

# **ANNUAL STATEMENT**

**OF THE**

**Insurors Indemnity Select Insurance Company**

**TO THE**

**Insurance Department**

**OF THE**

**STATE OF**

**Texas**

**FOR THE YEAR ENDED  
DECEMBER 31, 2021**

**PROPERTY AND CASUALTY**

# **2021**



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021  
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 254-754-1375  
(E-mail Address) (FAX Number)

#### OFFICERS

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

#### OTHER

#### DIRECTORS OR TRUSTEES

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

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

25th day of February, 2022

Sherril Carnes

a. Is this an original filing? .....

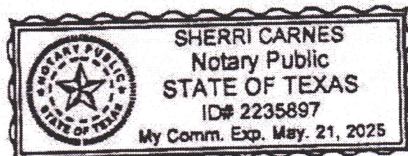
Yes [ X ] No [ ]

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) .....	1,977,240		1,977,240	1,985,052
2. Stocks (Schedule D):				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	32,741,378		32,741,378	0
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 (\$ .....1,021,405, Schedule E - Part 1), cash equivalents (\$ .....0, Schedule E - Part 2) and short-term investments (\$ ..... , Schedule DA) .....	1,021,405		1,021,405	717,668
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) .....	35,740,023	0	35,740,023	2,702,720
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	12,338		12,338	11,539
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	293,037		293,037	0
15.2 Deferred premiums and 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 .....	6,059		6,059	0
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	0
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) .....	36,051,457	0	36,051,457	2,714,259
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	36,051,457	0	36,051,457	2,714,259
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 thru 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 thru 2503 plus 2598)(Line 25 above) .....	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

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 .....		0
5. Other expenses (excluding taxes, licenses and fees) .....		
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	(8,488)	0
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses)) .....	70,613	3,633
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 \$ .....0 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) .....		0
10. Advance premium .....	18,891	0
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	257,557	9,126
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 .....	6,569	0
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) .....	345,142	12,759
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	345,142	12,759
29. Aggregate write-ins for special surplus funds .....	0	0
30. Common capital stock .....	2,500,000	
31. Preferred capital stock .....		
32. Aggregate write-ins for other than special surplus funds .....	0	2,500,000
33. Surplus notes .....	0	0
34. Gross paid in and contributed surplus .....	27,238,625	0
35. Unassigned funds (surplus) .....	5,967,690	201,500
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) .....	35,706,315	2,701,500
38. TOTALS (Page 2, Line 28, Col. 3) .....	36,051,457	2,714,259
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 thru 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 thru 2903 plus 2998)(Line 29 above) .....	0	0
3201. Guaranty Fund .....	0	2,500,000
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above) .....	0	2,500,000



STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4)		0
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)	(270,562)	57,555
5. Aggregate write-ins for underwriting deductions	0	0
6. Total underwriting deductions (Lines 2 through 5)	(270,562)	57,555
7. Net income of protected cells		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7)	270,562	(57,555)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	62,186	15,047
10. Net realized capital gains or (losses) less capital gains tax of \$ (Exhibit of Capital Gains (Losses) )		
11. Net investment gain (loss) (Lines 9 + 10)	62,186	15,047
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ )	0	(349)
13. Finance and service charges not included in premiums	3,512	51,734
14. Aggregate write-ins for miscellaneous income	0	0
15. Total other income (Lines 12 through 14)	3,512	51,385
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	336,260	8,877
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)	336,260	8,877
19. Federal and foreign income taxes incurred	70,613	1,426
20. Net income (Line 18 minus Line 19)(to Line 22)	265,647	7,451
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	2,701,500	2,694,186
22. Net income (from Line 20)	265,647	7,451
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$	5,500,543	(137)
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)		0
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)	2,500,000	
32.3 Transferred to surplus		
33. Surplus adjustments:		
33.1 Paid in	27,238,625	(250,000)
33.2 Transferred to capital (Stock Dividend)	(2,500,000)	(250,000)
33.3 Transferred from capital		500,000
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	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	33,004,815	7,314
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	35,706,315	2,701,500
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 thru 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 thru 1403 plus 1498)(Line 14 above)	0	0
3701.		
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance .....	(25,715)	110,801
2. Net investment income .....	61,979	14,354
3. Miscellaneous income .....	3,512	51,385
4. Total (Lines 1 through 3) .....	39,776	176,540
5. Benefit and loss related payments .....	6,059	(155,167)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	(262,074)	287,026
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	3,633	5,000
10. Total (Lines 5 through 9) .....	(252,382)	136,859
11. Net cash from operations (Line 4 minus Line 10) .....	292,158	39,681
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	5,010	449,429
12.2 Stocks .....	0	0
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) .....	5,010	449,429
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	0	286,330
13.2 Stocks .....	27,238,625	0
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) .....	27,238,625	286,330
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) .....	(27,233,615)	163,099
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 .....	29,738,625	(250,000)
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) .....	(2,493,431)	205,934
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	27,245,194	(44,066)
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) .....	303,737	158,714
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	717,668	558,954
19.2 End of period (Line 18 plus Line 19.1) .....	1,021,405	717,668

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 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
			2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1.	Fire .....	206,088			206,088		0
2.	Allied lines .....	0					0
3.	Farmowners multiple peril .....	0					0
4.	Homeowners multiple peril .....	1,015,342			1,015,342		0
5.	Commercial multiple peril .....	0					0
6.	Mortgage guaranty .....	0					0
8.	Ocean marine .....	0					0
9.	Inland marine .....	40,149			40,149		0
10.	Financial guaranty .....	0					0
11.1	Medical professional liability - occurrence .....						0
11.2	Medical professional liability - claims-made .....						0
12.	Earthquake .....	0					0
13.	Group accident and health .....	0					0
14.	Credit accident and health (group and individual) .....	0					0
15.	Other accident and health .....	0					0
16.	Workers' compensation .....	0					0
17.1	Other liability - occurrence .....	0					0
17.2	Other liability - claims-made .....	0					0
17.3	Excess workers' compensation .....	0					0
18.1	Products liability - occurrence .....						0
18.2	Products liability - claims-made .....						0
19.1, 19.2	Private passenger auto liability .....	0					0
19.3, 19.4	Commercial auto liability .....	0					0
21.	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	1,261,579	0	0	1,261,579	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
3499.	Totals (Lines 3401 thru 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 [    ]    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 2021 OF THE Insurors Indemnity Select Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

		Losses Paid Less Salvage				5	6	7	8
		1	2	3	4				
Line of Business		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 .....	0			0	0	0	0	0.0
2.	Allied lines .....	0			0	0	0	0	0.0
3.	Farmowners multiple peril .....	0			0	0	0	0	0.0
4.	Homeowners multiple peril .....	16,198		16,198	0	0	0	0	0.0
5.	Commercial multiple peril .....	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.	Inland marine .....	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
11.2	Medical professional liability - claims-made .....				0	0	0	0	0.0
12.	Earthquake .....	0			0	0	0	0	0.0
13.	Group accident and health .....	0			0	0	0	0	0.0
14.	Credit accident and health (group and individual) .....	0			0	0	0	0	0.0
15.	Other accident and 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
18.2	Products liability - claims-made .....				0	0	0	0	0.0
19.1, 19.2	Private passenger auto liability .....	0			0	0	0	0	0.0
19.3, 19.4	Commercial auto liability .....	0			0	0	0	0	0.0
21.	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	16,198	0	16,198	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 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2021 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	10,678		10,678	0	
2. Allied lines .....				0				0	
3. Farmowners multiple peril .....				0				0	
4. Homeowners multiple peril .....				0	16,771		16,771	0	
5. Commercial multiple peril .....				0				0	
6. Mortgage guaranty .....				0				0	
8. Ocean marine .....				0				0	
9. Inland marine .....				0	2,080		2,080	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. Group accident and health .....				0				(a) 0	
14. Credit accident and health (group and individual) .....				0				0	
15. Other accident and health .....				0				(a) 0	
16. Workers' compensation .....				0				0	
17.1 Other liability - occurrence .....				0				0	
17.2 Other liability - claims-made .....				0				0	
17.3 Excess workers' compensation .....				0				0	
18.1 Products liability - occurrence .....				0				0	
18.2 Products liability - claims-made .....				0				0	
19.1, 19.2 Private passenger auto liability .....				0				0	
19.3, 19.4 Commercial auto liability .....				0				0	
21. 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 .....	0	0	0	0	29,529	0	29,529	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 thru 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0

(a) Including \$ ..... for present value of life indemnity claims.

