA-1	UMBS - POOL BT8164		12/01/2024	MBS PAYDOWN 100.0000		14,245	14,245	13,566	14,221	0	24	0	24	0	14,245	0	0	0	258	06/01/2052
3140QP-2F-3	UMBS - POOL CB4373		12/01/2024	MBS PAYDOWN 100.0000		36,047	36,047	35,498	36,022	0	25	0	25	0	36,047	0	0	0	795	08/01/2052
0909999999. Subtotal - Bonds - U.S. Special Revenues						133,597	133,597	129,922	50,243	0	121	0	121	0	133,597	0	0	0	3,096	XXX
98163V-AD-0	WORLD OMNI AUTO RECEIVABLES TR 22-D A3		12/15/2024	MBS PAYDOWN 100.0000		44,703	44,703	44,695	44,611	0	92	0	92	0	44,703	0	0	0	2,256	02/15/2028
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						44,703	44,703	44,695	44,611	0	92	0	92	0	44,703	0	0	0	2,256	XXX
949763-YD-2	WELLS FARGO BANK NA		03/13/2024	MATURITY 100.0000		250,000	250,000	250,000	250,000	0	0	0	0	0	250,000	0	0	0	1,839	03/13/2024
2019999999. Subtotal - Bonds - Unaffiliated Certificates of Deposit						250,000	250,000	250,000	250,000	0	0	0	0	0	250,000	0	0	0	1,839	XXX
2509999997. Total - Bonds - Part 4						429,821	429,821	426,317	346,387	0	200	0	200	0	429,821	0	0	0	7,236	XXX
2509999998. Total - Bonds - Part 5						150,000	150,000	141,512	0	0	91	0	91	0	141,603	0	8,397	8,397	3,000	XXX
2509999999. Total - Bonds						579,821	579,821	567,829	346,387	0	291	0	291	0	571,424	0	8,397	8,397	10,236	XXX
4509999997. Total - Preferred Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4509999998. Total - Preferred Stocks - Part 5							XXX													XXX
4509999999. Total - Preferred Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5989999997. Total - Common Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5989999998. Total - Common Stocks - Part 5							XXX													XXX
5989999999. Total - Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5999999999. Total - Preferred and Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6009999999 - Totals						579,821	XXX	567,829	346,387	0	291	0	291	0	571,424	0	8,397	8,397	10,236	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

## SCHEDULE D - PART 5

Showing All Long-Term Bonds and Stocks ACQUIRED During Year and Fully DISPOSED OF During Current Year

[illegible]

# ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

## SCHEDULE D - PART 6 - SECTION 1

### Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

CUSIP Identification	Description, Name of Subsidiary, Controlled or Affiliated Company	Foreign	NAIC Company Code	ID Number	NAIC Valuation Method	Book/Adjusted Carrying Value	Total Amount of Goodwill Included in Book/Adjusted Carrying Value	Nonadmitted Amount	Stock of Such Company Owned by Insurer on Statement Date	
									Number of Shares	% of Outstanding
0999999. Total Preferred Stocks						0	0	0	XXX	XXX
000000-00-0 .....	ROADRUNNER INDEMNITY COMPANY .....	.....	.....40673 .....	.....75-1791515 .....	.....8B1 .....	10,106,795	.....	.....	.....	.....
1099999. Subtotal - Common Stock - Parent						10,106,795	0	0	XXX	XXX
1899999. Total Common Stocks						10,106,795	0	0	XXX	XXX
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
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.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
1999999 - Totals						10,106,795	0	0	XXX	XXX

1. Total amount of goodwill nonadmitted \$ .....

## SCHEDULE D - PART 6 - SECTION 2

[illegible]

# NONE

Schedule DA - Part 1 - Short-Term Investments Owned

**N O N E**

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

**N O N E**

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated

**N O N E**

Schedule DB - Part B - Section 1 - Futures Contracts Open

**N O N E**

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

**N O N E**

Schedule DB - Part B - Section 2 - Futures Contracts Terminated

**N O N E**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

**N O N E**

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees as of December 31 of  
Current Year

