QUARTERLY STATEMENT

OF THE

Insurors Indemnity Company

TO THE

Insurance Department

OF THE

STATE OF

Texas

FOR THE QUARTER ENDED SEPTEMBER 30, 2021

PROPERTY AND CASUALTY

2021

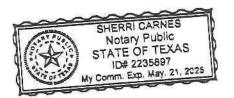


PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2021
OF THE CONDITION AND AFFAIRS OF THE
Insurors Indemnity Company

Organized under the Laws of Taxes State of Domicile or Port of Entry TX Country of Domicile United States of America United States of America Ocommenced Business	NAIC Gro	oup Code 3279 3279 N. (Current) (Prior)	AIC Company Code _4	3273 Employer's ID N	1umber 74-2262949
Incorporated/Organized C20111983 Commenced Business 050111983 Statutory Home Office 225 South Fifth Street (Sinest and Number) (City or Town, State, Country and Zip Code) Waco, TX, US 78701 (City or Town, State, Country and Zip Code) (Sinest and Number) (City or Town, State, Country and Zip Code) (City or Town, State, Country and Zip Code) (Sinest and Number or P. D. Box 322577 Waco, TX, US 78703 (Street and Number or P. D. Box) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) (Area	Organized under the Laws of		, State	of Domicile or Port of Entry	ТХ
Statutory Home Office	Country of Domicile		United States of Amer	ca	
(City or Town, State, Country and Zip Code) Main Administrative Office Waso, TX, U.S. 78701 (City or Town, State, Country and Zip Code) (City or Town, S	Incorporated/Organized	02/01/1983	Cor	nmenced Business	05/01/1983
Main Administrative Office Waco, TX, US 78701 (City or Town, State, Country and Zip Code) (City or Town, State, Country and Zip Code) Mail Address Primary Location of Books and Records 225 South Fifth Street (City or Town, State, Country and Zip Code) (City or Town, State, Country and Zip Code) Primary Location of Books and Records 225 South Fifth Street (Street and Number) Waco, TX, US 78703 (Gity or Town, State, Country and Zip Code) (Internet Website Address) Waco, TX, US 78703 (Street and Number) Waco, TX, US 78703 (City or Town, State, Country and Zip Code) (Warse Code) (Telephone Number) Waco, TX, US 78703 (Warse) Waco, TX, US 78703 (Street and Number) Waco, TX, US 78703 (Waco, TX, US 78703 (Waco, TX, US 78703 (Warse) Tammy Teperman Thomas G. Chase Jr. Walkian R. Vance Dave E Talbert Dave E. Talbert Tammy Teperman Thomas G. Chase Jr. Townsure Thomas G.	Statutory Home Office	225 South Fifth Street			
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(Street and Number or P.O. Box) (City or Town, State, Gountry and Zip Code) Primary Location of Books and Records 228 South Fifth Street Waso, TX, US 78701 (Ohy or Town, State, Country and Zip Code) (Internet Website Address www.insurorsindemnity.com Statutory Statement Contact Tammy Tieperman (E-mail Address) (FAX Number) OFFICERS President & CEO Dave E Talbert Tammy Tieperman OTHER Rinett Dawson Somers W. Goodman William A. Netsbit Dave E. Talbert Texas Country of Michael Vier each of the said reporting entity, and that on the reporting period stated above, and of his necess the said reporting entity as of the reporting period stated above, and of his more and deductions thereform for the period ended, and have been complete in accordance with the NAIC Amuse Statement of Jih ea said reporting entity as of the reporting period stated above, and of his more and deductions thereform for the period ended, and have been completed in accordance with the NAIC Amuse Statement Instructions and Accounting Practices and Procedures manual except to the second of the heat of the history of the said reporting period stated above, and of his more and deductions thereform for the period ended, and have been completed in accordance with the NAIC Amuse Statement Instructions and Accounting Practices and Procedures manual except to the vertice of the information, knowledge and belief in accordance with the NAIC Amuse of this statement instructions and Accounting practices and procedures and secure the reporting of the accordance with the NAIC Amuse of this statement instructions and Accounting Practices and Procedures manual except to the vertice of their information, knowledge and belief in accordance with the NAIC Amuse of this statement instructions and Accounting Practices and procedures and accordance with the Cristory of the statement instructions and Accounting Practices and procedures and accordance with the Cristory of the statement of the period practices and procedures and accordance with the Cr			,	(Area	Code) (Telephone Number)
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Statutory Statement Contact Tammy Tieperman (Name) (Name) (Name) (Name) (Name) (Name) (Re-mail Address) (E-mail Address) (E-mail Address) (FAX Number) OFFICERS Fresident & CEO Dave E Talbert Tammy Tieperman OTHER Rhett Dawson Secretary Thomas G Chase Jr. Felicia C. Goodman DIRECTORS OR TRUSTEES George Chase III Undon L. Olson Jr. Felicia C. Goodman William A. Nesbitt Dave E. Talbert Lyndon L. Olson Jr. The officers of this reporting entity being duly swom, 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 and of this neconitation entities or the said reporting entity and contained and except to the extent that (1) state law may differ or, (2) that state unless or regulations require differences in reporting not stated above, and of its income and addeutions from for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that (1) state law may differ or, (2) that state respectively. Furthermore, the scope of this attestation by the described officers also includes the related exceptions regulation in information, knowledge and Deliber procedures and procedures, according fing with the NAIC Annual Statement instructions and Accounting precisions includes the related corresponding entity as considerable and except to formatting differences due to electrons filing of the encised statement. The electrons filing may be requested by verous regulations in flue of or in addition to the encised statement.	(City or Town	, State, Country and Zip Code)		(Area	Code) (Telephone Number)
Tileperman@insurorsindemnity.com Tileperman@insurorsindemnity.com (E-mail Address) OFFICERS President & CEO Dave E Talbert Tammy Tieperman OTHER Rhett Davson Somers W. Goodman DIRECTORS OR TRUSTEES George Chase III Felicia C. Goodman Lyndon L. Olson Jr. Slate of County of Michael Vierega SS: SS: SS: SS: The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that the condition and affairs of the said reporting period stated above, and of its income and deductions therefrom for the period ended, and that the condition and affairs of the said 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 sent reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and that 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 that 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 complete to accounting Practices and Procedures manual except to the sent reference to its all 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 complete to accounting Practices and Procedures annual except to the sent the third (Annual Statement Instructions and Accounting Practices and Procedures, according to the best of their information, knowledge and bel	Internet Website Address		www.insurorsindemnity	com	
Tileperman@insurorsindemnity.com Tileperman@insurorsindemnity.com (E-mail Address) OFFICERS President & CEO Dave E Talbert Tammy Tieperman OTHER Rhett Davson Somers W. Goodman DIRECTORS OR TRUSTEES George Chase III Felicia C. Goodman Lyndon L. Olson Jr. Slate of County of Michael Vierega SS: SS: SS: SS: The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that the condition and affairs of the said reporting period stated above, and of its income and deductions therefrom for the period ended, and that the condition and affairs of the said 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 sent reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and that 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 that 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 complete to accounting Practices and Procedures manual except to the sent reference to its all 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 complete to accounting Practices and Procedures annual except to the sent the third (Annual Statement Instructions and Accounting Practices and Procedures, according to the best of their information, knowledge and bel	Statuton: Statement Contact	Tammy Tienerman	0		254-759-3727
CE-mail Address OFFICERS Treasurer Thomas G Chase Jr.	Statutory Statement Contact			(/	Area Code) (Telephone Number)
President & CEO Dave E Talbert Treasurer Thomas G Chase Jr. Secretary Tammy Tieperman OTHER Rhett Dawson Somers W. Goodman Michael Vieregg DIRECTORS OR TRUSTEES Thomas G. Chase Jr. George Chase III William R. Vance Felicia C. Goodman William A. Nesbitt Dave E. Talbert Lyndon L. Olson Jr. 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 flue statement of all the sakets and liabilities and of this nacordance with the NAIC Amnual Statement instructions and Accounting Precices and Procedures manual sacept to the extent the original instructions and Accounting Precices and Procedures and accept to the extent the theory of the said reporting on trebted to accounting practices and procedures, according to the best of the criment on the company of the said reporting procedures and screen the related consequence of the section flower information, knowledge and belief under original filting and the said to the extent the heat of the said the said the said to the extent the heat of the said the said the said the said the said to the criment of the said to the criment of the said to the criment of the said the said that this said the said that the said the said that the said that the said the said that the said contains the said that th					
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DIRECTORS OR TRUSTEES Thomas G. Chase Jr. George Chase III William R. Vance Felicia C. Goodman William A. Nesbitt Dave E. Talbert Lyndon L. Olson Jr. State of Texas 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 Tammy Tieperman Thomas G. Chase, Jr. Treasurer Teresident & CEO Secretary Treasurer a. Is this an original filing? Yes [X] No [] Subscribed and sworn to before me this b. If no. 2. Date filed		ω·	OTHER		
Thomas G. Chase Jr. Felicia C. Goodman Lyndon L. Olson Jr. State of 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 reporting entity as of the reporting period stated above, and of its more 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 unless 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 are 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 Tammy Tieperman Thomas G. Chase, Jr. Treasurer a. Is this an original filing? Yes [X] No [] Subscribed and sworn to before me this 1. State the amendment number. 2. Date filed	Rhett Dawso	in	Somers W. Goodm	an	Michael Vieregg
Felicia C. Goodman Lyndon L. Olson Jr. State of 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 referred to, is a full and true statement of all the assets and flabilities 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 law may differ, or, (2) that state is a 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 are 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. Subscribed and sworn to before me this Dave E. Talbert Tammy Tieperman Thomas G. Chase, Jr. Treasurer Treasurer a. Is this an original filing? Yes [X] No [] Subscribed and sworn to before me this 1. State the amendment number. 2. Date filed		ם	RECTORS OR TRU	STEES	
Eyndon L. Olson Jr. State of Texas County of McLennan SS: The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and 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 filling with the NAIC, when required, that is are exact copy (except for formatting differences due to electronic filling) of the enclosed statement. Dave E. Talbert President & CEO Tammy Tieperman Thomas G. Chase, Jr. Treasurer a. Is this an original filling? Yes [X] No [] Subscribed and sworn to before me this day of World best 2021 1. State the amendment number. 2. Date filled			George Chase III		
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Dave E. Talbert President & CEO Secretary Thomas G. Chase, Jr. Treasurer Treasurer a. Is this an original filing? Yes [X] No [] b. If no. 1. State the amendment number. 2. Date filed	all of the herein described assets w statement, together with related exh condition and affairs of the said repo in accordance with the NAIC Annua rules or regulations require differe respectively. Furthermore, the scop exact copy (except for formatting dif-	vere the absolute property of the said bibts, schedules and explanations there briting entity as of the reporting period's il Statement Instructions and Accounti need in reporting not related to account the of this aptestation by the described	reporting entity, free an ein contained, annexed or stated above, and of its in ing Practices and Procecounting practices and proficers also includes the	d clear from any liens or a referred to, is a full and to acome and deductions ther ures manual except to the rocedures, according to a related corresponding else	claims thereon, except as herein stated, and that it rue statement of all the assets and liabilities and of refrom for the period ended, and have been complet extent that: (1) state law may differ; or, (2) that stat the best of their information, knowledge and beli ectronic filing with the NAIC, when required, that is
President & CEO Secretary Treasurer a. Is this an original filing?	to the enclosed statement.	Sant Jan	my Dupe	iman /	Namue Halasel
President & CEO Secretary Treasurer a. Is this an original filing?	Danie F 7-15-14		Tammy Transmiss	(Thomas G Chase Ir
Subscribed and sworn to before me this a. Is this an original filing?			The state of the s		
2. Date filed	Subscribed and sworn to before me	this	a. b.	If no.	
	day of)		2. Date filed	114100000000000000000000000000000000000