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 .....	51,165			51,165
1.2 Reinsurance assumed .....				0
1.3 Reinsurance ceded .....	51,165			51,165
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 .....		232,022		232,022
2.2 Reinsurance assumed, excluding contingent .....				0
2.3 Reinsurance ceded, excluding contingent .....		483,903		483,903
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	(251,881)	0	(251,881)
3. Allowances to managers and agents .....		379		379
4. Advertising .....				0
5. Boards, bureaus and associations .....				0
6. Surveys and underwriting reports .....				0
7. Audit of assureds' records .....				0
8. Salary and related items:				
8.1 Salaries .....				0
8.2 Payroll taxes .....				0
9. Employee relations and welfare .....				0
10. Insurance .....				0
11. Directors' fees .....				0
12. Travel and travel items .....				0
13. Rent and rent items .....		2,980		2,980
14. Equipment .....				0
15. Cost or depreciation of EDP equipment and software .....				0
16. Printing and stationery .....				0
17. Postage, telephone and telegraph, exchange and express .....				0
18. Legal and auditing .....		12,000		12,000
19. Totals (Lines 3 to 18) .....	0	15,359	0	15,359
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....		(34,040)		(34,040)
20.2 Insurance department licenses and fees .....				0
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	(34,040)	0	(34,040)
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	(270,562)	0	(a) (270,562)
26. Less unpaid expenses - current year .....	0			0
27. Add unpaid expenses - prior year .....	0	0	0	0
28. Amounts receivable relating to uninsured plans, prior year .....	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year .....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	0	(270,562)	0	(270,562)
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 thru 2403 plus 2498)(Line 24 above)	0	0	0	0

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

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds .....	(a) .....	.....
1.1	Bonds exempt from U.S. tax .....	(a) .....	.....
1.2	Other bonds (unaffiliated) .....	(a) .....62,090	.....62,090
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) .....96	.....96
7	Derivative instruments .....	(f) .....	.....
8.	Other invested assets .....	.....	.....
9.	Aggregate write-ins for investment income .....	.....0	.....0
10.	Total gross investment income .....	.....62,186	.....62,186
11.	Investment expenses .....	.....	(g) .....0
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) .....	.....	.....0
17.	Net investment income (Line 10 minus Line 16) .....	.....	.....62,186
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 thru 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 thru 1503 plus 1598) (Line 15, above) .....	.....	.....0

- (a) Includes \$ .....0 accrual of discount less \$ .....592 amortization of premium and less \$ .....0 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	.....	.....
1.2	Other bonds (unaffiliated) .....	.....0	.....0	.....0	.....(2,210)	.....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	.....5,502,753	.....0
3.	Mortgage loans .....	.....	.....0	.....0	.....0	.....0
4.	Real estate .....	.....	.....0	.....0	.....	.....0
5.	Contract loans .....	.....	.....	.....0	.....	.....
6.	Cash, cash equivalents and short-term investments .....	.....	.....	.....0	.....	.....
7.	Derivative instruments .....	.....	.....	.....0	.....	.....
8.	Other invested assets .....	.....	.....0	.....0	.....0	.....0
9.	Aggregate write-ins for capital gains (losses) .....	.....0	.....0	.....0	.....0	.....0
10.	Total capital gains (losses) .....	.....0	.....0	.....0	.....5,500,543	.....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 thru 0903 plus 0998) (Line 9, above) .....	.....0	.....0	.....0	.....0	.....0



Exhibit 1 - Analysis of Non-Admitted Assets and Related Items

**N O N E**

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices  
NO SIGNIFICANT CHANGES

	SSAP #	F/S Page	F/S Line #	2021		2020	
NET INCOME							
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$	265,647	\$	7,451
(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	\$	265,647	\$	7,451
SURPLUS							
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$	35,706,315	\$	2,701,500
(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	\$	35,706,315	\$	2,701,500

B. Use of Estimates in the Preparation of the Financial Statements  
NO SIGNIFICANT CHANGES

C. Accounting Policy  
NO SIGNIFICANT CHANGES

D. Going Concern  
NONE

NOTE 2 Accounting Changes and Corrections of Errors

There are no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

NOTE 3 Business Combinations and Goodwill

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
Total	XXX	\$ -	\$ -	\$ -

1	6	7	8	9
Purchased Entity	Admitted Goodwill as of the Reporting Date	Amount of Goodwill Amortized During the Reporting Period	Book Value of SCA	Admitted Goodwill as a % of SCA BACV, Gross of Admitted Goodwill Col. 6/Col. 8
Total	\$ -	\$ -	\$ -	XXX

B. Statutory Merger  
N/A

C. Impairment Loss  
N/A

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

(1) Capital & Surplus  
Less:  
    (2) Admitted Positive Goodwill  
    (3) Admitted EDP Equipment & Operating System Software  
    (4) Admitted Net Deferred Taxes  
  
(5) Adjusted Capital and Surplus (Line 1-2-3-4)  
(6) Limitation on amount of goodwill (adjusted capital and surplus times 10% goodwill limitation [Line 5\*10%])  
(7) Current period reported Admitted Goodwill  
(8) Current Period Admitted Goodwill as a % of prior period Adjusted Capital and Surplus (Line 7/Line 5)

Calculation of Limitation Using Prior Quarter Numbers	Current Reporting Period
	XXX
	XXX
	XXX
	XXX
\$ -	XXX
\$ -	XXX
XXX	
XXX	0.0%

NOTE 4 Discontinued Operations

NOTES TO FINANCIAL STATEMENTS

- A. Discontinued Operation Disposed of or Classified as Held for Sale
- (1) List of Discontinued Operations Disposed of or Classified as Held for Sale

Discontinued Operation Identifier	Description of Discontinued Operation
---	---------------------------------------

(2) N/A

(3) Loss Recognized on Discontinued Operations

Discontinued Operation Identifier	Amount for Reporting Period	Cumulative Amount Since Classified as Held for Sale
---	--------------------------------	--

- (4) Carrying Amount and Fair Value of Discontinued Operations and the Effect on Assets, Liabilities, Surplus and Income
- a. Carrying Amount of Discontinued Operations

Discontinued Operation Identifier	Carrying Amount Immediately Prior to Classification as Held for Sale	Current Fair Value Less Costs to Sell
---	---	---

b. Effect of Discontinued Operations on Assets, Liabilities, Surplus and Income

	Discontinued Operation Identifier	Line Number	Line Description	Amount Attributable to Discontinued Operations
1. Assets				
2. Liabilities				
3. Surplus				
4. Income				

- B. Change in Plan of Sale of Discontinued Operation  
N/A
- C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal  
N/A
- D. Equity Interest Retained in the Discontinued Operation After Disposal  
N/A

NOTE 5 Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
- (1) Company input
- (2) Company input

(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total

	Current Year	Prior Year
--	--------------	------------

(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Recorded Investment (All)							
(a) Current							\$ -
(b) 30 - 59 Days Past Due							\$ -
(c) 60 - 89 Days Past Due							\$ -
(d) 90 - 179 Days Past Due							\$ -
(e) 180+ Days Past Due							\$ -
2. Accruing Interest 90 - 179 Days Past Due							
(a) Recorded Investment							\$ -
(b) Interest Accrued							\$ -
3. Accruing Interest 180+ Days Past Due							
(a) Recorded Investment							\$ -
(b) Interest Accrued							\$ -
4. Interest Reduced							
(a) Recorded Investment							\$ -
(b) Number of Loans							\$ -
(c) Percent Reduced							

NOTES TO FINANCIAL STATEMENTS

5. Participant or Co-lender in a Mortgage Loan Agreement								
(a) Recorded Investment								\$ -
b. Prior Year								
1. Recorded Investment (All)								
(a) Current	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) 30 - 59 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) 60 - 89 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(d) 90 - 179 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(e) 180+ Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Accruing Interest 90 - 179 Days Past Due								
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Interest Accrued	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Accruing Interest 180+ Days Past Due								
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Interest Accrued	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Interest Reduced								
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Number of Loans	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) Percent Reduced								
5. Participant or Co-lender in a Mortgage Loan Agreement								
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan Agreement:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. With Allowance for Credit Losses							\$ -
2. No Allowance for Credit Losses							\$ -
3. Total (1 + 2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan							\$ -
b. Prior Year							
1. With Allowance for Credit Losses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. No Allowance for Credit Losses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Total (1 + 2)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Average Recorded Investment							\$ -
2. Interest Income Recognized							\$ -
3. Recorded Investments on Nonaccrual Status							\$ -
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							\$ -
b. Prior Year							
1. Average Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Interest Income Recognized	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Recorded Investments on Nonaccrual Status	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(7) Allowance for credit losses:

	Current Year	Prior Year
a) Balance at beginning of period	\$ -	
b) Additions charged to operations		
c) Direct write-downs charged against the allowances		
d) Recoveries of amounts previously charged off		
e) Balance at end of period	\$ -	\$ -

(8) Mortgage Loans Derecognized as a Result of Foreclosure:

	Current Year
a) Aggregate amount of mortgage loans derecognized	
b) Real estate collateral recognized	
c) Other collateral recognized	
d) Receivables recognized from a government guarantee of the foreclosed mortgage loan	

(9) Company input

B. Debt Restructuring

	Current Year	Prior Year
(1) The total recorded investment in restructured loans, as of year end		
(2) The realized capital losses related to these loans		
(3) Total contractual commitments to extend credit to debtors owning receivables whose terms have been modified in troubled debt restructurings		



NOTES TO FINANCIAL STATEMENTS

(4) Company input

- C. Reverse Mortgages
- (1) Company input

(2) Company input

(3) Reverse Mortgages: Enter the reserve amount that is netted against the asset

(4) Reverse Mortgages: Investment income or (loss) recognized in the period as a result of the re-estimated cash flows
- D. Loan-Backed Securities
- (1) Company input

1 Amortized Cost Basis Before Other-than- Temporary Impairment	2 Other-than- Temporary Impairment Recognized in Loss	3  Fair Value 1 - 2
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
		\$ -
		\$ -
\$ -	\$ -	\$ -
		\$ -
		\$ -
\$ -	\$ -	\$ -
		\$ -
		\$ -
\$ -	\$ -	\$ -
	\$ -	

- (2) OTTI recognized 1st Quarter
- a. Intent to sell

b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

c. Total 1st Quarter
- OTTI recognized 2nd Quarter
- d. Intent to sell

e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

f. Total 2nd Quarter
- OTTI recognized 3rd Quarter
- g. Intent to sell

h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

i. Total 3rd Quarter
- OTTI recognized 4th Quarter
- j. Intent to sell

k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

l. Total 4th Quarter
- m. Annual Aggregate Total

(3)

1	2	3	4	5	6	7
CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-Than- Temporary Impairment	Amortized Cost After Other-Than- Temporary Impairment	Fair Value at time of OTTI	Date of Financial Statement Where Reported
Total	XXX	XXX	\$ -	XXX	XXX	XXX

- (4)
- a) The aggregate amount of unrealized losses:

1. Less than 12 Months

2. 12 Months or Longer

b)The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months

2. 12 Months or Longer

(5) Company input

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
- (1) Company input

(2) Company input

(3) Collateral Received

a. Aggregate Amount Collateral Received

	Fair Value
1. Securities Lending	
(a) Open	
(b) 30 Days or Less	
(c) 31 to 60 Days	
(d) 61 to 90 Days	
(e) Greater Than 90 Days	
(f) Subtotal	\$ -
(g) Securities Received	
(h) Total Collateral Received	\$ -
2. Dollar Repurchase Agreement	
(a) Open	
(b) 30 Days or Less	
(c) 31 to 60 Days	
(d) 61 to 90 Days	
(e) Greater Than 90 Days	
(f) Subtotal	\$ -
(g) Securities Received	
(h) Total Collateral Received	\$ -
b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged	
c. Company input	

NOTES TO FINANCIAL STATEMENTS

(4) Company input

(5) Collateral Reinvestment  
a. Aggregate Amount Collateral Reinvested

	Amortized Cost	Fair Value
1. Securities Lending		
(a) Open		
(b) 30 Days or Less		
(c) 31 to 60 Days		
(d) 61 to 90 Days		
(e) 91 to 120 Days		
(f) 121 to 180 Days		
(g) 181 to 365 Days		
(h) 1 to 2 years		
(i) 2 to 3 years		
(j) Greater than 3 years		
(k) Subtotal	\$ -	\$ -
(l) Securities Received		
(m) Total Collateral Reinvested	\$ -	\$ -
2. Dollar Repurchase Agreement		
(a) Open		
(b) 30 Days or Less		
(c) 31 to 60 Days		
(d) 61 to 90 Days		
(e) 91 to 120 Days		
(f) 121 to 180 Days		
(g) 181 to 365 Days		
(h) 1 to 2 years		
(i) 2 to 3 years		
(j) Greater than 3 years		
(k) Subtotal	\$ -	\$ -
(l) Securities Received		
(m) Total Collateral Reinvested	\$ -	\$ -

b. Company input

(6) Company input

(7) Collateral for securities lending transactions that extend beyond one year from the reporting date.

Description of Collateral	Amount
Total Collateral Extending beyond one year of the reporting date	\$ -

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) Company input

REPURCHASE TRANSACTION – CASH TAKER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

(2) Type of Repo Trades Used

a. Bilateral (YES/NO)  
b. Tri-Party (YES/NO)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(3) Original (Flow) & Residual Maturity

a. Maximum Amount  
1. Open – No Maturity  
2. Overnight  
3. 2 Days to 1 Week  
4. > 1 Week to 1 Month  
5. > 1 Month to 3 Months  
6. > 3 Months to 1 Year  
7. > 1 Year

b. Ending Balance  
1. Open – No Maturity  
2. Overnight  
3. 2 Days to 1 Week  
4. > 1 Week to 1 Month  
5. > 1 Month to 3 Months  
6. > 3 Months to 1 Year  
7. > 1 Year

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(4) Company input

(5) Securities "Sold" Under Repo – Secured Borrowing

a. Maximum Amount  
1. BACV  
2. Nonadmitted - Subset of BACV  
3. Fair Value  
  
b. Ending Balance  
1. BACV  
2. Nonadmitted - Subset of BACV  
3. Fair Value

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
XXX XXX	XXX XXX	XXX XXX	
XXX XXX	XXX XXX	XXX XXX	

## NOTES TO FINANCIAL STATEMENTS

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation

**ENDING BALANCE**

- a. Bonds - BACV
- b. Bonds - FV
- c. LB & SS - BACV
- d. LB & SS - FV
- e. Preferred Stock - BACV
- f. Preferred Stock - FV
- g. Common Stock
- h. Mortgage Loans - BACV
- i. Mortgage Loans - FV
- j. Real Estate - BACV
- k. Real Estate - FV
- l. Derivatives - BACV
- m. Derivatives - FV
- n. Other Invested Assets - BACV
- o. Other Invested Assets - FV
- p. Total Assets - BACV
- q. Total Assets - FV

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3

**ENDING BALANCE**

- a. Bonds - BACV
- b. Bonds - FV
- c. LB & SS - BACV
- d. LB & SS - FV
- e. Preferred Stock - BACV
- f. Preferred Stock - FV
- g. Common Stock
- h. Mortgage Loans - BACV
- i. Mortgage Loans - FV
- j. Real Estate - BACV
- k. Real Estate - FV
- l. Derivatives - BACV
- m. Derivatives - FV
- n. Other Invested Assets - BACV
- o. Other Invested Assets - FV
- p. Total Assets - BACV
- q. Total Assets - FV

5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NON- ADMITTED
\$ -	\$ -	\$ -	\$ -
\$ -	\$ -	\$ -	\$ -

### (7) Collateral Received – Secured Borrowing

- a. Maximum Amount
  1. Cash
  2. Securities (FV)
- b. Ending Balance
  1. Cash
  2. Securities (FV)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(8) Cash & Non-Cash Collateral Received – Secured Borrowing by NAIC Designation

**ENDING BALANCE**

- a. Cash
- b. Bonds - FV
- c. LB & SS - FV
- d. Preferred Stock - FV
- e. Common Stock
- f. Mortgage Loans - FV
- g. Real Estate - FV
- h. Derivatives - FV
- i. Other Invested Assets - FV
- j. Total Collateral Assets - FV (Sum of a through i)

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
\$ -	\$ -	\$ -	\$ -

**ENDING BALANCE**

- a. Cash
- b. Bonds - FV
- c. LB & SS - FV
- d. Preferred Stock - FV
- e. Common Stock
- f. Mortgage Loans - FV
- g. Real Estate - FV
- h. Derivatives - FV
- i. Other Invested Assets - FV
- j. Total Collateral Assets - FV (Sum of a through i)

5	6	7	8
NAIC 4	NAIC 5	NAIC 6	DOES NOT QUALIFY AS ADMITTED
\$ -	\$ -	\$ -	\$ -

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

a. Overnight and Continuous

FAIR VALUE

NOTES TO FINANCIAL STATEMENTS

b. 30 Days or Less	
c. 31 to 90 Days	
d. > 90 Days	

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

	AMORTIZED COST	FAIR VALUE
a. 30 Days or Less		
b. 31 to 60 Days		
c. 61 to 90 Days		
d. 91 to 120 Days		
e. 121 to 180 Days		
f. 181 to 365 Days		
g. 1 to 2 years		
h. 2 to 3 years		
i. > than 3 years		

(11) Liability to Return Collateral – Secured Borrowing (Total)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash (Collateral – All)				
2. Securities Collateral (FV)				
b. Ending Balance				
1. Cash (Collateral – All)				
2. Securities Collateral (FV)				

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) Company input

REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)				
b. Tri-Party (YES/NO)				

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open – No Maturity				
2. Overnight				
3. 2 Days to 1 Week				
4. > 1 Week to 1 Month				
5. > 1 Month to 3 Months				
6. > 3 Months to 1 Year				
7. > 1 Year				
b. Ending Balance				
1. Open – No Maturity				
2. Overnight				
3. 2 Days to 1 Week				
4. > 1 Week to 1 Month				
5. > 1 Month to 3 Months				
6. > 3 Months to 1 Year				
7. > 1 Year				

(4) Company input

(5) Fair Value of Securities Acquired Under Repo – Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
b. Ending Balance				

(6) Securities Acquired Under Repo – Secured Borrowing by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. Bonds - FV				
b. LB & SS - FV				
c. Preferred Stock - FV				
d. Common Stock				
e. Mortgage Loans - FV				
f. Real Estate - FV				
g. Derivatives - FV				
h. Other Invested Assets - FV				
i. Total Assets - FV (Sum of a through h)				
	\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

	5	6	7	8 DOES NOT QUALIFY AS ADMITTED
	NAIC 4	NAIC 5	NAIC 6	
a. Bonds - FV				



NOTES TO FINANCIAL STATEMENTS

- b. LB & SS - FV
- c. Preferred Stock - FV
- d. Common Stock
- e. Mortgage Loans - FV
- f. Real Estate - FV
- g. Derivatives - FV
- h. Other Invested Assets - FV
- i. Total Assets - FV (Sum of a through h)

\$ -	\$ -	\$ -	\$ -

(7) Collateral Provided – Secured Borrowing

- a. Maximum Amount
  - 1. Cash
  - 2. Securities (FV)
  - 3. Securities (BACV)
  - 4. Nonadmitted Subset (BACV)
- b. Ending Balance
  - 1. Cash
  - 2. Securities (FV)
  - 3. Securities (BACV)
  - 4. Nonadmitted Subset (BACV)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
XXX XXX	XXX XXX	XXX XXX	XXX XXX

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

- a. Overnight and Continuous
- b. 30 Days or Less
- c. 31 to 90 Days
- d. > 90 Days

AMORTIZED COST	FAIR VALUE

(9) Recognized Receivable for Return of Collateral – Secured Borrowing

- a. Maximum Amount
  - 1. Cash
  - 2. Securities (FV)
- b. Ending Balance
  - 1. Cash
  - 2. Securities (FV)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(10) Recognized Liability to Return Collateral – Secured Borrowing (Total)

- a. Maximum Amount
  - 1. Repo Securities Sold/Acquired with Cash Collateral
  - 2. Repo Securities Sold/Acquired with Securities Collateral (FV)
- b. Ending Balance
  - 1. Repo Securities Sold/Acquired with Cash Collateral
  - 2. Repo Securities Sold/Acquired with Securities Collateral (FV)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

H. Repurchase Agreements Transactions Accounted for as a Sale  
(1) Company input

REPURCHASE TRANSACTION – CASH TAKER – OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
  - 1. Open – No Maturity
  - 2. Overnight
  - 3. 2 Days to 1 Week
  - 4. > 1 Week to 1 Month
  - 5. > 1 Month to 3 Months
  - 6. > 3 Months to 1 Year
  - 7. > 1 Year
- b. Ending Balance
  - 1. Open – No Maturity
  - 2. Overnight
  - 3. 2 Days to 1 Week
  - 4. > 1 Week to 1 Month
  - 5. > 1 Month to 3 Months
  - 6. > 3 Months to 1 Year
  - 7. > 1 Year