**N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

**N O N E**

SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
Depository	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
Central National Bank iMGA Claim ..... Waco, TX .....		0.000			(110,085)	XXX.
Central National Bank Operating ..... Waco, TX .....		3.040	23,208		455,491	XXX.
Central National Bank Atlas Claim ..... Waco, TX .....		0.300	241		79,425	XXX.
Central National Bank Denali Claim ..... Waco, TX .....		0.000			50,000	XXX.
Central National Bank MMA ..... Waco, TX .....		3.820	59,537		1,559,537	XXX.
Central National Bank iMGA Premium ..... Waco, TX .....		0.500	3,243		937,603	XXX.
Central National Bank iMGA Refund ..... Waco, TX .....		0.000			(35,058)	XXX.
0199998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - open depositories	XXX	XXX	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	86,229	0	2,936,913	XXX
0299998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - suspended depositories	XXX	XXX	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	86,229	0	2,936,913	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	XXX
.....						
.....						
.....						
.....						
.....						
0599999 Total - Cash	XXX	XXX	86,229	0	2,936,913	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January.....	5,650,572	4. April.....	2,685,020	7. July.....	2,608,099	10. October.....	2,769,945
2. February....	2,365,384	5. May.....	2,517,834	8. August.....	3,754,371	11. November...	3,088,003
3. March	2,653,372	6. June	2,356,783	9. September	2,855,077	12. December	2,936,913



## SCHEDULE E - PART 2 - CASH EQUIVALENTS

[illegible][illegible]

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1	2	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
	Type of Deposit	Purpose of Deposit	3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
1. Alabama .....	AL					
2. Alaska .....	AK					
3. Arizona .....	AZ					
4. Arkansas .....	AR					
5. California .....	CA					
6. Colorado .....	CO					
7. Connecticut .....	CT					
8. Delaware .....	DE					
9. District of Columbia .....	DC					
10. Florida .....	FL					
11. Georgia .....	GA					
12. Hawaii .....	HI					
13. Idaho .....	ID					
14. Illinois .....	IL					
15. Indiana .....	IN					
16. Iowa .....	IA					
17. Kansas .....	KS					
18. Kentucky .....	KY					
19. Louisiana .....	LA					
20. Maine .....	ME					
21. Maryland .....	MD					
22. Massachusetts .....	MA					
23. Michigan .....	MI					
24. Minnesota .....	MN					
25. Mississippi .....	MS					
26. Missouri .....	MO					
27. Montana .....	MT					
28. Nebraska .....	NE					
29. Nevada .....	NV					
30. New Hampshire .....	NH					
31. New Jersey .....	NJ					
32. New Mexico .....	NM					
33. New York .....	NY					
34. North Carolina .....	NC					
35. North Dakota .....	ND					
36. Ohio .....	OH					
37. Oklahoma .....	OK					
38. Oregon .....	OR					
39. Pennsylvania .....	PA					
40. Rhode Island .....	RI					
41. South Carolina .....	SC					
42. South Dakota .....	SD					
43. Tennessee .....	TN					
44. Texas .....	TX					
45. Utah .....	UT					
46. Vermont .....	VT					
47. Virginia .....	VA					
48. Washington .....	WA					
49. West Virginia .....	WV					
50. Wisconsin .....	WI					
51. Wyoming .....	WY					
52. American Samoa .....	AS					
53. Guam .....	GU					
54. Puerto Rico .....	PR					
55. U.S. Virgin Islands .....	VI					
56. Northern Mariana Islands .....	MP					
57. Canada .....	CAN					
58. Aggregate Alien and Other .....	OT	XXX				
59. Subtotal	XXX	XXX				
DETAILS OF WRITE-INS						
5801. ....						
5802. ....						
5803. ....						
5898. Summary of remaining write-ins for Line 58 from overflow page .....	XXX	XXX				
5899. Totals (Lines 5801 through 5803 plus 5898)(Line 58 above)	XXX	XXX				

**STATEMENT OF ACTUARIAL OPINION**  
**for**  
**INSURORS INDEMNITY SELECT INSURANCE COMPANY**  
**as of**  
**DECEMBER 31, 2024**

**IDENTIFICATION**

I, Patrick L. Whatley, am associated with the firm of The Burkhalter Group, Inc. I am a member of the American Academy of Actuaries and a Fellow of the Casualty Actuarial Society. I was appointed by the Board of Directors of Insurors Indemnity Select Insurance Company (“the Company”) on December 11, 2024 to render this opinion regarding the Company's loss and loss adjustment expense reserves. I meet the definition of a Qualified Actuary per the NAIC Annual Statement Instructions – Property and Casualty, Actuarial Opinion.