ASSETS

	-	1	2	3	December 31
				Net Admitted Assets	Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	14,498,195		14,498,195	16, 196, 142
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks	6, 150, 821		6,150,821	5,510,570
3.	Mortgage loans on real estate:				
	3.1 First liens	500,000		500,000	500,000
	3.2 Other than first liens.			0	0
4.	Real estate:				
٦.	4.1 Properties occupied by the company (less \$				
					0
	encumbrances)			0	0
	4.2 Properties held for the production of income (less				
	\$ encumbrances)			0	ļ0
	4.3 Properties held for sale (less \$				
	encumbrances)			0	0
5.	Cash (\$25,989,743), cash equivalents				
0.	(\$				
	investments (\$	05 000 740		05 000 740	04 070 447
6.	Contract loans (including \$ premium notes)				
7.	Derivatives				0
8.	Other invested assets			0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets			0	0
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)				
	Title plants less \$ charged off (for Title insurers			, 100,100	17,101,000
13.					0
	only)				
14.	Investment income due and accrued			73,359	133,611
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	1,631,998		1,550,828	1,561,930
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)	3, 166, 010		3, 166, 010	2,798,771
	15.3 Accrued retrospective premiums (\$, ,	
	contracts subject to redetermination (\$			0	0
16					
16.	Reinsurance:	4 000 740		4 000 740	400 740
	16.1 Amounts recoverable from reinsurers				_
	16.2 Funds held by or deposited with reinsured companies				0
	16.3 Other amounts receivable under reinsurance contracts				
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	171,396		171,396	213,237
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software				0
	Furniture and equipment, including health care delivery assets				
21.					0
	(\$				
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	
23.	Receivables from parent, subsidiaries and affiliates	700,000		·	1,000,000
24.	Health care (\$) and other amounts receivable			0	0
25.	Aggregate write-ins for other than invested assets	0	0	0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	53,964,265	81,170	53,883,095	53,391,127
27.	From Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts				
28.	Total (Lines 26 and 27)	53,964,265	81,170	53,883,095	53,391,127
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page			0	0
	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.					
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)	0	0	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	·	1 Current Statement Date	2 December 31, Prior Year
1.	Losses (current accident year \$)	8,449,971	7,769,396
2.	Reinsurance payable on paid losses and loss adjustment expenses		0
3.	Loss adjustment expenses		535,277
4.	Commissions payable, contingent commissions and other similar charges		978,650
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	129,064	86,204
7.1	Current federal and foreign income taxes (including \$ on realized capital gains (losses))	(370,349)	373,095
7.2	Net deferred tax liability		
8.	Borrowed money \$ and interest thereon \$	500,000	500,000
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ 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	852,885	512,882
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties		0
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		0
16.	Provision for reinsurance (including \$ certified)		Ï
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18. 19.	Drafts outstanding Payable to parent, subsidiaries and affiliates		477,857
20.	Derivatives		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		1,180,040
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		24,402,198
27.	Protected cell liabilities	, ,	, ,
28.	Total liabilities (Lines 26 and 27)	24,390,460	24,402,198
29.	Aggregate write-ins for special surplus funds		0
30.	Common capital stock		2,500,000
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		0
33.	Surplus notes		0
34.	Gross paid in and contributed surplus	9,139,959	9,139,959
35.	Unassigned funds (surplus)	17,852,676	17,348,970
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)	29,492,635	28,988,929
38.	Totals (Page 2, Line 28, Col. 3)	53,883,095	53,391,127
	DETAILS OF WRITE-INS		
2501.	Collateral held by the Company	393,741	1,180,040
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)	393,741	1,180,040
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.			
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		0
3299.	Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

STATEMENT OF INCOME

	OTATEMENT OF INC	• · · · · ·		
		Current	2 Prior Year	3 Prior Year Ended
	UNDERWRITING INCOME	Year to Date	to Date	December 31
1.	Premiums earned:			
	1.1 Direct (written \$	30,696,962	16,630,886	24,768,625
	1.2 Assumed (written \$			13,451,172
	1.3 Ceded (written \$		13,835,843	18,351,457
	1.4 Net (written \$	16, 131, 189	14,658,935	19,868,340
	DEDUCTIONS:			
2.	Losses incurred (current accident year \$):			
	2.1 Direct	24,770,750	7,499,607	17,659,455
	2.2 Assumed			0
	2.3 Ceded			10,955,960
	2.4 Net			6,703,495
3.	Loss adjustment expenses incurred			761,830
4.	Other underwriting expenses incurred	8,338,689		9,432,851
5.	Aggregate write-ins for underwriting deductions	0		0
6.	Total underwriting deductions (Lines 2 through 5)		14,032,908	16,898,176
7.	Net income of protected cells			
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	(395,002)	626,027	2,970,164
	INVESTMENT INCOME			
9.	Net investment income earned	653,952		907,295
10.	Net realized capital gains (losses) less capital gains tax of \$	0	301,478	323,643
11.	Net investment gain (loss) (Lines 9 + 10)	653,952	1,073,252	1,230,938
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered			
	\$ amount charged off \$	0		(3,589)
13.	Finance and service charges not included in premiums	45,989		28,586
14.	Aggregate write-ins for miscellaneous income		0	0
15.	Total other income (Lines 12 through 14)	45,989	14,016	24,997
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal			,
	and foreign income taxes (Lines 8 + 11 + 15)	304,939	1,713,295	4,226,099
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)	304,939		4,226,099
19.	Federal and foreign income taxes incurred	26,350	294,436	830,382
20.	Net income (Line 18 minus Line 19)(to Line 22)	278,589	1,418,859	3,395,717
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year	28,988,929	28,367,863	28,367,863
22.	Net income (from Line 20)	278,589	1,418,859	3,395,717
23.	Net transfers (to) from Protected Cell accounts		, ,	
24.	Change in net unrealized capital gains (losses) less capital gains tax of \$			
25.	Change in net unrealized foreign exchange capital gain (loss)			
26.	Change in net deferred income tax			(2,909)
27.	Change in nonadmitted assets			27,788
28.	Change in provision for reinsurance			·
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:			
55.	33.1 Paid in	0	0	0
	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			0
37.	Aggregate write-ins for gains and losses in surplus	0	(94,402)	(94,402)
38.	Change in surplus as regards policyholders (Lines 22 through 37)	503,706	725,593	621,066
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	29,492,635	29,093,456	28,988,929
39.	· · · · · · · · · · · · · · · · · · ·	29,492,000	29,090,400	20,300,323
0504	DETAILS OF WRITE-INS			
0501.				
0502.				
0503.	Curamany of remaining write inc for Line E from quadran neces		0	
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	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)	U	0	(04.403)
3701.	•			(94,402)
3702.				0
3703.				0
3798.	Summary of remaining write-ins for Line 37 from overflow page			0
3799.	Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	(94,402)	(94,402)