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(4) Company input

(5) Securities "Sold" Under Repo – Sale

NOTES TO FINANCIAL STATEMENTS

- a. Maximum Amount
1. BACV
2. Nonadmitted - Subset of BACV
3. Fair Value
- b. Ending Balance
1. BACV
2. Nonadmitted - Subset of BACV
3. Fair Value

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
XXX XXX	XXX XXX	XXX XXX	
XXX XXX	XXX XXX	XXX XXX	

(6) Securities Sold Under Repo – Sale by NAIC Designation

ENDING BALANCE

- a. Bonds - BACV
- b. Bonds - FV
- c. LB & SS - BACV
- d. LB & SS - FV
- e. Preferred Stock - BACV
- f. Preferred Stock - FV
- g. Common Stock
- h. Mortgage Loans - BACV
- i. Mortgage Loans - FV
- j. Real Estate - BACV
- k. Real Estate - FV
- l. Derivatives - BACV
- m. Derivatives - FV
- n. Other Invested Assets - BACV
- o. Other Invested Assets - FV
- p. Total Assets - BACV
- q. Total Assets - FV

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
\$ -	\$ -	\$ -	\$ -
\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

- a. Bonds - BACV
- b. Bonds - FV
- c. LB & SS - BACV
- d. LB & SS - FV
- e. Preferred Stock - BACV
- f. Preferred Stock - FV
- g. Common Stock
- h. Mortgage Loans - BACV
- i. Mortgage Loans - FV
- j. Real Estate - BACV
- k. Real Estate - FV
- l. Derivatives - BACV
- m. Derivatives - FV
- n. Other Invested Assets - BACV
- o. Other Invested Assets - FV
- p. Total Assets - BACV
- q. Total Assets - FV

5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NON- ADMITTED
\$ -	\$ -	\$ -	\$ -
\$ -	\$ -	\$ -	\$ -

(7) Proceeds Received – Sale

- a. Maximum Amount
1. Cash
2. Securities (FV)
3. Nonadmitted
- b. Ending Balance
1. Cash
2. Securities (FV)
3. Nonadmitted

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

(8) Cash & Non-Cash Collateral Received – Sale by NAIC Designation

ENDING BALANCE

- a. Bonds - FV
- b. LB & SS - FV
- c. Preferred Stock - FV
- d. Common Stock
- e. Mortgage Loans - FV
- f. Real Estate - FV
- g. Derivatives - FV
- h. Other Invested Assets - FV
- i. Total Collateral Assets - FV (Sum of a through h)

1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

- a. Bonds - FV
- b. LB & SS - FV
- c. Preferred Stock - FV

5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NON- ADMITTED

NOTES TO FINANCIAL STATEMENTS

d. Common Stock				
e. Mortgage Loans - FV				
f. Real Estate - FV				
g. Derivatives - FV				
h. Other Invested Assets - FV				
i. Total Collateral Assets - FV (Sum of a through h)	\$ -	\$ -	\$ -	\$ -

(9) Recognized Forward Resale Commitment

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
b. Ending Balance				

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

(1) Company input

REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)				
b. Tri-Party (YES/NO)				

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open – No Maturity				
2. Overnight				
3. 2 Days to 1 Week				
4. > 1 Week to 1 Month				
5. > 1 Month to 3 Months				
6. > 3 Months to 1 Year				
7. > 1 Year				
b. Ending Balance				
1. Open – No Maturity				
2. Overnight				
3. 2 Days to 1 Week				
4. > 1 Week to 1 Month				
5. > 1 Month to 3 Months				
6. > 3 Months to 1 Year				
7. > 1 Year				

(4) Company input

(5) Securities Acquired Under Repo – Sale

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. BACV	XXX	XXX	XXX	
2. Nonadmitted - Subset of BACV	XXX	XXX	XXX	
3. Fair Value				
b. Ending Balance				
1. BACV	XXX	XXX	XXX	
2. Nonadmitted - Subset of BACV	XXX	XXX	XXX	
3. Fair Value				

(6) Securities Acquired Under Repo – Sale by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. Bonds - BACV				
b. Bonds - FV				
c. LB & SS - BACV				
d. LB & SS - FV				
e. Preferred Stock - BACV				
f. Preferred Stock - FV				
g. Common Stock				
h. Mortgage Loans - BACV				
i. Mortgage Loans - FV				
j. Real Estate - BACV				
k. Real Estate - FV				
l. Derivatives - BACV				
m. Derivatives - FV				
n. Other Invested Assets - BACV				
o. Other Invested Assets - FV				
p. Total Assets - BACV	\$ -	\$ -	\$ -	\$ -
q. Total Assets - FV	\$ -	\$ -	\$ -	\$ -

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 NON- ADMITTED
a. Bonds - BACV				
b. Bonds - FV				
c. LB & SS - BACV				
d. LB & SS - FV				
e. Preferred Stock - BACV				

NOTES TO FINANCIAL STATEMENTS

f. Preferred Stock - FV  
g. Common Stock  
h. Mortgage Loans - BACV  
i. Mortgage Loans - FV  
j. Real Estate - BACV  
k. Real Estate - FV  
l. Derivatives - BACV  
m. Derivatives - FV  
n. Other Invested Assets - BACV  
o. Other Invested Assets - FV  
p. Total Assets - BACV  
q. Total Assets - FV

\$	-	\$	-	\$	-	\$	-
\$	-	\$	-	\$	-	\$	-

(7) Proceeds Provided - Sale

a. Maximum Amount  
1. Cash  
2. Securities (FV)  
3. Securities (BACV)  
4. Nonadmitted Subset (BACV)  
  
b. Ending Balance  
1. Cash  
2. Securities (FV)  
3. Securities (BACV)  
4. Nonadmitted Subset (BACV)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
XXX XXX	XXX XXX	XXX XXX	XXX XXX

(8) Recognized Forward Resale Commitment

a. Maximum Amount  
b. Ending Balance

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER

- J. Real Estate
- (1) Company input
- (2) Company input
- (3) Company input
- (4) Company input
- (5) Company input

- K. Low Income Housing tax Credits (LIHTC)
- (1) Company input
- (2) Company input
- (3) Company input
- (4) Company input
- (5) Company input
- (6) Company input
- (7) Company input

L. Restricted Assets

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6	7
	1	2	3	4	5		
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)
a. Subject to contractual obligation for which liability is not shown					\$ -	\$ -	\$ -
b. Collateral held under security lending agreements					\$ -	\$ -	\$ -
c. Subject to repurchase agreements					\$ -	\$ -	\$ -
d. Subject to reverse repurchase agreements					\$ -	\$ -	\$ -
e. Subject to dollar repurchase agreements					\$ -	\$ -	\$ -
f. Subject to dollar reverse repurchase agreements					\$ -	\$ -	\$ -
g. Placed under option contracts					\$ -	\$ -	\$ -
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock					\$ -	\$ -	\$ -
i. FHLB capital stock					\$ -	\$ -	\$ -
j. On deposit with states					\$ -	\$ -	\$ -
k. On deposit with other regulatory bodies					\$ -	\$ -	\$ -
l. Pledged collateral to FHLB (including assets backing funding agreements)					\$ -	\$ -	\$ -
m. Pledged as collateral not captured in other categories					\$ -	\$ -	\$ -
n. Other restricted assets					\$ -	\$ -	\$ -
o. Total Restricted Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

(a) Subset of Column 1  
(b) Subset of Column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
			10	11
	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown		\$ -	0.000%	0.000%
b. Collateral held under security lending agreements		\$ -	0.000%	0.000%
c. Subject to repurchase agreements		\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements		\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements		\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase agreements		\$ -	0.000%	0.000%
g. Placed under option contracts		\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		\$ -	0.000%	0.000%
i. FHLB capital stock		\$ -	0.000%	0.000%
j. On deposit with states		\$ -	0.000%	0.000%
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)		\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories		\$ -	0.000%	0.000%
n. Other restricted assets		\$ -	0.000%	0.000%
o. Total Restricted Assets	\$ -	\$ -	0.000%	0.000%

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

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)

	Gross (Admitted & Nonadmitted) Restricted							8	Percentage	
	Current Year					6	7		9	10
	1	2	3	4	5					
Description of Assets	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account (S/A) Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
Total (c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%

(a) Subset of column 1

(b) Subset of column 3

(c) Total Line for Columns 1 through 7 should equal 5L(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)m Columns 9 through 11 respectively.

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

	Gross (Admitted & Nonadmitted) Restricted							8	Percentage	
	Current Year					6	7		9	10
	1	2	3	4	5					
	Description of Assets	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account (S/A) Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Nonadmitted) Restricted to Total Assets
Total (c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.000%	0.000%

(a) Subset of column 1

(b) Subset of column 3

(c) Total Line for Columns 1 through 7 should equal 5L(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)n Columns 9 through 11 respectively.