**SCOPE**

I have examined the reserves listed in Exhibit A, as shown in the Annual Statement of the Company as prepared for filing with state regulatory officials, as of December 31, 2024. Both the accounting date and valuation date of the data used in my reserve evaluation are December 31, 2024. My review considered information provided to me through February 17, 2025. The reserves listed in Exhibit A, where applicable, include provisions for Disclosure items (disclosures 8 through 13.2) in Exhibit B. The reserves listed in Exhibit A are recorded under U.S. Statutory Accounting Principles (SAP).

In forming my opinion on the loss and loss adjustment expense reserves, I have relied upon listings and summaries of data prepared by Ms. Tammy Tieperman, Vice President, Accounting for the Company. I evaluated that data for reasonableness and consistency. I also reconciled that data to Schedule P Part 1 of the company's current Annual Statement. In other respects, my examination included the use of such actuarial assumptions and methods and such tests of the actuarial calculations as I considered necessary.

**OPINION**

In my opinion, the amounts carried in Exhibit A on account of the items identified:

- A. Meet the requirements of the insurance laws of Texas.
- B. Are consistent with reserves computed in accordance with accepted actuarial standards and principles.
- C. Make a reasonable provision in the aggregate, both net of ceded reinsurance and direct and assumed, for all unpaid loss and loss adjustment expense obligations of the Company under the terms of its contracts and agreements.

## **RELEVANT COMMENTS**

In April 2021, the conversion of Insurors Indemnity Lloyds to a stock company named Insurors Indemnity Select Insurance Company (Select) was completed. Select is designated a Domestic Surplus Lines Insurer. Since Insurors Indemnity Lloyds first started writing business in 2003, it had been 100% reinsured by an affiliated company, Insurors Indemnity Company. Effective 10/31/2020, the reinsurance agreement between the two companies was amended by adding Article XX – Assumption of Responsibilities of the Company by the Reinsurer. The amendment states in part: “The Reinsurer hereby assumes all liabilities, obligations and responsibilities of Company under the Agreement, including all duties toward the policyholders. Reinsurer will henceforth become the direct company for all obligations.” Thus, Insurors Indemnity Lloyds had \$0 unpaid claim liabilities, both direct and assumed and net after reinsurance at 12/31/2020.

After the conversion in 2021, Select has written a small amount of residential property business in the Texas surplus lines market. In late 2023, Select began to write some commercial property and casualty business in the Texas surplus line market. Select is 100% reinsured by Insurors Indemnity Company, exactly like the prior Lloyds company. I have selected \$0 as the materiality standard shown in Exhibit B. In this case, the materiality standard is judged more on the quality of the Company’s reinsurers as opposed to traditional quantitative measures. My selection of the materiality standard was based on the fact that this opinion is prepared for the regulatory review of Insurors Indemnity Select Insurance Company. Other measures of materiality might be used for reserves being evaluated in a different context.

The assuming company, Insurors Indemnity Company, is well capitalized relative to the size of its own loss and loss adjustment expense reserves and is rated “A-” by A.M. Best Company. Further, Insurors Indemnity Company maintains both catastrophe reinsurance and excess of loss reinsurance with high-quality professional reinsurers at relatively low retentions compared to its statutory surplus. Because the Company has no responsibility for unpaid claims prior to accident year 2021 and it has only three open residential property claims and two open commercial property claims at 12/31/2024, I do not believe there are any major risk factors applicable to the Company.

I do not believe that there are significant risks and uncertainties that could result in a material adverse deviation from the carried net reserve amounts.

The Company records salvage or subrogation as it is received and case reserves are gross of anticipated salvage and subrogation. However, unpaid claim liabilities are estimated from triangles that are ultimately net of salvage and subrogation received. Bulk reserve estimates, therefore, implicitly recognize some level of future salvage and subrogation recoverable. These amounts, however, are not material for the lines of business written by the Company.

The Company does not discount its reserves listed in Exhibit A for the time value of money.

The Company does not participate in any underwriting pools or associations.

I have reviewed the Company’s exposure to asbestos and environmental claims. In my opinion, the chance of material liability is remote since the Company wrote no business prior to 2003.

Based on discussions with Company management and its description of the Company's ceded reinsurance, I am not aware of any reinsurance contract that either has been or should have been accounted for as retroactive reinsurance or financial reinsurance.

Based on discussions with Company management, I am not aware that collectibility of reinsurance is a material issue as regards the Company's loss and loss adjustment expense reserves.