CASH FLOW

	CASH FLOW			
	_	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	16,599,916	15,023,190	19,617,767
2.	Net investment income	713,764	848,670	944,249
3.	Miscellaneous income	45,989	14,016	24,997
4.	Total (Lines 1 to 3)	17,359,669	15,885,876	20,587,013
5.	Benefit and loss related payments	7,131,660	4,771,981	4,983,498
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	9,347,765	7,531,825	9,608,561
8.	Dividends paid to policyholders	0	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	669,430	818,887	971,790
10.	Total (Lines 5 through 9)	17,148,855	13,122,693	15,563,849
11.	Net cash from operations (Line 4 minus Line 10)	210,814	2,763,183	5,023,164
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	5,597,718	5,057,272	1,597,521
	12.2 Stocks	76,900	379,879	4,001,190
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	5,674,618	5,437,151	5,598,711
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	4,265,800	500,000	500,000
	13.2 Stocks	72,000	0	2,700
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	4,337,800	500,000	502,700
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	1,336,818	4,937,151	5,096,011
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock			0
	16.3 Borrowed funds		0	500,000
	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)	(536,036)	173,699	197, 155
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(536,036)	173,699	697, 155
	DECONCILIATION OF CASH CASH EQUIVALENTS AND SHOPT TERM INVESTMENTS			
18.	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS Net change in cash, cash, equivalents and short-term investments (Line 11, plus Lines 15 and 17)	1,011,596	7,874,033	10,816,330
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) Cash, cash equivalents and short-term investments:	1,011,090		10,010,000
ıσ.	oush, such equivalents and short-term investinents.			
	19.1 Beginning of year	24,978,147	14, 161,817	14, 161,817

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

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring the Domicile, as required by the Model Act?			Yes [] No [X]					
1.2	If yes, has the report been filed with the domiciliary state?			Yes [] No []					
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?								
2.2	If yes, date of change:			·····- <u> </u>					
3.1	8.1 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 and 1A.								
3.2	Have there been any substantial changes in the organizational chart since	ce the prior quarter end?		Yes [] No [X]					
3.3	If the response to 3.2 is yes, provide a brief description of those changes	is.							
3.4	Is the reporting entity publicly traded or a member of a publicly traded gro	oup?		Yes [] No [X]					
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code is	sued by the SEC for the entity/group.		·····					
4.1	Has the reporting entity been a party to a merger or consolidation during If yes, complete and file the merger history data file with the NAIC.	the period covered by this statement	?	Yes [] No [X]					
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of ceased to exist as a result of the merger or consolidation.	domicile (use two letter state abbrevi	iation) for any entity that has						
	1 Name of Entity	2 NAIC Company Code	3 State of Domicile						
5.	If the reporting entity is subject to a management agreement, including the in-fact, or similar agreement, have there been any significant changes relifiyes, attach an explanation.	nird-party administrator(s), managing garding the terms of the agreement o	general agent(s), attorney- or principals involved?	es [] No [X] N/A [
6.1	State as of what date the latest financial examination of the reporting ent	tity was made or is being made		12/31/2017					
6.2	State the as of date that the latest financial examination report became a date should be the date of the examined balance sheet and not the date								
6.3	State as of what date the latest financial examination report became avaithe reporting entity. This is the release date or completion date of the exidate).	amination report and not the date of the	he examination (balance she	et					
6.4 6.5	By what department or departments? TEXAS DEPARTMENT OF INSURANCE Have all financial statement adjustments within the latest financial exami statement filed with Departments?			'es [X] No [] N/A [
6.6	Have all of the recommendations within the latest financial examination r	report been complied with?		'es [X] No [] N/A [
7.1	Has this reporting entity had any Certificates of Authority, licenses or reg revoked by any governmental entity during the reporting period?								
7.2	If yes, give full information:								
8.1	Is the company a subsidiary of a bank holding company regulated by the	Federal Reserve Board?		Yes [] No [X]					
8.2	If response to 8.1 is yes, please identify the name of the bank holding co	mpany.							
8.3	Is the company affiliated with one or more banks, thrifts or securities firm	ns?		Yes [] No [X]					
8.4	If response to 8.3 is yes, please provide below the names and location (or regulatory services agency [i.e. the Federal Reserve Board (FRB), the OInsurance Corporation (FDIC) and the Securities Exchange Commission	ffice of the Comptroller of the Current	cy (OCC), the Federal Depos						
	1 Affiliate Name	2 Location (City, State)	3 4 FRB OCC	5 6 FDIC SEC					

GENERAL INTERROGATORIES

9.1	ssimilar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (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. If the response to 9.1 is No, please explain: If the response to 9.2 is Yes, provide information related to amendment(s). Has the code of ethics for senior managers been amended? If the response to 9.3 is Yes, provide the nature of any waiver(s). FINANCIAL Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? If yes, indicate any amounts receivable from parent included in the Page 2 amount: INVESTMENT Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available fuse by another person? (Exclude securities under securities lending agreements). If yes, jud land complete information relating thereto: Amount of real estate and mortgages held in short-term investments: Does the reporting entity have any investments in parent, subsidiaries and affiliates? If yes, please complete the following: 1 prior Year-End Book/Adjusted Carrying Value Bonds 5 0 2 Amount of real estate and mortgages held in short-term investments: Does the reporting entity have any investments in parent, subsidiaries and affiliates? 1 prior Year-End Book/Adjusted Carrying Value 2 preferred Stock. 5 0 5 00,000 3 Mortgage Loans on Real Estate 5 00,000 3 Mortgage Loans on Real Estate 5 00,000 5 Mortgage Loans on Real Estate 5 00,000 5 Mortgage Loans on Real E		and professional	Yes [X] No []		
9.11	If the response to 9.1 is No, please explain:						
9.2 9.21	<u> </u>			Yes [] No [X]		
9.3 9.31	(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. If the response to 9.1 is No, please explain: Has the code of ethics for senior managers been amended? If the response to 9.2 is Yes, provide information related to amendment(s). Have any provisions of the code of ethics been waived for any of the specified officers? If the response to 9.3 is Yes, provide the nature of any waiver(s). FINANCIAL Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$\text{INVESTMENT}\$ Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) If yes, give full and complete information relating thereto: Amount of real estate and mortgages held in other invested assets in Schedule BA: Amount of real estate and mortgages held in short-term investments: \$\text{S} Does the reporting entity have any investments in parent, subsidiaries and affiliates? If yes, please complete the following:						
	FINANCIAL						
10.1 10.2							
	INVESTMENT						
11.1 11.2	use by another person? (Exclude securities under securities lending agreements.)			Yes [] No [X]		
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		\$				
13.							
14.1 14.2				Yes [X			
			Prior Year-End Book/Adjusted	Boo	2 rent Quarter ok/Adjusted rying Value		
14.21	Bonds	\$	0				
14.22	Preferred Stock	\$	0				
					500,000		
					500,000		
15.1	Has the reporting entity, entered into any hedging transactions reported on Schedule DB?			Yes [1 No [X]		
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?		Yes [] No [] N/A [X]		
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement da	ate:					
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2			·	0		
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL,						
	16.3 Total payable for securities lending reported on the liability page.				0		