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

Collateral Assets	1	2	3	4
	Book/Adjusted Carrying Value (BACV)	Fair Value	% of BACV to Total Assets (Admitted and Nonadmitted)*	% of BACV to Total Admitted Assets **
General Account:				
a. Cash, Cash Equivalents and Short-Term Investments			0.000%	0.000%
b. Schedule D, Part 1			0.000%	0.000%
c. Schedule D, Part 2, Section 1			0.000%	0.000%
d. Schedule D, Part 2, Section 2			0.000%	0.000%
e. Schedule B			0.000%	0.000%
f. Schedule A			0.000%	0.000%
g. Schedule BA, Part 1			0.000%	0.000%
h. Schedule DL, Part 1			0.000%	0.000%
i. Other			0.000%	0.000%
j. Total Collateral Assets (a+b+c+d+e+f+g+h+i)	\$ -	\$ -	0.000%	0.000%
Protected Cell:				
k. Cash, Cash Equivalents and Short-Term Investments			0.000%	0.000%
l. Schedule D, Part 1			0.000%	0.000%

NOTES TO FINANCIAL STATEMENTS

m. Schedule D, Part 2, Section 1			0.000%	0.000%
n. Schedule D, Part 2, Section 2			0.000%	0.000%
o. Schedule B			0.000%	0.000%
p. Schedule A			0.000%	0.000%
q. Schedule BA, Part 1			0.000%	0.000%
r. Schedule DL, Part 1			0.000%	0.000%
s. Other			0.000%	0.000%
t. Total Collateral Assets (k+l+m+n+o+p+q+r+s)	\$ -	\$ -	0.000%	0.000%

\* j = Column 1 divided by Asset Page, Line 26 (Column 1)  
t = Column 1 divided by Asset Page, Line 27 (Column 1)  
\*\*j = Column 1 divided by Asset Page, Line 26 (Column 3)  
t = Column 1 divided by Asset Page, Line 27 (Column 3)

	1 Amount	2 % of Liability to Total Liabilities *
k. Recognized Obligation to Return Collateral Asset		0.000%
v. Recognized Obligation to Return Collateral Asset (Protected Cell)		0.000%
* u = Column 1 divided by Liability Page, Line 26 (Column 1)		
v = Column 1 divided by Liability Page, Line 27 (Column 1)		

M. Working Capital Finance Investments

1. Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation:

	Gross Asset CY	Non-admitted Asset CY	Net Admitted Asset CY
a. WCFI Designation 1			\$ -
b. WCFI Designation 2			\$ -
c. WCFI Designation 3			\$ -
d. WCFI Designation 4			\$ -
e. WCFI Designation 5			\$ -
f. WCFI Designation 6			\$ -
g. Total	\$ -	\$ -	\$ -

2. Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs

	Book/Adjusted Carrying Value
a. Up to 180 Days	
b. 181 to 365 Days	
c. Total	\$ -

3. Company input

N. Offsetting and Netting of Assets and Liabilities

	Gross Amount Recognized	Amount Offset*	Net Amount Presented on Financial Statements
(1) Assets			

\* For derivative assets and derivative liabilities, the amount offset shall agree to Schedule DB, Part D, Section 1

	Gross Amount Recognized	Amount Offset*	Net Amount Presented on Financial Statements
(2) Liabilities			

\* For derivative assets and derivative liabilities, the amount offset shall agree to Schedule DB, Part D, Section 1

O. 5GI Securities

Investment	Number of 5GI Securities		Aggregate BACV		Aggregate Fair Value	
	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
(1) Bonds - AC						
(2) Bonds - FV						
(3) LB&SS - AC						
(4) LB&SS - FV						
(5) Preferred Stock - AC						
(6) Preferred Stock - FV						
(7) Total (1+2+3+4+5+6)	0	0	\$ -	\$ -	\$ -	\$ -

AC - Amortized Cost FV - Fair Value

P. Short Sales

(1) Unsettled Short Sale Transactions (Outstanding as of Reporting Date)

	Proceeds Received	Current Fair Value of Securities Sold Short	Unrealized Gain or Loss	Expected Settlement (# of Days)	Fair Value of Short Sales Exceeding (or expected to exceed) 3 Settlement Days	Fair Value of Short Sales Expected to be Settled by Secured Borrowing
a. Bonds						
b. Preferred Stock						
c. Common Stock						
d. Totals (a+b+c)	\$ -	\$ -	\$ -	XXX	\$ -	\$ -

(2) Settled Short Sale Transactions

NOTES TO FINANCIAL STATEMENTS

	Proceeds Received	Current Fair Value of Securities Sold Short	Realized Gain or Loss on Transaction	Fair Value of Short Sales that Exceeded 3 Settlement Days	Fair Value of Short Sales Settled by Secured Borrowing
a. Bonds					
b. Preferred Stock					
c. Common Stock					
d. Totals (a+b+c)	\$ -	\$ -	\$ -	\$ -	\$ -

Q. Prepayment Penalty and Acceleration Fees

General AccountProtected Cell

1. Number of CUSIPs
2. Aggregate Amount of Investment Income

R. Reporting Entity's Share of Cash Pool by Asset Type

	Asset Type	Percent Share
(1)	Cash	
(2)	Cash Equivalents	
(3)	Short-Term Investments	
(4)	Total	

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

A. N/A

B. N/A

NOTE 7 Investment Income

A. Company input

B. Company input

NOTE 8 Derivative Instruments

A. Derivatives under SSAP No. 86—Derivatives

- (1) Company input
- (2) Company input
- (3) Company input
- (4) Company input
- (5) Company input
- (6) Company input
- (7) Company input
- (8)

a.

	Fiscal Year	Derivative Premium Payments Due
1.	2022	
2.	2023	
3.	2024	
4.	2025	
5.	Thereafter	
6.	Total Future Settled Premiums	\$ -

b.

	Undiscounted Future Premium Commitments	Derivative Fair Value With Premium Commitments (Reported on DB)	Derivative Fair Value Excluding Impact of Future Settled Premiums
1.	Prior Year		
2.	Current Year		

B. Derivatives under SSAP No. 108—Derivative Hedging Variable Annuity Guarantees

- (1) Company input
- (2) Recognition of gains/losses and deferred assets and liabilities

a. Scheduled Amortization

Amortization Year	Deferred Assets	Deferred Liabilities
1. 2022		
2. 2023		
3. 2024		
4. 2025		
5. 2026		
6. 2027		
7. 2028		
8. 2029		
9. 2030		
10. 2031		

NOTES TO FINANCIAL STATEMENTS

11. Total	\$	-	\$	-
-----------	----	---	----	---

b. Total Deferred Balance \*  
\* Should agree to Column 19 of Schedule DB, Part E

c. Reconciliation of Amortization:		
1. Prior Year Total Deferred Balance	\$	-
2. Current Year Amortization		
3. Current Year Deferred Recognition		
4. Ending Deferred Balance [1 - (2 + 3)]	\$	-

d. Open Derivative Removed from SSAP No. 108 and Captured in Scope of SSAP No. 86		
1. Total Derivative Fair Value Change		
2. Change in Fair Value Reflected as a Natural Offset to VM21 Liability under SSAP No. 108		
3. Change in Fair Value Reflected as a Deferred Asset / Liability Under SSAP No. 108		
4. Other Changes		
5. Unrealized Gain / Loss Recognized for Derivative Under SSAP No. 86 [1-(sum of 2 through 4)]	\$	-

e. Open Derivative Removed from SSAP No. 86 and Captured in Scope of SSAP No. 108		
1. Total Derivative Fair Value Change		
2. Unrealized Gain / Loss Recognized Prior to the Reclassification to SSAP No. 108		
3. Other Changes		
4. Fair Value Change Available for Application under SSAP No. 108 [1-(2+3)]	\$	-

(3) Hedging Strategies Identified as No Longer Highly Effective  
a. Company input

b. Details of Hedging Strategies Identified as No Longer Highly Effective				
Unique Identifier	Date Domiciliary State Notified	Amortization (# of Years) 5 or Less	Recognized Deferred Assets	Recognized Deferred Liabilities

c. Amortization				
Amortization Year	Recognized Deferred Assets	Recognized Deferred Assets	Accelerated Amortization	Original Amortization
1. 2022				
2. 2023				
3. 2024				
4. 2025				
5. 2026				

6. Total Adjusted Amortization

d. Company input

(4) Hedging Strategies Terminated  
a. Company input

b. Details of Hedging Strategies Terminated				
Unique Identifier	Date Domiciliary State Notified	Amortization (# of Years) 5 or Less	Recognized Deferred Assets	Recognized Deferred Liabilities

c. Amortization				
Amortization Year	Recognized Deferred Assets	Recognized Deferred Assets	Accelerated Amortization	Original Amortization
1. 2022				
2. 2023				
3. 2024				
4. 2025				
5. 2026				

6. Total Adjusted Amortization

d. Company input

NOTE 9 Income Taxes

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:

1.	As of End of Current Period			12/31/2020			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 1 + 2) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(a) Gross Deferred Tax Assets			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Statutory Valuation Allowance Adjustment			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(d) Deferred Tax Assets Nonadmitted			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(f) Deferred Tax Liabilities			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2.	As of End of Current Period			12/31/2020			Change		



NOTES TO FINANCIAL STATEMENTS

	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX		XXX	XXX	\$ -	XXX	XXX	\$ -
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

3.

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- a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.
- b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And  
Threshold Limitation In 2(b)2 Above.

4.

	As of End of Current Period		12/31/2020		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies			0.000%	0.000%	0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies			0.000%	0.000%	0.000%	0.000%

b. Do the Company's tax-planning strategies include the use of reinsurance? Yes [ ] No [ ]

B. Company input

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

1. Current Income Tax

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

2. Deferred Tax Assets:

- (a) Ordinary:
- (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 (including items <5% of total ordinary tax assets)

	(1) As of End of Current Period	(2) 12/31/2020	(3) (Col. 1 - 2) Change
		\$ -	\$ -
		\$ -	\$ -
\$ -		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
\$ 70,613		\$ 1,426	\$ 69,187
\$ 70,613		\$ 1,426	\$ 69,187
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -
		\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

(99) Subtotal	\$	-	\$	-	\$	-
(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 (including items <5% of total ordinary tax assets)			\$	-	\$	-
(99) Subtotal	\$	-	\$	-	\$	-
(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 (including items <5% of total ordinary tax liabilities)			\$	-	\$	-
(99) Subtotal	\$	-	\$	-	\$	-
(b) Capital:						
(1) Investments			\$	-	\$	-
(2) Real estate			\$	-	\$	-
(3) Other (including items <5% of total capital tax liabilities)			\$	-	\$	-
(99) Subtotal	\$	-	\$	-	\$	-
(c) Deferred tax liabilities (3a99 + 3b99)	\$	-	\$	-	\$	-
4. Net deferred tax assets/liabilities (2i - 3c)	\$	-	\$	-	\$	-