The Company has no net loss reserves. Therefore, the Company's test values for the NAIC IRIS Tests for One-Year Reserve Development to Surplus, Two-Year Reserve Development to Surplus, and Estimated Current Reserve Deficiency to Surplus are all zero.

There have been no material changes in actuarial methods and assumptions since the prior Statement of Actuarial Opinion.

The Company writes no Long Duration Contracts, defined as contracts, excluding financial guaranty contracts, mortgage guaranty contracts and surety contracts that fulfill both of the following conditions: (1) the contract term is 13 months or greater and (2) the insurer can neither cancel the contract, nor increase the premium during the policy or contract term.

Actuarial estimates of property and casualty loss and loss adjustment expense reserves are inherently uncertain because they are dependent on future contingent events. Also, these reserve estimates are generally derived from analyses of historical data, and future events or conditions may differ from the past. The actual amount necessary to settle the unpaid claims may therefore be significantly different from the reserve amounts listed in Exhibit A.

I have not examined the Company's assets, and I have formed no opinion as to their validity or value. My opinion that reserves make reasonable provision for unmatured obligations rests upon the assumption that all reserves are backed by valid assets which have suitably scheduled maturities and/or adequate liquidity to meet cash flow requirements.

An actuarial report — including pertinent exhibits which document the historical data base and the calculations underlying the findings expressed in this statement of actuarial opinion — will be provided to the company to be retained at its administrative offices for a period of seven years and available for regulatory examination.

This statement is intended solely for the use of the Company, its Board of Directors, and the state insurance department with which it files its annual statement. It is not intended for any other purpose.



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Patrick L. Whatley, FCAS, MAAA

The Burkhalter Group, Inc.  
1701 N. Collins, Ste. 226A  
Richardson, Texas 75080  
Tel: (972) 644-8172  
E-mail: [pwhatley1950@gmail.com](mailto:pwhatley1950@gmail.com)

February 20, 2025

## Exhibit A: SCOPE

<u>Loss and Loss Adjustment Expense Reserves:</u>	<u>Amount</u>
1. Unpaid Losses (Liabilities, Surplus and Other Funds page, Col 1, Line 1)	\$0
2. Unpaid Loss Adjustment Expenses (Liabilities, Surplus and Other Funds page, Col 1, Line 3)	\$0
3. Unpaid Losses - Direct and Assumed (Should equal Schedule P, Part 1, Summary, Totals from Cols. 13 and 15, Line 12 * 1000)	\$283,000
4. Unpaid Loss Adjustment Expenses - Direct and Assumed (Should equal Schedule P, Part 1, Summary, Totals from Cols. 17, 19, and 21, Line 12 * 1000)	\$25,000
5. The Page 3 write-in item reserve, "Retroactive Reinsurance Reserve Assumed"	\$0
6. Other Loss Reserve items on which the Appointed Actuary is expressing an Opinion (list separately, adding additional lines as needed)	\$0
<u>Premium Reserves:</u>	
7. Reserve for Direct and Assumed Unearned Premiums for P&C Long Duration Contracts	\$0
8. Reserve for Net Unearned Premiums for P&C Long Duration Contracts	\$0
9. Other Premium Reserve items on which the Appointed Actuary is expressing an Opinion (list separately, adding additional lines as needed)	\$0