GENERAL INTERROGATORIES

7. 7.1	offices, vaults or safety custodial agreement w Outsourcing of Critical	y deposit boxes, w vith a qualified ban Functions, Custoo	Special Deposits, real estate, mo ere all stocks, bonds and other sek or trust company in accordance dial or Safekeeping Agreements of requirements of the NAIC Financi	ecurities, owne e with Section of the NAIC Fi	ed throughout t 1, III - General nancial Conditi	the current year I Examination Co on Examiners H	held pursuant to a onsiderations, F. landbook?	Yes	[X] No [
		1	- P (-)			2			
	HILLTOP SECURITIES	Name of Custo	odian(s)	DALLAS TEXA	S	Custodian Addr	ess		
.2	For all agreements that location and a comple		ith the requirements of the NAIC	Financial Con	dition Examine	rs Handbook, pr	rovide the name,		
	1 Name(s)	2 Location(s)		(3 Complete Explai	nation(s)		
'.3 '.4	Have there been any of the second of the sec		name changes, in the custodian((s) identified in	17.1 during th	e current quarte	r?	Yes	[] No [X]
	1 Old Custo	odian	2 New Custodian	Date	3 of Change		4 Reason		
'.5	make investment deci	sions on behalf of ccess to the invest	vestment advisors, investment mather reporting entity. For assets the ment accounts"; "handle securi	at are manage ities"]	ed internally by				
		1 Name of Firm		2 Affilia	tion				
	17.5097 For those firm	ns/individuals listed	d in the table for Question 17.5, domore than 10% of the reporting e	o any firms/ind	lividuals unaffi			Yes	[] No [X
			I with the reporting entity (i.e. desit aggregate to more than 50% of t					Yes	[] No [X
.6	For those firms or inditable below.	viduals listed in the	e table for 17.5 with an affiliation of	code of "A" (af	filiated) or "U"	(unaffiliated), pr	ovide the information for t	he	
	1		2			3	4		5 Investment
	Central Registration Depository Number		Name of Firm or Individual		l egal Entity	Identifier (LEI)	Registered With		Management Agreement (IMA) Filed
	Depository (Variable)		Name of Film of Individual		Logar Entity		registered with		(IIVI/ t) T IICU
	Have all the filing requ If no, list exceptions:	irements of the Pu	irposes and Procedures Manual o	of the NAIC Inv	estment Analy	ysis Office been	followed?	Yes	[X] No [
9.	a. Documentation security is not a b. Issuer or obligo c. The insurer has	necessary to perravailable. or is current on all or an actual expects	porting entity is certifying the follonit a full credit analysis of the sectontracted interest and principal pation of ultimate payment of all co5GI securities?	urity does not payments. ntracted intere	exist or an NA st and principa	IC CRP credit ra	iting for an FE or PL	Yes	[] No [X
).	a. The security was b. The reporting er c. The NAIC Desig on a current priv d. The reporting er	s purchased prior that it is holding capitation was deriver that letter rating health is not permitted.	reporting entity is certifying the fol to January 1, 2018. ital commensurate with the NAIC d from the credit rating assigned teld by the insurer and available for d to share this credit rating of the PLGI securities?	Designation roby an NAIC CF r examination PL security w	eported for the RP in its legal of by state insura ith the SVO.	security. capacity as a NF ince regulators.	SRO which is shown	Yes	[] No [X
١.	By assigning FE to a SFE fund: a. The shares were b. The reporting rc. The security had January 1, 2019 d. The fund only or e. The current reports	Schedule BA non-re purchased prior hatity is holding capid a public credit ration. The predominantly hoorted NAIC Design	registered private fund, the reportion of January 1, 2019. Ital commensurate with the NAIC ting(s) with annual surveillance as lds bonds in its portfolio. Italiance at the public attion was derived from the public register.	ing entity is ce Designation resigned by an	rtifying the follo eported for the NAIC CRP in i	owing elements security. ts legal capacity	of each self-designated as an NRSRO prior to		
	f. The public credit		ual surveillance assigned by an N Schedule BA non-registered priva			he above criteria	a?	Yes	[] No [X

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting of the set of th	•	per of a pooling	arrangement, di	d the agreemen	t or the reportir	ng entity's partic	cipation change?	YeYe	s [] No [] N/A [X]
2.		oss that may oc		any other report or portion thereo						Yes [] N	lo [X]
3.1	Have any of the	e reporting entity	/'s primary reins	urance contracts	s been canceled	1?				Yes [] N	lo [X]
3.2	Have any of the reporting entity's primary reinsurance contracts been canceled? If yes, give full and complete information thereto. Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserve (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a reinterest greater than zero? If yes, complete the following schedule:										
4.1	(see Annual Sta interest greater	atement Instruct than zero?	tions pertaining	to disclosure of	discounting for d	definition of " ta	bular reserves") discounted at	a rate of	Yes [] N	lo [X]
			_				_			DURING PERI	
Line		Maximum	Discount	Unpaid	Unpaid	-		Unpaid	9 Unpaid LAE	10 IBNR	11 TOTAL
			TOTAL	0	0	0	0	0	0	0	(
5.											
	5.2 A&H cost co	ontainment perd	cent								
	5.3 A&H expens	se percent excl	uding cost conta	inment expense	s						
6.1	Do you act as a	custodian for h	nealth savings a	ccounts?						Yes [] N	lo [X]
6.2	If yes, please p	rovide the amou	unt of custodial	funds held as of	the reporting da	te			\$		
6.3	Do you act as a	n administrator	for health savin	gs accounts?						Yes [] N	lo [X]
6.4	If yes, please p	rovide the balar	nce of the funds	administered as	of the reporting	date			\$		
7.	Is the reporting	entity licensed	or chartered, re	gistered, qualifie	d, eligible or wri	ting business ir	n at least two st	ates?		Yes [X] N	lo []
7.1				ance business th						Yes [] N	lo []

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date												
1 NAIC	2	3	4	5	6 Certified Reinsurer	7 Effective Date of Certified						
Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Rating (1 through 6)	Reinsurer Rating						
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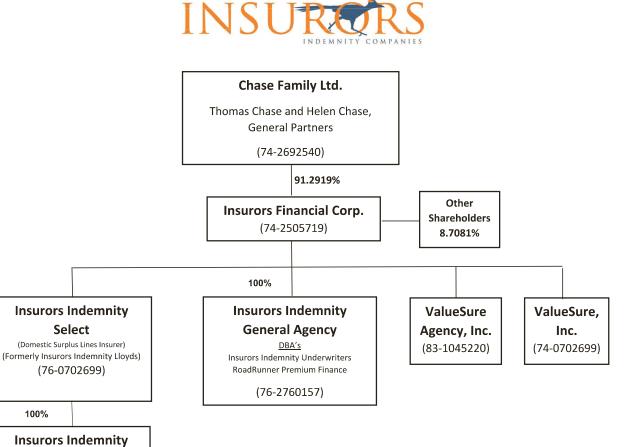
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

	ı			Date - Allocated b			D1	aa Haaald
		1 Active	Direct Premiu	ms Written 3	Direct Losses Paid (I	Deducting Salvage) 5	Direct Loss 6	ses Unpaid 7
		Status	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
	States, etc.	(a)	To Date	To Date	To Date	To Date	To Date	To Date
1.	AlabamaAL	N		0		0		0
2.	AlaskaAK	N		0		0		0
3.	ArizonaAZ	L	98,105	29,553	0	0		0
4.	ArkansasAR	L	10,753	550	0	0		0
5.	CaliforniaCA	NN		0		0		0
6.	Colorado CO	N		0		0		0
	ConnecticutCT	N		0		0		0
8.	Delaware DE	N		0		0		0
	District of ColumbiaDC	N		0		0		0
	FloridaFL	N		0		0		0
	GeorgiaGA	N		0		0		٥٥
	HawaiiHI	N		0		0		٥٥
13.	IdahoID	N.		0		0		٥٥
	IllinoisIL							٥٥
	IndianaIN	N		0		0		٥٥
		N				0		٥٥
16.	lowaIA	N		0		0		
	KansasKS	L	0	0	0	0		0
	KentuckyKY	N		0		0		0
	LouisianaLA	L	0	0	0	0		0
	MaineME	N		0		0		0
	MarylandMD	N		0		0		0
22.	MassachusettsMA	N		0		0		0
23.	MichiganMI	N		0		0		0
	MinnesotaMN	N		0		0		0
25.	MississippiMS	N		0		0		0
	MissouriMO	N		0		0		0
	MontanaMT	N		0		0		0
	NebraskaNE	N		0		0		0
	NevadaNV	L	0	0	0	0		0
	New HampshireNH	N		0		0		0
	New JerseyNJ	NI.		0		0		٥
	New MexicoNM	N	397,716	320,028	0	0		٥٥
			391,110					٥٥
	New YorkNY							
	North CarolinaNC	N		0		0		0
	North DakotaND	N		0		0		0
	OhioOH	N		0		0		0
37.	OklahomaOK	L	185,622	178,024	0	0		0
	OregonOR	N		0		0		0
39.	PennsylvaniaPA	N		0		0		0
40.	Rhode IslandRI	N		0		0		0
41.	South CarolinaSC	N		0		0		0
42.	South DakotaSD	N		0		0		0
	TennesseeTN	N		0		0		0
	TexasTX	L	04 700 004	16,465,928	21, 135, 188	7,492,335	17,788,379	6,241,117
	UtahUT	L			, ,	0	, , , ,	0
	VermontVT	N		0		0		n
	VirginiaVA	N		0		0		n
	WashingtonWA	NN		0		0		ں ۱
	West VirginiaWV	M		0		0		۰
	WisconsinWI	M		0		0		٥٠
		M						٥٠
	WyomingWY	N		0		0		0
	American SamoaAS	N		0		0		0
	GuamGU	N		0		0		0
	Puerto RicoPR	N		0		0		0
	U.S. Virgin IslandsVI	N		0		0		0
56.	Northern Mariana	A.I						^
	IslandsMP	N		0		0		0
	CanadaCAN	N		0		0		0
	Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59.	Totals	XXX	32,485,477	16,994,083	21,135,188	7,492,335	17,788,379	6,241,117
	DETAILS OF WRITE-INS							
58001.		XXX						
		XXX			T			
		XXX						
	Summary of remaining							
55550.	write-ins for Line 58 from							
	overflow page	XXX	0	0	0	0	0	0
58999.	Totals (Lines 58001 through							
	58003 plus 58998)(Line 58							
	above) e Status Counts:	XXX	0	0	0	0	0	0

		above	/
(a)	Active	Status	Counts:

-9 R Registered Non-domiciled RRGs
 - Q Qualified Qualified or accredited reinsurer.0
 - N None of the above Not allowed to write business in the state



S:\Shared Folders\Management\5-Organizational Chart\Company and Ownership\CFL Organization Chart as of 02-26-2021

Select

(76-0702699)

Company (Stock Insurance Company) (74-2262949)

100%

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

											<u> </u>				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship			ship		Filing	
		NAIG					Name of				Management,				
_		NAIC				if Publicly Traded	Names of	ciliary	to	5 6	Attorney-in-Fact,	Provide		Re-	
Group		Company	ID.	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
3279	INSURORS INDEMNITY COMPANIES	11496	76-0702699				INSURORS INDEMNITY SELECT INSURANCE COMPANY.	TX	IA	INSURORS FINANCIAL CORP	Ownership		CHASE FAMILY, LTD	N	
			74-2760157				INSURORS INDEMNITY GENERAL AGENCY, INC	TX	IA	INSURORS FINANCIAL CORP	Ownership	100.000	CHASE FAMILY, LTD	N	
			83-1045220				VALUESURE AGENCY, INC.	TX	IA	INSURORS FINANCIAL CORP	Ownership		CHASE FAMILY, LTD	N	
			74-2993418				VALUESURE, INC.	TX	IA	INSURORS FINANCIAL CORP	Ownership	100.000	CHASE FAMILY, LTD	N	
										INSURORS INDEMNITY SELECT INSURANCE COMPANY					
3279	INSURORS INDEMNITY COMPANIES	43273	74-2262949				INSURORS INDEMNITY COMPANY	TX	RE		Ownership	100.000	CHASE FAMILY, LTD	N	
													THOMAS G & HELEN M CHASE, GENERAL		
			74-2505719				INSURORS FINANCIAL CORP	TX	UDP	CHASE FAMILY, LTD	Ownership	100.000	PARTNERS	N	
				-								 			
				-								 			
															
				-								 			
															
															
								I						1	1

Asterisk	Explanation

PART 1 - LOSS EXPERIENCE

			Current Year to Date		4	
	Line of Business	1 2 3 Direct Premiums Direct Losses Direct Loss Earned Incurred Percentage		Direct Loss	Prior Year to Date Direct Loss Percentage	
1.	Fire	1,415,563	483,496	34.2	(14.7)	
2.	Allied Lines			137.0	3.8	
3.	Farmowners multiple peril			0.0	0.0	
4.	Homeowners multiple peril		11,354,809	101.2	71.7	
5.	Commercial multiple peril	10,533,349	10 , 165 , 409	.96.5		
6.	Mortgage guaranty			0.0	0.0	
8.	Ocean marine			0.0	0.0	
9.	Inland marine		30,079		(20.2)	
10.	Financial guaranty			0.0	0.0	
11.1	Medical professional liability - occurrence			0.0	0.0	
11.2	Medical professional liability - claims-made			0.0	0.0	
12.	Earthquake			0.0	0.0	
13.	Group accident and health			0.0	0.0	
14.	Credit accident and health			0.0	0.0	
15.	Other accident and health			0.0	0.0	
16.	Workers' compensation			0.0	0.0	
17.1	Other liability - occurrence		20,111	5.4	(0.7)	
17.2	Other liability - claims-made		20,111	0.0	0.0	
17.3	Excess workers' compensation			0.0	0.0	
18.1	Products liability - occurrence			5.1	0.0	
18.2	Products liability - claims-made				0.0	
-	Private passenger auto liability			0.0	0.0	
	Commercial auto liability			0.0	0.0	
21.	Auto physical damage			0.0	0.0	
22.	Aircraft (all perils)			0.0	0.0	
23.	Fidelity		(735)	(4.5)	1.2	
24.	Surety		(619,699)		1.1	
26.	Burglary and theft			(13.4)	۱.۱	
27.	Boiler and machinery			0.0	0.0	
28.	Credit			0.0	0.0	
29.	International			0.0	0.0	
30.	Warranty				0.0	
31.	Reinsurance - Nonproportional Assumed Property			0.0	XXX	
32.	Reinsurance - Nonproportional Assumed Liability					
33.	Reinsurance - Nonproportional Assumed Financial Lines				XXX	
34.	Aggregate write-ins for other lines of business	0	0	0.0	0.0	
35.	Totals	30,696,962	24,770,750	80.7	45.1	
3401. 3402. 3403.	DETAILS OF WRITE-INS					
3498.	Summary of remaining write-ins for Line 34 from overflow page					
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0.0	0.0	

	PART Z - DIRECT PR	REMIUMS WRITTEN		
		1	2	3
			Current	Prior Year
1.	Line of Business	Current Quarter	Year to Date	Year to Date
1. 2.	Fire			271, 166
	Allied Lines		, , ,	1,074,174
3.	Farmowners multiple peril			(
4.	Homeowners multiple peril			10,529,902
5.	Commercial multiple peril	, , , , , , , , , , , , , , , , ,	, ,	467,884
6. 8.	Mortgage guaranty	F		
	Ocean marine			
9.	Inland marine	,	36,913	23,379
10.	Financial guaranty			٠
11.1	Medical professional liability - occurrence			
11.2	Medical professional liability - claims-made			٠
12.	Earthquake			٠
13.	Group accident and health			
14.	Credit accident and health			٠
15.	Other accident and health			٠
16.	Workers' compensation		440 455	
17.1	Other liability - occurrence		419, 155	92,658
17.2	Other liability - claims-made			
17.3	Excess workers' compensation		04 500	٠
18.1	Products liability - occurrence	· · · · · · · · · · · · · · · · · · ·	34,563	٠
18.2	Products liability - claims-made			٠
,	Private passenger auto liability			
21.	Commercial auto liability			٠
21. 22.	Auto physical damage			٠
	Aircraft (all perils)		45.004	
23.	Fidelity			16, 101
24.	Surety	1,520,583	4,824,999	4,518,819
26.	Burglary and theft			٠
27. 28.	Boiler and machinery		·····	٠
	Credit			
29.	International			
30.	Warranty			
31. 32.	Reinsurance - Nonproportional Assumed Property			XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines			XXX
34.	Aggregate write-ins for other lines of business		0	
35.	Totals	11.786.247	32.485.477	16.994.083
	DETAILS OF WRITE-INS	,100,211	52, 155, 111	.5,551,000
3401.	DETAILS OF WINTE-ING			
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page		n 1	.0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	

PART 3 (000 omitted) LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
		_									Prior Year-End	Prior Year-End	
								Q.S. Date Known			Known Case Loss	IBNR Loss and	Prior Year-End
					2021 Loss and		Q.S. Date Known	Case Loss and			and LAE Reserves	LAE Reserves	Total Loss and
		5: 1/	Total Prior	2021 Loss and	LAE Payments on		Case Loss and	LAE Reserves on		T	Developed	Developed	LAE Reserve
Varantia Milatah	Drien Veen Fred	Prior Year-	Year-End Loss	LAE Payments on		Total 2021 Loss	LAE Reserves on	Claims Reported	0.0 D-4- IDND	Total Q.S. Loss	(Savings)/	(Savings)/	Developed
Years in Which	Prior Year-End	End IBNR	and LAE	Claims Reported as of Prior	Unreported as of Prior	and LAE	Claims Reported	or Reopened	Q.S. Date IBNR	and LAE	Deficiency	Deficiency	(Savings)/
Losses Occurred	Known Case Loss and LAE Reserves	Loss and LAE Reserves	Reserves (Cols. 1+2)	Year-End	Year-End	Payments (Cols. 4+5)	and Open as of Prior Year End	Subsequent to Prior Year End	Loss and LAE Reserves	Reserves (Cols.7+8+9)	(Cols.4+7 minus Col. 1)	(Cols. 5+8+9 minus Col. 2)	Deficiency (Cols. 11+12)
			` ′		rear-Life	` ′		THOI TEAT LITE		` '	,	,	,
1. 2018 + Prior	1,605	742	2,347	133	0	133	1,051		334	1,385	(421)	(408)	(829)
2. 2019	849	979	1,828	184	51	235	892	57	360	1,309	227	(511	(284)
3. Subtotals 2019 + Prior	2,454	1,721	4, 175	317	51	368	1,943	57	694	2,694	(194)	(919)	(1,113)
4. 2020	1,100	3,030	4, 130	643	460	1, 103	809	34	2,251	3,094	352	(285)	67
5. Subtotals 2020 + Prior	3,554	4,751	8,305	960	511	1,471	2,752	91	2,945	5,788	158	(1,204	(1,046)
6. 2021	XXX	XXX	XXX	XXX	5,971	5,971	XXX	1,285	1,977	3,262	xxx	XXX	XXX
7. Totals	3,554	4,751	8,305	960	6,482	7,442	2,752	1,376	4,922	9,050	158	(1,204)	(1,046)
 Prior Year-End Surplus As Regards Policyholders 	28,989										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1. 4.4	2. (25.3)	3. (12.6)
													0.1.40.117