D. Company input

E. Company input

F. Company input

G. Company input

H. Repatriation Transition Tax (RTT)  
Company input

I. Alternative Minimum Tax (AMT) Credit  
Company input

	Amount
(1) Gross AMT Credit Recognized as:	
a. Current year recoverable	
b. Deferred tax asset (DTA)	
(2) Beginning Balance of AMT Credit Carryforward	\$ -
(3) Amounts Recovered	
(4) Adjustments	
(5) Ending Balance of AMT Credit Carryforward (5=2-3-4)	\$ -
(6) Reduction for Sequestration	
(7) Nonadmitted by Reporting Entity	
(8) Reporting Entity Ending Balance (8=5-6-7)	\$ -

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

A. Company input

B. Company input

C. Transactions with related party who are not reported on Schedule Y

(1) Detail of Material Related Party Transactions

Ref #	Date of Transaction	Name of Related Party	Nature of Relationship	Type of Transaction	Written Agreement (Yes/No)	Due Date	Reporting Period Date Amount Due From (To)

Options for Type of Transaction:

- Loan
- Exchange of Assets or Liabilities (e.g., buys, sells and secured borrowing transactions)
- Management Services
- Cost-Sharing Agreement
- Other Transactions Involving Services
- Guarantee (e.g., guarantees to related parties, on behalf of, and when beneficiary is related party)
- Other

(2) Detail of Material Related Party Transactions Involving Services

Ref #	Name of Related Party	Overview Description	Amount Charged	Amount Based on Allocation of Costs or Market Rates	Amount Charged Modified or Waived (Yes/No)

NOTES TO FINANCIAL STATEMENTS

Total			\$	-	\$

(3) Detail of Material Related Party Transactions Involving Exchange of Assets and Liabilities

a. Description of Transaction

			Have Terms Changed from Preceding Period? (Yes/No)
Ref #	Name of Related Party	Overview Description	

b. Assets Received

			Statement Value of Assets Received
Ref #	Name of Related Party	Description of Assets Received	
Total			\$ -

c. Assets Transferred

			Statement Value of Assets Transferred
Ref #	Name of Related Party	Description of Assets Transferred	
Total			\$ -

(4) Detail of Amounts Owed To/From a Related Party

		Aggregate Reporting Period Amount Due From	Aggregate Reporting Period (Amount Due To)	Amount Offset in Financial Statement (if qualifying)	Net Amount Recoverable/ (Payable) by Related Party	Admitted Recoverable
Ref #	Name of Related Party					
Total	XXX	\$ -	\$ -	\$ -	\$ -	\$ -

D. Company input

E. Company input

F. Company input

G. Company input

H. Company input

I. Company input

J. Company input

K. Company input

L. Company input

M. All SCA Investments

(1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
SCA Entity				
a. SSAP No. 97 8a Entities				
Total SSAP No. 97 8a Entities	XXX	\$ -	\$ -	\$ -
b. SSAP No. 97 8b(ii) Entities				
Total SSAP No. 97 8b(ii) Entities	XXX	\$ -	\$ -	\$ -
c. SSAP No. 97 8b(iii) Entities				
Total SSAP No. 97 8b(iii) Entities	XXX	\$ -	\$ -	\$ -
d. SSAP No. 97 8b(iv) Entities				
Total SSAP No. 97 8b(iv) Entities	XXX	\$ -	\$ -	\$ -
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	\$ -	\$ -	\$ -
f. Aggregate Total (a+ e)	XXX	\$ -	\$ -	\$ -

(2) NAIC Filing Response Information

NOTES TO FINANCIAL STATEMENTS

SCA Entity (Should be same entities as shown in M(1) above.)	Type of NAIC Filing *	Date of Filing to the NAIC	NAIC Valuation Amount	NAIC Response Received Yes/No	NAIC Disallowed Entities Valuation Method, Resub- mission Required Yes/No	Code **
a. SSAP No. 97 8a Entities						
Total SSAP No. 97 8a Entities	XXX	XXX	\$ -	XXX	XXX	XXX
b. SSAP No. 97 8b(ii) Entities						
Total SSAP No. 97 8b(ii) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
c. SSAP No. 97 8b(iii) Entities						
Total SSAP No. 97 8b(iii) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
d. SSAP No. 97 8b(iv) Entities						
Total SSAP No. 97 8b(iv) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	XXX	\$ -	XXX	XXX	XXX
f. Aggregate Total (a+e)	XXX	XXX	\$ -	XXX	XXX	XXX

\* S1 - Sub-1, S2 - Sub-2 or RDF - Resubmission of Disallowed Filing  
\*\* I - Immaterial or M - Material

N. Investment in Insurance SCAs

(1) Company input

(2) The monetary effect on net income and surplus as a result of using an accounting practice that differed from NAIC Statutory Accounting Practices and Procedures (NAIC SAP), the amount of the investment in the insurance SCA per audited statutory equity and amount of the investment if the insurance SCA had completed statutory financial statements in accordance with the AP&P Manual.

SCA Entity (Investments in Insurance SCA Entities)	Monetary Effect on NAIC SAP		Amount of Investment	
	Net Income Increase (Decrease)	Surplus Increase (Decrease)	Per Audited Statutory Equity	If the Insurance SCA Had Completed Statutory Financial Statements *

\* Per AP&P Manual (without permitted or prescribed practices)

(3) Company input

O. SCA or SSAP 48 Entity Loss Tracking

1	2	3	4	5	6
	Reporting Entity's Share of Net Income (Loss)	Accumulated Share of Net Income (Losses)	Reporting Entity's Share of Equity, Including Negative Equity	Guaranteed Obligation / Commit- ment for Financial Support (Yes/No)	Amount of the Recognized Guarantee Under SSAP No. 5R
Entity					

NOTE 11 Debt

A. Company input

B. FHLB (Federal Home Loan Bank) Agreements

(1) Company input

(2) FHLB Capital Stock

a. Aggregate Totals

	1	2	3
	Total 2+3	General Account	Protected Cell Accounts
1. Current Year			
(a) Membership Stock - Class A	\$ -		
(b) Membership Stock - Class B	\$ -		
(c) Activity Stock	\$ -		
(d) Excess Stock	\$ -		
(e) Aggregate Total (a+b+c+d)	\$ - \$	- \$	-
(f) Actual or estimated Borrowing Capacity as Determined by the Insurer		XXX	XXX
2. Prior Year-end			
(a) Membership Stock - Class A	\$ - \$	- \$	-
(b) Membership Stock - Class B	\$ - \$	- \$	-
(c) Activity Stock	\$ - \$	- \$	-

NOTES TO FINANCIAL STATEMENTS

(d) Excess Stock	\$	-	\$	-	\$	-
(e) Aggregate Total (a+b+c+d)	\$	-	\$	-	\$	-
(f) Actual or estimated Borrowing Capacity as Determined by the Insurer				XXX		XXX

11B(2)a1(f) should be equal to or greater than 11B(4)a1(d)  
11B(2)a2(f) should be equal to or greater than 11B(4)a2(d)

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

	1	2	Eligible for Redemption			
	Current Year Total (2+3+4+5+6)	Not Eligible for Redemption	3 Less Than 6 Months	4 6 Months to Less Than 1 Year	5 1 to Less Than 3 Years	6 3 to 5 Years
Membership Stock						
1. Class A	\$ -					
2. Class B	\$ -					

11B(2)b1 Current Year Total (Column 1) should equal 11B(2)a1(a) Total (Column 1)  
11B(2)b2 Current Year Total (Column 1) should equal 11B(2)a1(b) Total (Column 1)

(3) Collateral Pledged to FHLB

a. Amount Pledged as of Reporting Date

	1 Fair Value	2 Carrying Value	3 Aggregate Total Borrowing
1. Current Year Total General and Protected Cell Account Total Collateral Pledged (Lines 2+3)	\$ -	\$ -	\$ -
2. Current Year General Account Total Collateral Pledged			
3. Current Year Protected Cell Account Total Collateral Pledged			
4. Prior Year-end Total General and Protected Cell Account Total Collateral Pledged	\$ -	\$ -	\$ -

11B(3)a1 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b1 (Columns 1, 2 and 3 respectively)  
11B(3)a2 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b2 (Columns 1, 2 and 3 respectively)  
11B(3)a3 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b3 (Columns 1, 2 and 3 respectively)  
11B(3)a4 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b4 (Columns 1, 2 and 3 respectively)

b. Maximum Amount Pledged During Reporting Period

	1 Fair Value	2 Carrying Value	3 Amount Borrowed at Time of Maximum Collateral
1. Current Year Total General and Protected Cell Account Maximum Collateral Pledged (Lines 2+3)	\$ -	\$ -	\$ -
2. Current Year General Account Maximum Collateral Pledged			
3. Current Year Protected Cell Account Maximum Collateral Pledged			
4. Prior Year-end Total General and Protected Cell Account Maximum Collateral Pledged	\$ -	\$ -	\$ -

(4) Borrowing from FHLB

a. Amount as of Reporting Date

	1 Total 2+3	2 General Account	3 Protected Cell Account	4 Funding Agreements Reserves Established
1. Current Year				
(a) Debt	\$ -			XXX
(b) Funding Agreements	\$ -			
(c) Other	\$ -			XXX
(d) Aggregate Total (a+b+c)	\$ -	\$ -	\$ -	\$ -
2. Prior Year end				
(a) Debt	\$ -	\$ -	\$ -	XXX
(b) Funding Agreements	\$ -	\$ -	\$ -	\$ -
(c) Other	\$ -	\$ -	\$ -	XXX
(d) Aggregate Total (a+b+c)	\$ -	\$ -	\$ -	\$ -

b. Maximum Amount During Reporting Period (Current Year)

	1 Total 2+3	2 General Account	3 Protected Cell Account
1. Debt	\$ -		
2. Funding Agreements	\$ -		
3. Other	\$ -		
4. Aggregate Total (1+2+3)	\$ -	\$ -	\$ -

11B(4)b4 (Columns 1, 2 and 3) should be equal to or greater than 11B(4)a1(d) (Columns 1, 2 and 3 respectively)

c. FHLB - Prepayment Obligations

Does the company have  
prepayment obligations under  
the following arrangements  
(YES/NO)?