## Exhibit B: DISCLOSURES

- |  |              |          |         |
|--|--------------|----------|---------|
| 1. Name of Appointed Actuary   | Whatley      | Patrick  | L       |
| 2. The Appointed Actuary's Relationship to the Company.<br>Enter E or C based upon the following:<br>E if an Employee of the Company or Group<br>C if a Consultant   |              |          | C       |
| 3. The Appointed Actuary's Accepted Actuarial Designation<br>(indicated by the letter code):<br>F if a Fellow of the Casualty Actuarial Society (FCAS)<br>A if an Associate of the Casualty Actuarial Society (ACAS)<br>S if a Fellow of the Society of Actuaries (FSA) through the<br>General Insurance track<br>M if the actuary does not have an Accepted Actuarial Designation<br>but is approved by the Academy's Casualty Practice Council.<br>O for Other |              |          | F       |
| 4. Type of Opinion, as identified in the OPINION paragraph.<br>Enter R, I, E, Q, or N based upon the following:<br>R if Reasonable<br>I if Inadequate or Deficient Provision<br>E if Excessive or Redundant Provision<br>Q if Qualified. Use Q when part of the OPINION is Qualified.<br>N if No Opinion   |              |          | R       |
| 5. Materiality Standard expressed in US dollars (Used to Answer<br>Question #6)  | \$0          |          |         |
| 6. Are there significant risks that could result in Material Adverse<br>Deviation?   | Yes [ ]      | No [ X ] | N/A [ ] |
| 7. Statutory Surplus (Liabilities, Surplus and Other Funds page,<br>Col 1, Line 37)  | \$19,608,006 |          |         |
| 8. Anticipated net salvage and subrogation included as a reduction to<br>loss reserves as reported in Schedule P<br>(should equal Part 1 Summary, Col 23, Line 12 * 1000)  | \$0          |          |         |
| 9. Discount included as a reduction to loss reserves and loss expense<br>reserves as reported in Schedule P  |              |          |         |
| 9.1 Nontabular Discount [Notes, Line 32B23, (Amounts 1,2,3,&4)],<br>Electronic Filing Cols 1,2,3,&4,   | \$0          |          |         |
| 9.2 Tabular Discount [Notes, Line 32A23 (Amounts 1 & 2)]<br>Electronic Filing Cols 1 & 2.  | \$0          |          |         |
| 10. The net reserves for losses and expenses for the company's share of<br>voluntary and involuntary underwriting pools' and associations'<br>unpaid losses and expenses that are included in reserves shown on<br>the Liabilities, Surplus and Other Funds page, Losses and Loss<br>Adjustment Expense lines.   | \$0          |          |         |



11. The net reserves for losses and loss adjustment expenses that the company carries for the following liabilities included on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expense lines. *	
11.1 Asbestos, as disclosed in the Notes to Financial Statements (Notes, Line 33A03D, ending net asbestos reserves for current year) Electronic Filing Col 5	\$0
11.2 Environmental, as disclosed in the Notes to Financial Statements (Notes, Line 33D03D, ending net environmental reserves for current year) Electronic Filing Col 5	\$0
12. The total claims made extended loss and expense reserve (Greater than or equal to Schedule P Interrogatories).	
12.1 Amount reported as loss and loss adjustment expense reserves	\$0
12.2 Amount reported as unearned premium reserves	\$0
13. The net reserves for the A&H Long Duration Contracts that the Company carries on the following lines on the Liabilities, Surplus and Other Funds page:	
13.1 Losses	\$0
13.2 Loss Adjustment Expenses	\$0
13.3 Unearned Premium	\$0
13.4 Write-In (list separately, adding additional lines as needed, and identify (e.g., "Premium Deficiency Reserves", "Contract Reserves other than Premium Deficiency Reserves" or "AG51 Reserves"))	\$0
14. Other items on which the Appointed Actuary is providing Relevant Comment (list separately, adding additional lines as needed)	\$0

\* The reserves disclosed in item 11 above should exclude amounts relating to contracts specifically written to cover asbestos and environmental exposures. Contracts specifically written to cover these exposures include Environmental Impairment Liability (post 1986), Asbestos Abatement, Pollution Legal Liability, Contractor's Pollution Liability, Consultant's Environmental Liability, and Pollution and Remediation Legal Liability.

## Exhibit A: SCOPE

Loss and Loss Adjustment Expense Reserves:

[illegible]

Premium Reserves:

[illegible]

SUPPLEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

Exhibit B: DISCLOSURES

1  
Amount

1.

Name of the Appointed Actuary .....

Patrick L Whatley

2.

The Appointed Actuary's relationship to the Company. Enter E or C based upon the following: .....

E if an Employee of the Company or Group

C if a Consultant

C

3.

The Appointed Actuary's Accepted Actuarial Designation (indicated by the letter code):.....

F if a Fellow of the Casualty Actuarial Society (FCAS)

A if an Associate of the Casualty Actuarial Society (ACAS)

S if a Fellow of the Society of Actuaries (FSA) though the General Insurance track

M if the actuary does not have an Accepted Actuarial Designation, but is approved by the Academy's Casualty Practice Council.

O for Other

F

4.

Type of Opinion, as identified in the OPINION paragraph. Enter R, I, E, Q, or N based upon the following: .....

R if Reasonable

I if Inadequate or Deficient Provision

E if Excessive or Redundant Provision

Q if Qualified. Use Q when part of the OPINION is Qualified.

N if No Opinion

R

5.

Materiality Standard expressed in US dollars (Used to Answer Question #6) .....

0

6.

Are there Significant Risks that could result in Material Adverse Deviation? .....

Yes [ ] No [X] N/A [ ]

7.