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

		Response
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
	Explanations:	
1.		
2.		
3.		
4.		
	Bar Codes:	
1.	Trusteed Surplus Statement [Document Identifier 490]	
2.	Supplement A to Schedule T [Document Identifier 455]	
3.	Medicare Part D Coverage Supplement [Document Identifier 365]	
4.	Director and Officer Supplement [Document Identifier 505]	

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Statement of Income Line 37

Addition	al Write-ins for Statement of Income Line 37			
		1	2	3
		Current	Prior Year	Prior Year Ended
		Year to Date	to Date	December 31
3704.	2019 tax adjustment for the federal tax return		146,450	
3705.	2019 audit adjustment for deferred tax asset		(240,852)	
3797.	Summary of remaining write-ins for Line 37 from overflow page	0	(94,402)	0

SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted rying		
7.	Deduct current year's other than temporary impailment recognized		
8.	Deduct current year's depreciation		
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)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	* *	1	2
		Year to Date	Prior Year Ended December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	500,000	500,000
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		0
	2.2 Additional investment made after acquisition		0
3.	Capitalized deferred interest and other		0
4.	Accrual of discount		0
5.	Unrealized valuation increase (decrease)		0
6.	Total gain (loss) on disposals		0
7.	Total gain (loss) on disposals Deduct amounts received on disposals		0
8.	Deduct amortization of premium and mortgage interest points and commitment fees Total foreign exchange change in book value/recorded investment excluding accrued interest Deduct current year's other than temporary impairment recognized		0
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		0
10.	Deduct current year's other than temporary impairment recognized		0
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	500,000	500,000
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		500,000
14.	Deduct total nonadmitted amounts		0
15.	Statement value at end of current period (Line 13 minus Line 14)	500,000	500,000

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	21,706,712	29,515,569
2.	Cost of bonds and stocks acquired	4,337,800	502,700
3.	Accrual of discount		6,921
4.	Unrealized valuation increase (decrease)	278,682	(36,908)
5.	Total gain (loss) on disposals		323,643
6.	Deduct consideration for bonds and stocks disposed of	5,674,618	8,588,711
7.	Deduct amortization of premium	(440)	16,502
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	20,649,016	21,706,712
12.	Deduct total nonadmitted amounts		0
13.	Statement value at end of current period (Line 11 minus Line 12)	20,649,016	21,706,712

SCHEDULE D - PART 1B

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

Duili	ig the Current Quarter for	2	3	Designation	5	6	7	8
	Book/Adjusted	2	3	4	Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Carrying Value	Carrying Value	Carrying Value	Carrying Value
	Beginning	During	During	During	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	16,255,988		1,726,384	(31,409)	17,813,331	16,255,988	14,498,195	20,231,143
2. NAIC 2 (a)	0				0	0	0	0
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)	0				0	0	0	0
5. NAIC 5 (a)	0				0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	16,255,988	0	1,726,384	(31,409)	17,813,331	16,255,988	14,498,195	20,231,143
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
	0				0	0	0	0
13. NAIC 6								
13. NAIC 6	0	0	0	0	0	0	0	0

a	Book/Ad	usted	Carrying	Value	e column	for the	end of	f the c	urrent	reporting	neri	od ind	dudes	the t	followin	a amour	t of sh	ort-terr	n and	cash 6	equivale	ent bond	ls by	/ NAI	C desi	anatio	วท

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year-to-Date	5 Paid for Accrued Interest Year-to-Date
9199999 Totals		XXX			

SCHEDULE DA - VERIFICATION

Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	3,626,452
2.	Cost of short-term investments acquired		1,565,231
3.	Accrual of discount		0
4.	Unrealized valuation increase (decrease)		35,886
5.	Total gain (loss) on disposals		0
6.	Deduct consideration received on disposals		5,218,000
7.	Deduct amortization of premium		9,569
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
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)	0	0

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards ${f N}$ ${f O}$ ${f N}$ ${f E}$

Schedule DB - Part B - Verification - Futures Contracts **NONE**

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE**

SCHEDULE DB - VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

		Book/Adjusted Ca	rrying Value Check
1.	Part A, Section 1, Column 14.		
2.	Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance	0	
3.	Total (Line 1 plus Line 2)		0
4.	Part D, Section 1, Column 6		
5.	Part D, Section 1, Column 7		
6.	Total (Line 3 minus Line 4 minus Line 5)		C
		Foir Vol	ue Check
7	Part A. Cartian 4. Calvern 4C		ie Check
	Part A, Section 1, Column 16		
8.	Part B, Section 1, Column 13		
9.	Total (Line 7 plus Line 8)		0
10.	Part D, Section 1, Column 9		
11.	Part D, Section 1, Column 10		
12	Total (Line 9 minus Line 10 minus Line 11)		0
		Potential Exp	oosure Check
13.	Part A, Section 1, Column 21		
14.	Part B, Section 1, Column 20		
15.	Part D, Section 1, Column 12		
16.	Total (Line 13 plus Line 14 minus Line 15)		0

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	(Oddii Equivalenta)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	4,035,000	6,250,000
2.	Cost of cash equivalents acquired		4,535,000
3.	Accrual of discount		0
4.	Unrealized valuation increase (decrease)		0
5.	Total gain (loss) on disposals		0
6.	Deduct consideration received on disposals	4,035,000	6,750,000
7.	Deduct amortization of premium		0
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	4,035,000
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)	0	4,035,000

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **N O N E**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made NONE

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

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid NONE

SCHEDULE D - PART 3

Show All Long-Term	Danda and Staal	Acquired During the	Current Quarter

		Onow 7 th Long Ten	n Bonds and Stock Acquired During the Current Q	aditoi				
1 2	3	4	5	6	7	8	9	10
								NAIC
								Designation
								NAIC
								Designation
								Modifier
								and
								SVO
				Number of			Paid for Accrued	Admini-
CUSIP		Date		Shares of			Interest and	strative
Identification Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
8399997. Total - Bonds - Part 3	rorcigir	Acquired	radine of vendor	Clock	7 tetdar Gest	1 di Valdo	Dividends	XXX
8399998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total - Bonds					^^^		^^^	XXX
8999997. Total - Preferred Stocks - Part 3					0	XXX	0	XXX
					0		0	
8999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks	1	00 (47 (0004	LOW DUTY OF BULLO	71 100 000	0	XXX	0	XXX
000000-00-0 FEDERAL HOME LOAN BANK OF DALLAS		08/17/2021 FEDERAL HOME	LOAN BANK OF DALLAS	71, 100.000	71,100			
9099999. Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)	Publicly Traded				71,100	XXX	0	XXX
9799997. Total - Common Stocks - Part 3					71,100	XXX	0	XXX
9799998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX
9799999. Total - Common Stocks					71,100	XXX	0	XXX
9899999. Total - Preferred and Common Stocks					71,100	XXX	0	XXX
				·····			<u> </u>	1
9999999 - Totals					71,100	XXX	0	XXX