1. Debt  
2. Funding Agreements  
3. Other

NOTES TO FINANCIAL STATEMENTS

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

A. Defined Benefit Plan  
Company input

(1) Change in benefit obligation  
a. Pension Benefits

	Overfunded		Underfunded	
	2021	2020	2021	2020
1. Benefit obligation at beginning of year	\$ -	\$ -	\$ -	\$ -
2. Service cost				
3. Interest cost				
4. Contribution by plan participants				
5. Actuarial gain (loss)				
6. Foreign currency exchange rate changes				
7. Benefits paid				
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$ -	\$ -	\$ -	\$ -

b. Postretirement Benefits

	Overfunded		Underfunded	
	2021	2020	2021	2020
1. Benefit obligation at beginning of year	\$ -	\$ -	\$ -	\$ -
2. Service cost				
3. Interest cost				
4. Contribution by plan participants				
5. Actuarial gain (loss)				
6. Foreign currency exchange rate changes				
7. Benefits paid				
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$ -	\$ -	\$ -	\$ -

c. Special or Contractual Benefits Per SSAP No. 11

	Overfunded		Underfunded	
	2021	2020	2021	2020
1. Benefit obligation at beginning of year	\$ -	\$ -	\$ -	\$ -
2. Service cost				
3. Interest cost				
4. Contribution by plan participants				
5. Actuarial gain (loss)				
6. Foreign currency exchange rate changes				
7. Benefits paid				
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$ -	\$ -	\$ -	\$ -

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2021	2020	2021	2020	2021	2020
(2) Change in plan assets						
a. Fair value of plan assets at beginning of year	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. Actual return on plan assets						
c. Foreign currency exchange rate changes						
d. Reporting entity contribution						
e. Plan participants' contributions						
f. Benefits paid						
g. Business combinations, divestitures and settlements						
h. Fair value of plan assets at end of year	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(3) Funded status

	Pension Benefits		Postretirement Benefits	
	2021	2020	2021	2020
a. Components:				
1. Prepaid benefit costs				
2. Overfunded plan assets				
3. Accrued benefit costs				
4. Liability for pension benefits				
b. Assets and liabilities recognized:				
1. Assets (nonadmitted)				
2. Liabilities recognized				
c. Unrecognized liabilities				

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits Per SSAP No. 11	
	2021	2020	2021	2020	2021	2020

(4) Components of net periodic benefit cost

NOTES TO FINANCIAL STATEMENTS

a. Service cost												
b. Interest cost												
c. Expected return on plan assets												
d. Transition asset or obligation												
e. Gains and losses												
f. Prior service cost or credit												
g. Gain or loss recognized due to a settlement or curtailment												
h. Total net periodic benefit cost	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-

(5) Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost

	Pension Benefits		Postretirement Benefits	
	2021	2020	2021	2020
a. Items not yet recognized as a component of net periodic cost - prior year	\$	-	\$	-
b. Net transition asset or obligation recognized				
c. Net prior service cost or credit arising during the period				
d. Net prior service cost or credit recognized				
e. Net gain and loss arising during the period				
f. Net gain and loss recognized				
g. Items not yet recognized as a component of net periodic cost - current year	\$	-	\$	-

(6) Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost

	Pension Benefits		Postretirement Benefits	
	2021	2020	2021	2020
a. Net transition asset or obligation				
b. Net prior service cost or credit				
c. Net recognized gains and losses				

(7) Weighted-average assumptions used to determine net periodic benefit cost as of the end of current period:

	2021	2020
a. Weighted average discount rate		
b. Expected long-term rate of return on plan assets		
c. Rate of compensation increase		
d. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)		

Weighted average assumptions used to determine projected benefit obligations as of end of current period:

	2021	2020
e. Weighted average discount rate		
f. Rate of compensation increase		
g. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)		

(8) Company input

(9) Company input

(10) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated:

	Amount
a. 2022	
b. 2023	
c. 2024	
d. 2025	
e. 2026	
f. 2027 through 20xx	

(11) Company input

(12) Company input

(13) Company input

(14) Company input

(15) Company input

(16) Company input

(17) Company input

(18) Company input

B. Company input

C. The fair value of each class of plan assets

(1) Fair Value Measurements of Plan Assets at Reporting Date

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
Total Plan Assets	\$ -	\$ -	\$ -	\$ -

(2) Company input

D. Company input

E. Defined Contribution Plan  
Company input

F. Multiemployer Plans  
Company input

G. Consolidated/Holding Company Plans  
Company input

NOTES TO FINANCIAL STATEMENTS

- H. Postemployment Benefits and Compensated Absences  
Company input
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)  
Company input

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

- A. Company input
- B. Company input
- C. Company input
- D. Company input
- E. Company input
- F. Company input
- G. Company input
- H. Company input
- I. Company input
- J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is

- K. The Company issued the following surplus debentures or similar obligations:

1	2	3	4	5	6	7	8
Item Number	Date Issued	Interest Rate	Original Issue Amount of Note	Is Surplus Note Holder a Related Party (Y/N)	Carrying Value of Note Prior Year	Carrying Value of Note Current Year*	Unapproved Interest And/Or Principal
Total	XXX	XXX	\$ -	XXX	\$ -	\$ -	\$ -

\* Total should agree with Page 3, Line 33.

1	9	10	11	12	13	14
Item Number	Current Year Interest Expense Recognized	Life-To-Date Interest Expense Recognized	Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider)	Current Year Principal Paid	Life-To-Date Principal Paid	Date of Maturity
Total	\$ -	\$ -	XXX	\$ -	\$ -	XXX

1	15	16	17	18	19
Item Number	Are Surplus Note Payments Contractually Linked? (Y/N)	Surplus Note Payments Subject to Administrative Offsetting Provisions? (Y/N)	Were Surplus Note Proceeds Used to Purchase an Asset Directly From the Holder of the Surplus Note? (Y/N)	Is Asset Issuer a Related Party (Y/N)	Type of Assets Received Upon Issuance
Total	XXX	XXX	XXX	XXX	XXX

1	20	21	22
Item Number	Principal Amount of Assets Received Upon Issuance	Book/Adjusted Carry Value of Assets	Is Liquidity Source a Related Party to the Surplus Note Issuer? (Y/N)
Total	\$ -	\$ -	XXX

- L. The impact of any restatement due to prior quasi-reorganizations is as follows:

Change in Year Surplus	Change in Gross Paid-in and Contributed Surplus

- M. Company input

NOTE 14 Liabilities, Contingencies and Assessments

- A. Contingent Commitments  
Company input



NOTES TO FINANCIAL STATEMENTS

(1) Total contingent liabilities:

(2)

(1)	(2)	(3)	(4)	(5)
Nature and circumstances of guarantee and key attributes, including date and duration of agreement	Liability recognition of guarantee. (Include amount recognized at inception. If no initial recognition, document exception allowed under SSAP No. 5R.)	Ultimate financial statement impact if action under the guarantee is required	Maximum potential amount of future payments (undiscounted) the guarantor could be required to make under the guarantee. If unable to develop an estimate, this should be specifically noted.	Current status of payment or performance risk of guarantee. Also provide additional discussion as warranted
Total	\$ -	XXX	\$ -	XXX

(3)

	Amount
a. Aggregate Maximum Potential of Future Payments of All Guarantees (undiscounted) the guarantor could be required to make under guarantees. (Should equal total of Column 4 for (2) above.)	\$ -
b. Current Liability Recognized in F/S:	
1. Noncontingent Liabilities	
2. Contingent Liabilities	
c. Ultimate Financial Statement Impact if action under the guarantee is required:	
1. Investments in SCA	
2. Joint Venture	
3. Dividends to Stockholders (capital contribution)	
4. Expense	
5. Other	
6. Total (Should equal (3)a.)	\$ -

B. Assessments

(1)

Company input

(2) a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end \$ -

b. Decreases current year:

c. Increases current year:

d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$ -

(3)

a. Discount Rate Applied

b. The Undiscounted and Discounted Amount of the Guaranty Fund Assessments and Related Assets by Insolvency

Name of the Insolvency	Guaranty Fund Assessment		Related Assets	
	Undiscounted	Discounted	Undiscounted	Discounted

c. Number of Jurisdictions, Ranges of Years Used to Discount and Weighted Average Number of Years of the Discounting Time Period for Payables and Recoverables by Insolvency

Name of the Insolvency	Payables			Recoverables		
	Number of Jurisdictions	Range of Years	Weighted Average Number of Years	Number of Jurisdictions	Range of Years	Weighted Average Number of Years

C. Gain Contingencies

Company input

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

Direct

(1) The company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits

(2) Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period

(3) Indicate whether claim count information is disclosed per claim or per claimant

NOTES TO FINANCIAL STATEMENTS

E.	Product Warranties			
	(1) Company input			
	(2) Reconciliation of aggregate product warranty liability			
	a. Product warranty liability beginning balance	\$	-	
	b. Reductions for payments made under the warranty			
	c. Liability accrual for product warranties issued during the current period			
	d. Change in liability accrual for product warranties issued in previous periods			
	e. Product warranty liability ending balance	\$	-	
F.	Joint and Several Liabilities			
	Company input			
G.	All Other Contingencies			
	Company input			