Statutory Surplus (Liabilities, Surplus and Other Funds page, Col 1, Line 37) .....

19,608,006

8.

Anticipated net salvage and subrogation included as a reduction to loss reserves as reported in Schedule P (should equal Part 1 Summary, Col 23, Line 12 \* 1000) .....

9.

Discount included as a reduction to loss reserves and loss adjustment expense reserves as reported in Schedule P

9.1 Nontabular Discount [Notes, Line 32B23, (Amounts 1, 2, 3 & 4)], Electronic Filing Cols 1, 2, 3, & 4 .....

9.2 Tabular Discount [Notes, Line 32A23, (Amounts 1 & 2)], Electronic Filing Col 1 & 2 .....

10.

The net reserves for losses and loss adjustment expenses for the Company's share of voluntary and involuntary underwriting pools' and associations' unpaid losses and loss adjustment expenses that are included in reserves shown on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expenses lines. ....

11.

The net reserves for losses and loss adjustment expenses that the Company carries for the following liabilities included on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expenses lines. \*

11.1 Asbestos, as disclosed in the Notes to Financial Statements (Notes, Line 33A03D, ending net asbestos reserves for current year) Electronic Filing Col 5 .....

11.2 Environmental, as disclosed in the Notes to Financial Statements (Notes, Line 33D03D, ending net environmental reserves for current year), Electronic Filing Col 5 .....

12.

The total claims made extended loss and loss adjustment expense, and unearned premium reserves (Greater than or equal to Schedule P Interrogatories).

12.1 Amount reported as loss and loss adjustment expense reserves .....

12.2 Amount reported as unearned premium reserves .....

13.

The net reserves for the A&H Long Duration Contracts that the Company carries on the following lines on the Liabilities, Surplus and Other Funds page:

13.1 Losses .....

13.2 Loss Adjustment Expenses .....

13.3 Unearned Premium .....

13.4 Write-In (list separately, adding additional lines as needed, and identify (e.g., "Premium Deficiency Reserves", "Contract Reserves other than Premium Deficiency Reserves" or "AG 51 Reserves")) .....

14.

Other items on which the Appointed Actuary is providing relevant comment (list separately, adding additional lines as needed)

\* The reserves disclosed in item 11 above, should exclude amounts relating to contracts specifically written to cover asbestos and environmental exposures. Contracts specifically written to cover these exposures include Environmental Impairment Liability (post 1986), Asbestos Abatement, Pollution Legal Liability, Contractor's Pollution Liability, Consultant's Environmental Liability, and Pollution and Remediation Legal Liability.



SUPPLEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS**

**AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES**

(To Be Filed by March 1)

NAIC Group Code      3279

NAIC Company Code      11496

	Direct Business Only			
	Prior Year	Current Year		
	1	2	3	4
	Written Premium	Written Premium	Losses Paid (deducting salvage)	Losses Unpaid (Case Base)
1. Completed operations .....				
2. Errors & omissions (E&O) .....				
3. Directors & officers (D&O) .....				
4. Environmental liability .....				
5. Excess workers' compensation .....				
6. Commercial excess & umbrella .....				
7. Personal umbrella .....				
8. Employment liability .....				
9. Aggregate write-ins for facilities & premises (CGL) .....	1,979	1,387	0	0
10. Internet & cyber liability .....				
11. Aggregate write-ins for other .....	0	0	0	0
12. Total ASL 17 - other liability (sum of lines 1 through 11)	1,979	1,387	0	0
<b>DETAILS OF WRITE-INS</b>				
0901. Premises .....	1,979	1,387		
0902. ....				
0903. ....				
0998. Summary of remaining write-ins for Line 9 from overflow page .....	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	1,979	1,387	0	0
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0



SUPPLEMENT FOR THE YEAR 2024 OF THE Insurors Indemnity Select Insurance Company

**MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR**

For The Year Ended December 31, 2024  
(To Be Filed by March 1)

**FOR THE STATE OF: Texas**

NAIC Group Code      3279      NAIC Company Code      11496

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income .....	NO
2. Health .....	NO
3. Homeowners .....	YES
4. Individual Annuity .....	NO
5. Individual Life .....	NO
6. Lender-Placed Home and Auto .....	NO
7. Long-Term Care .....	NO
8. Other Health .....	NO
9. Private Flood .....	NO
10. Private Passenger Auto .....	NO
11. Short-Term Limited Duration Health Plans .....	NO
12. Travel	NO