SCHEDULE D - PART 4

				Show All Lo	ng-Term Bo	nds and Stoc	k Sold, Red	leemed or C	Otherwise	Disposed of	of During th	he Current	Quarter							
1	2	3 4	5	6	7	8	9	10		nange In Bo				16	17	18	19	20	21	22
									11	12	13	14	15							NAIC
																				Desig-
																				nation,
																				NAIC
												Total	Total							Desig-
											Current	Change in						Bond		nation
											Year's	Book/	Exchange	Book/				Interest/		Modifier
								Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Stock	Stated	and
								Book/	Unrealized		Temporary	Carrying	Book	Carrying	Exchange	Realized		Dividends	Con-	SVO
CUSIP				Number of				Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For- Disposa	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)		nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
oation	2 cochpach	o.g., Date	HILLTOP SECURITIES. INC.	Otoon	0.000	. a. value	0001	7 0.00	(Boordage)	71001011011	mzca	10)	Value	2410	D.opeca.	2.opeca.	D.opoou.		2410	
642577-RX-0	New Braunfels Util Sys Rev Bonds	07/01/2021			100,000	100,000	109,824	100,769	L			0		100,000			0	3,000	.07/01/2021	
	,		HILLTOP SECURITIES, INC.				·											·		
91514A-AG-0	Univ of Texas Revenues				100,000	100,000	120,008	101,992				0		100,000			0	2,500	.08/15/2021	
454445 50 5	0.11 100.11411 T 0.1.011	00 /45 /0	HILLTOP SECURITIES, INC.		000 000	000 000	640.000	201 555				_	1	222 222			ا ۽	5 00-	00 /45 /2024	
151145-PQ-6	Celina ISD Util Tax Sch Bldg		HILLTOP SECURITIES, INC.		200,000	200,000	240,332	204,566				0		200,000			0	5,000	.08/15/2021	
528828_V/L-2	Lewisville TX ISD UItd Ref Bds	08/15/2021	HILLIUP SECURITIES, INC.		85,000	85,000	92,081	85,771				0	1	85,000			0	1,275	.08/15/2021	
	LOWISVILLE IN TOD VILL NET DUS		HILLTOP SECURITIES, INC.															1,2/3	1202 10/202	
61371A-JB-7	Montgomery Cnty Tex Mun Util Tax				100,000	100,000	101,483	100, 171				0		100,000			0	1,000	.09/01/2021	
	Subtotal - Bonds - U.S. States, Territo	ries and Posses	sions	'	585.000	585,000	663.728	593.269	0	0	0	0	0	585.000	0	0	0	12,775	XXX	XXX
	FNMA FANNIE MAE POOL				152	152	152	152				0		152			0	32	.06/25/2040	
	FHLMC DG CMO EXCH				772	772	772	772				0		772			0	267	11/15/2022	
	GNMA 2010-15 PF		Pay Down of Security		131	131	131	131				0		131			0	125	10/20/2039	
	FNMA 2012-14 PA		Pay Down of Security		1,904	1,904	1,904	1,904				0		1,904			0	235	.08/25/2041	
	FNMA 2012-16K		Pay Down of Security Pay Down of Security		1,800	1,800 L.	1,800	1,800						1,800 16				321	10/25/2041 02/15/2041	
3137AP-2K-5	FHLMC 4026 JM		Pay Down of Security		1,747	1,747	1,747	1,747				0		1.747			0	240	10/15/2041	
31393A-CF-2	FNMA 2003-29 CLASS WG CMO		Pay Down of Security		1,911	1,911	1,911	1,911				0		1,911			0		.04/25/2033	
3137AN-2W-4	FHLMC 4019 GH CMO EXCH PAC		Pay Down of Security		1, 163	1,163	1, 163	1, 163				0		1, 163			0	259	.12/15/2041	
	FHR 3961 PB				20,047	20,047	20,047	20,047				0		20,047			0	1,687	.04/15/2026	
	GNR 2012-84 NB REMIC				3, 177		3, 177	3, 177				0		3, 177			0	2,609	.07/20/2042	
	FNMA 2012-124 PE REMIC		Pay Down of Security		5,089 2,789	5,089 2,789	5,089 2,789	5,089				0		5,089			0	581 486	.07/25/2042	
	FNMA 2012-105 GP		Pay Down of Security Pay Down of Security		4,970	4,970	4,970	2,789 4,970				0		2,789 4,970				1,340	.03/25/2042	
38378H-FU-5	GNMA 2012-96 KH		Pay Down of Security		3,871	3,871	3,871	3,871				0		3,871			0	727	.06/20/2042	
	FNMA 2013-35 GA		Pay Down of Security		1,279	1,279	1,279	1,279				0		1,279			0	298	.04/25/2028	
38378T-UK-4	GNMA 2013-93 PA		Pay Down of Security		2,523	2,523	2,523	2,523				0		2,523			0	558	.04/25/2028	
3137AA-T6-0	FHLMC 3867 NC		Pay Down of Security		3,042	3,042	3,042	3,042				0		3,042			0	264	.04/15/2040	
	FHLNC 4218 DG		Pay Down of Security		9,543	9,543	9,543	9,543				0		9,543			0	1,604	.07/15/2042	
	FHLMC 4217 KA FHLMC 4032 AD		Pay Down of Security		5,772 2,789	5,772 2,789	5,772 2,789	5,772 2,789				0		5,772 2,789			0	1,372 316	10/15/2040 10/15/2041	
	GNR 2013-180 VM		Pay Down of Security Pay Down of Security		34,953	34,953	34,953	34,953						34,953			0	1,751	10/15/2041	
	GNMA 2011-26 PA		Pay Down of Security	[4,448	4.448	4.448	4.448				0		4.448			0	703	.07/20/2040	
	FHLMC 4313 CV		Pay Down of Security		65, 168	65, 168	65, 168	65,168				0					0	2,874	12/15/2032	
3137AQ-GD-4	FHLMC 4046 HA		Pay Down of Security		6,503	6,503	6,503	6,503				0		6,503			0	1,002	10/15/2041	
	FNMA 2014-70 PY REMIC		Pay Down of Security	ļ ļ	6,982	6,982	6,982	6,982	ļ	ļ		0		6,982		ļ	0	1,935	11/25/2044	
	GNMA 2016-159 MD			}	9, 111 4,732	9,111 4.732	9,111 4,732	9,111 4,732		}		0		9,111 4.732		·	0	1,437 1.468	11/20/2046	
	Subtotal - Bonds - U.S. Special Reven		Pay Down of Security							0	Λ						0		XXX	XXX
3 199999. 3	Sublotai - Burius - U.S. Special Rever	uco	HILLTOP SECURITIES, INC.	1	206,384	206,384	206,384	206,384	0	0	0	0	0	206,384	0	0	0	25, 176	^^^	
06740K-NF-0	Barclays BK Wilmington DE	07/19/2021	IIILLIOF SLOOMITILS, INC.		250,000	250,000	250,000	250,000				0		250,000			0	5,027	.07/19/2021	
			HILLTOP SECURITIES, INC.					200,000												
35471T-CU-4	Franklin Synergy Bk Tenn CD	07/28/2021			100,000	100,000	100,000	100,000				0		100,000			0	1,367	.07/28/2021	
			HILLTOP SECURITIES, INC.													1				
17312Q-R3-5	Citibank NA Sioux Falls SD			ļ	250,000	250,000	250,000	250,000				0		250,000			0	7,541	.08/16/2021	
OFFOCA ANN O	DINI DV North Arra Colle 1 Cold 15	00 (47 (0004	HILLTOP SECURITIES, INC.		400 000	400 000	400 000	400 000				1	1	400.000				0.000	00/47/0004	
UDDBCCU	BMW BK North Amer Salt Lake City UT		HILLTOP SECURITIES, INC.		100,000	100,000	100,000	100,000				1		100,000			0	3,000	.08/17/2021	
29367R-K,I-4	Enterprise BK Allison PK PA	08/17/2021	IIILLIUF SECUNITIES, INC.		150,000	150,000	150,000	150,000				n	1	150,000			n	2,896	.08/17/2021	
2300711 110-4	Enterprise by Allison IV IV		HILLTOP SECURITIES, INC.		130,000		130,000	130,000						130,000				2,090	.00/11/2021	
32112U-BW-0	First Natl Bk McGregor TEX CD				85,000	85,000	85,000	85,000				0		85,000			0	1,276	.09/30/2021	
	Subtotal - Bonds - Industrial and Misce	ellaneous (Unaff	iliated)		935.000	935,000	935.000	935,000	0	0	0	0	0	935,000	0	0	0	21, 107	XXX	XXX

SCHEDULE D - PART 4

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

								,													
1	2	3	4	5	6	7	8	9	10	Ch	ange In Bo	ook/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current		Foreign					Bond		nation
												Year's	Change in Book/		Book/				Interest/		Modifier
									Prior Year		Current	Other Than		Exchange	Adjusted	Foreign			Stock	Stated	and
											Current			Change in			Dealized				
CLICID					Ni				Book/	Unrealized	Year's	Temporary		Book	Carrying	Exchange		T-4-1 O-:	Dividends	Con-	SVO
CUSIP		_	.		Number of				Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-		Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
8399997. Tota	l - Bonds - Part 4					1,726,384	1,726,384	1,805,112	1,734,653	0	0	0	0	0	1,726,384	0	0	0	59,058	XXX	XXX
8399998. Tota	l - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999. Tota	l - Bonds					1,726,384	1,726,384	1,805,112	1,734,653	0	0	0	0	0	1,726,384	0	0	0	59,058	XXX	XXX
8999997. Tota	l - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
8999998. Tota	l - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. Tota	I - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799997. Tota	ll - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799998. Tota	l - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999. Tota	I - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9899999. Tota	I - Preferred and Common Stock	ks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9999999 - Tot	als					1,726,384	XXX	1,805,112	1.734.653	0	0	0	0	0	1,726,384	0	0	0	59.058	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By **NONE**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees **N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH

Month	Fnd	Depository	Ralances
IVIOLITI	LIIU	Depository	Daianices

		1 -		End Depository					9
1		2 3		4	5 Amount of	Book Balance at End of Each Month			
<u> </u>				Amount of			Ouring Current Quarter 8		\dashv \mid
				Interest Received		U	,	0	
			Rate of	During Current	at Current				
Depos	sitory	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
FEDERAL HOME LOAN BANK DDA	DALLAS, TEXAS		1.010	104		1,614,320	1,673,125	1,734,360	XXX.
HILLTOP CUSTODIAN ACCOUNT	WACO, TEXAS		0.010	62		1,971,122	2,955,924	3, 190, 145	xxx.
CENTRAL NATIONAL BANK									
OPERATING	WACO, TEXAS		1.000	8,896		4,042,629	5,098,745	4,826,141	xxx
ALERUS FINANCIAL NA				600		248,554	248,554	248,554	xxx
ALTABANK				600		248,554		248,554	XXX
BOKF. NATIONAL ASSOCIATION				600		248,554		248,554	XXX
BANC OF CALIFORNIA				600		248,554	248,554	248,554	XXX
BANK OZK				600		248,554	248,554	248,554	XXX
BANK OF CHINA				600		248,554	248.554	248,554	XXX
BANK OF SPRINGFIELD				600		248,554	248,554	248,554	XXX
BELL BANK				600		248,554	248,554	248,554	XXX
BOSTON PRIVATE BANK & TRUST	TAILOO, ND		1.000			240,334	270,007	240,334	
COMPANY	ROSTON MA		1.000	600		248,554	248,554	248,554	xxx
BREMER BANK, NATIONAL	Booton, mix		1.000						
ASSOCIATION	COLITH CT DALII MNI		11.000	600		248.554	248.554	248,554	xxx
CARROLLTON BANK				600		′			XXX
CENTENNIAL BANK				600		248,554	248,554 248.554	248,554	
	CUNWAT, An		1.000			240,334	240,004	240,334	XXX.
CITIZENS BANK NATIONAL	PROVIDENCE DI		4 000	000		040 554	040 554	040 554	
ASSOCIATION	THUVIDENUE, KI	·	1.000	600		248,554	248,554	248,554	XXX.
CITY NATIONAL BANK OF FLORIDA	MIAMI, FL	1	1.000	600		040 554	040 554	040 554	,,,,,,
	MIAMI, FL		11.000	600		248,554	248,554	248,554	XXX
COMMUNITY BANK OF THE	WALDODE 120	1	, , , , , ,			0.42 == :	040	0/0 ==:	1
CHESAPEAKE	WALDORF, MD		1.000	600		248,554	248,554	248,554	XXX.
CONGRESSIONAL BANK	CHEVY CHASE, MD	·	1.000	600		248,554		248,554	XXX
CONNECTONE BANK				600		248,554		248,554	XXX
CORE BANK	OMAHA, NE		11	600		248,554	248,554	248,554	XXX.
CROSS RIVER BANK				600		248,554	248,554	248,554	XXX.
EAST BOSTON SAVINGS BANK	PEABODY, MA		1.000	600		248,554	248,554	248,554	XXX.
EAST WEST BANK	NEW YORK CITY, NY		1.000	600		248,517	248,517	248,517	XXX.
EMIGRANT BANK	NEW YORK CITY, NY		1.000	600		248,554	248,554	248,554	.XXX
EQUITY BANK	ANDOVER, KS		1.000	600		248,554	248,554	248,554	XXX
FARMERS-MERCHANTS BANK OF									
ILLINIOS	JOY, IL		1.000	600		248,550	248,550	248,550	XXX
FIRST BANK	CREVE COEUR, MO		1.000	600		248,554	248,554	248,554	xxx
FIRST INTERNATIONAL BANK &	•					,	,	,	
TRUST	WATFORD CITY. ND		1000	600		248,554	248,554	248,554	XXX
FIRST REPUBLIC BANK				225		68,230	68.230	68,230	XXX
FIRST WESTERN TRUST BANK				600		248,554	248,554	248,554	XXX
FLUSHING BANK				600		248,554	248,554	248,554	XXX
IBERIABANK FIRST HORZON				600		248.554	248.554	248,554	XXX
INB	SPRINGFIELD, IL		1.000	600		,	/	248,554	XXX
INDEPENDENT BANK				600		248.554	248,554	248,554	XXX
INDEPENDENT BANK			11.000	600		248,554	248,554	248,554	
	SHORT HILLS, NJ		1.000	600		,			XXX
INVESTORS BANK	SHURI HILLS, NJ		1.000			248,554	248,554	248,554	XXX.
	NEW YORK CLTY NY		1.000	600		040 554	040 554	040 EE4	2004
YORK						248,554	248,554	248,554	XXX
MERITAN BANK				600		248,554	248,554	248,554	XXX.
MIDFIRST BANK				600		248,554	248,554	248,554	XXX
MORTON COMMUNITY BANK				600		248,554	248,554	248,554	XXX
PACIFIC WESTERN BANK				600		248,554	248,554	248,554	XXX.
PINNACLE BANK	UMAHA, NE	·		600		248,554	248,554	248,554	XXX
PLAINSCAPITAL BANK			1.000	600		248,554	248,554	248,554	XXX
REGENT BANK				600		248,554	248,554	248,554	XXX
RIVER CITY BANK			1.000	600		248,554	248,554	248,554	XXX
SEACOAST NATIONAL BANK				600		248,554	248,554	248,554	XXX
SOUTH STATE BANK NA	WINTER HAVEN, FL			600		248,554	248,554	248,554	XXX
SOUTHEAST BANK	FARRAGUT, TN		1.000	600		248,554	248,554	248,554	XXX
STATE BANK OF INDIA	NEW YORK CITY, NY			600		248,554	248,554	248,554	XXX
STIFEL BANK			1.000	600		248,554	248,554	248,554	XXX.
THE CAMDEN NATIONAL BANK				600		248,554	248,554	248,554	XXX.
TRADITIONAL BANK, INC				600		248,554	248,554	248,554	XXX
TRISTATE CAPTIAL BANK				600		248,554	248,554	248,554	XXX
TRUIST BANK			1.000	600		248,554	248,554	248,554	XXX.
TWO RIVERS BANK & TRUST	BURLINGTON, IA			600		248,554	248,554	248,554	XXX
UNION BANK	MORRISVILLE, VT			600		248,480	248,480	248,480	XXX
UNITED BANK			1.000	600		248,554	248,554	248,554	XXX
VALLEY NATIONAL BANK	WAYNE, NJ		1.000	600		248,554	248,554	248,554	XXX
	HENDERSON, TX		1.000	600		248,554	248,554	248,554	XXX
WESBANCO BANK, INC.				600		248,554	248,554	248,554	XXX
WESTERN ALLIANCE BANK				600		248,554	248,554	248,554	XXX
NBT BANK NATIONAL ASSOCIATION	,		T						
Dilli latti orale nooco in i lon	NORWICH, NY	1	1.000	600		248,554	248,554	248,554	xxx
NEW YORK COMMUNITY BANK	WESTRIBY NV			600		248,537	248,537	248,537	
RELIANT BANK	RRENTWOOD TN			600		248,554	248,557		XXX
								248,554	XXX
SECURITY FIRST BANK				600		248,554	248,554	248,554	XXX
SIGNATURE BANK	NEW YUHK, NY			600		248,376	248,376	248,376	XXX.
SILICON VALLEY BANK			1.000	600		248,554	248,554	248,554	XXX
TEXAS PARTNERS BANK	SAN ANTINIO, IX		1.000	600		248,554	248,554	248,554	XXX
THE HUNTINGTON NATIONAL BANK	OOLUMBUS ST	1						.=	1
	COLUMBUS. OH		1.000	102		0	0	15, 167	.XXX

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1		3	4	5	Book Balance at End of Each Month During Current Quarter			
		Rate of	Amount of Interest Received During Current	Amount of Interest Accrued at Current	6	7	8	
Depository		Interest		Statement Date	First Month	Second Month	Third Month	*
0199998. Deposits in depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	xxx						XXX
0199999. Totals - Open Depositories		XXX	48,389	0	23,852,001	25,951,724	25,989,743	XXX
0299998. Deposits in depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit		XXX	48,389	0	23,852,001	25,951,724	25,989,743	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999. Total - Cash		XXX	48,389	0	23,852,001	25,951,724	25,989,743	XXX

9999999 - Total Cash Equivalents

STATEMENT AS OF SEPTEMBER 30, 2021 OF THE Insurors Indemnity Company

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter									
1	2	3	4	5	6	7 Book/Adjusted Carrying Value	8 Amount of Interest	9 Amount Received	
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year	
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