NOTE 15 Leases

A.	Lessee Operating Lease:				
	(1) Company input				
	(2) a. At December 31, 2021, the minimum aggregate rental commitments are as follows:				Operating Leases
	1. 2022				
	2. 2023				
	3. 2024				
	4. 2025				
	5. 2026				
	6. Total				
	(3) Company input				
B.	Lessor Leases				
	(1) Company input				
	c. Future minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period are as follows:				Operating Leases
	1. 2022				
	2. 2023				
	3. 2024				
	4. 2025				
	5. 2026				
	6. Total				
	d. Company input				
	(2) Leveraged Leases				
	Company input				
	b. The Company's investment in leveraged leases relates to equipment used primarily in the transportation industries. The component of net income from leveraged leases as of the end of current period and December 31, 2020 were as shown below:				
	1. Income from leveraged leases before income tax including investment tax credit		2021		2020
	2. Less current income tax				
	3. Net income from leverage leases	\$	-	\$	-
	c. The components of the investment in leveraged leases as of the end of current period and December 31, 2020 were as shown below:				
	1. Lease contracts receivable (net of principal and interest on non-recourse financing)		2021		2020
	2. Estimated residual value of leased assets				
	3. Unearned and deferred income				
	4. Investment in leveraged leases				
	5. Deferred income taxes related to leveraged leases				
	6. Net investment in leveraged leases	\$	-	\$	-

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

(1) The table below summarizes the face amount of the Company's financial instruments with off-balance sheet risk.							
		ASSETS		LIABILITIES			
		2021	2020	2021	2020		
	a. Swaps						
	b. Futures						
	c. Options						
	d. Total	\$	-	\$	-	\$	-
(2) Company input							
(3) Company input							
(4) Company input							

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

A.	Transfers of Receivables Reported as Sales				
	Company input				
B.	Transfer and Servicing of Financial Assets				
	Company input				

NOTES TO FINANCIAL STATEMENTS

1	2	3	4	5	6	7	8
		Original Reporting Schedule of the Transferred Assets	Amount Derecognized from Sale Transaction	Amount that continues to be recognized in the statement of financial position (Col. 2 minus 4)	BACV of acquired interests in transferred assets	Reporting Schedule of Acquired Interests	Percentage of interests of a reporting entity's transferred assets acquired by affiliated entities
Identification of Transaction	BACV at Time of Transfer						

C. Wash Sales  
(1) Company input

(2) The details by NAIC designation 3 or below, or unrated of securities sold during the year ended December 31, 2021 and reacquired within 30 days of the sale date are:

Description	NAIC Designation	Number of Transactions	Book Value of Securities Sold	Cost of Securities Repurchased	Gain/(Loss)
-------------	------------------	------------------------	-------------------------------	--------------------------------	-------------

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

A. ASO Plans:  
The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during 2021:

	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a. Net reimbursement for administrative Expenses (including administrative fees) in excess of actual expenses			\$ -
b. Total net other income or expenses (including interest paid to or received from plans)			\$ -
c. Net gain or (loss) from operations	\$ -	\$ -	\$ -
d. Total claim payment volume			\$ -

B. ASC Plans:  
The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2021:

	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a. Gross reimbursement for medical cost incurred			\$ -
b. Gross administrative fees accrued			\$ -
c. Other income or expenses (including interest paid to or received from plans)			\$ -
d. Gross expenses incurred (claims and administrative)			\$ -
e. Total net gain or loss from operations	\$ -	\$ -	\$ -

C. Medicare or Similarly Structured Cost Based Reimbursement Contract  
Company input

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
Total	XXX	XXX	XXX	XXX	\$ -

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

NOTE 20 Fair Value Measurements

A.  
(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
a. Assets at fair value					
Total assets at fair value/NAV	\$ -	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
b. Liabilities at fair value					
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy

Description	Beginning Balance at 01/01/2021	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2021
a. Assets										
Total Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Description	Beginning Balance at 01/01/2021	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2021
b. Liabilities										
Total Liabilities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

(3) Company input

(4) Company input

(5) Company input

B. Company input

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)

D. Not Practicable to Estimate Fair Value

Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation

E. Company input

NOTE 21 Other Items

A. Unusual or Infrequent Items  
Company input

B. Troubled Debt Restructuring: Debtors  
Company input

C. Other Disclosures  
Company input

D. Business Interruption Insurance Recoveries  
Company input

E. State Transferable and Non-transferable Tax Credits

(1) Carrying Value of Transferable and Non-transferable State Tax Credits Gross of any Related Tax Liabilities and Total Unused Transferable and Non-transferable State Tax Credits by State and in Total

Description of State Transferable and Non-transferable Tax Credits	State	Carrying Value	Unused Amount
21E1999 - Total		\$ -	\$ -

(2) Company input

(3) Company input

(4) State Tax Credits Admitted and Nonadmitted

a. Transferable	<u>Total Admitted</u>	<u>Total Nonadmitted</u>
b. Non-transferable		

F. Subprime Mortgage Related Risk Exposure  
(1) Company input

(2) Direct exposure through investments in subprime mortgage loans.

NOTES TO FINANCIAL STATEMENTS

	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Value of Land and Buildings	Other-Than- Temporary Impairment Losses Recognized	Default Rate
a. Mortgages in the process of foreclosure					
b. Mortgages in good standing					
c. Mortgages with restructure terms					
d. Total	\$ -	\$ -	\$ -	\$ -	XXX

(3) Direct exposure through other investments.

	Actual Cost	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Other-Than- Temporary Impairment Losses Recognized
a. Residential mortgage backed securities				
b. Commercial mortgage backed securities				
c. Collateralized debt obligations				
d. Structured securities				
e. Equity investment in SCAs *				
f. Other assets				
g. Total	\$ -	\$ -	\$ -	\$ -

\* These investments comprise of the companies invested assets.

(4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.

	Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at End of Current Period	IBNR Reserves at End of Current Period
a. Mortgage Guaranty Coverage				
b. Financial Guaranty Coverage				

	Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at End of Current Period	IBNR Reserves at End of Current Period
c. Other Lines (specify):				
d. Total	\$ -	\$ -	\$ -	\$ -

G. Insurance-Linked Securities (ILS) Contracts

	Number of Outstanding ILS Contracts	Aggregate Maximum Proceeds
Management of Risk Related To:		
(1) Directly-Written Insurance Risks		
a. ILS Contracts as Issuer		
b. ILS Contracts as Ceding Insurer		
c. ILS Contracts as Counterparty		
(2) Assumed Insurance Risks		
a. ILS Contracts as Issuer		
b. ILS Contracts as Ceding Insurer		
c. ILS Contracts as Counterparty		

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

- (1) Amount of admitted balance that could be realized from an investment vehicle
- (2) Percentage Bonds
- (3) Percentage Stocks
- (4) Percentage Mortgage Loans
- (5) Percentage Real Estate
- (6) Percentage Cash and Short-Term Investments
- (7) Percentage Derivatives
- (8) Percentage Other Invested Assets

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:  
Company input

Type II – Nonrecognized Subsequent Events:  
Company input

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables

Individual Reinsurers with Unsecured Reinsurance Recoverables Exceeding 3% of Policyholder Surplus

Individual Reinsurers Who Are Not Members of a Group

FEIN	Reinsurer Name	Unsecured Amount
	detail row 1	\$ -
	detail row 2	\$ -

Individual Reinsurers Who Are Members of a Group

Group Code	FEIN	Reinsurer Name	Unsecured Amount
		detail row 1	\$ -
		detail row 2	\$ -

NOTES TO FINANCIAL STATEMENTS

All Members of the Groups Shown above with Unsecured Reinsurance Recoverables

Group Code	FEIN	Reinsurer Name	Unsecured Amount
		detail row 1	XXX
		detail row 2	XXX
Total			\$ -
		detail row 1	XXX
		detail row 2	XXX
Total			\$ -
		detail row 1	XXX
		detail row 2	XXX
Total			\$ -

B. Reinsurance Recoverable in Dispute

Name of Reinsurer	Total Amount in Dispute (Including IBNR)	Notification	Arbitration	Litigation
-------------------	--	--------------	-------------	------------

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					\$ -	\$ -
b. All Other					\$ -	\$ -
c. Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Direct Unearned Premium Reserve						

(2)

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

(3)

Protected Cell Name	Covered Exposure	Ultimate Exposure Amt.	Fair Value of Assets as of Statement Date	Initial Contract Date of Securitization Instrument	Maturity Date of Securitized Instrument
TOTAL	XXX	\$ -	\$ -	XXX	XXX

D. Uncollectible Reinsurance

(1) The Company has written off in the current year reinsurance balances due from the companies listed below, the amount of:

Which is reflected as:

- a. Losses incurred
- b. Loss adjustment expenses incurred
- c. Premiums earned
- d. Other

e.	Company	Amount
----	---------	--------

E. Commutation of Reinsurance Reflected in Income and Expenses.

The company has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

- (1) Losses incurred
- (2) Loss adjustment expenses incurred
- (3) Premiums earned
- (4) Other

(5)	Company	Amount
-----	---------	--------

F. Retroactive Reinsurance

(1)

As:	Reported Company	
	Assumed	Ceded
a. Reserves Transferred:		
1. Initial Reserves		
2. Adjustments - Prior Year (s)	\$ -	\$ -
3. Adjustments - Current Year		
4. Current Total	\$ -	\$ -
b. Consideration Paid or Received:		

NOTES TO FINANCIAL STATEMENTS

1. Initial Consideration		
2. Adjustments - Prior Year (s)	\$	-
3. Adjustments - Current Year		
4. Current Total	\$	-
c. Paid Losses Reimbursed or Recovered:		
1. Prior Year (s)	\$	-
2. Current Year		
3. Current Total	\$	-
d. Special Surplus from Retroactive Reinsurance:		
1. Initial Surplus Gain or Loss		
2. Adjustments - Prior Year (s)	\$	-
3. Adjustments - Current Year		
4. Current Year Restricted Surplus		
5. Cumulative Total Transferred to Unassigned Funds		

e. All cedents and reinsurers involved in all transactions included in summary totals above:

Company	Assumed Amount	Ceded Amount
Total	\$	-

\* Total amounts must agree with totals in a.4 above. Include the NAIC Company Code or Alien Insurer Identification Number for each insurer listed.

f. Total Paid Loss/LAE amounts recoverable (for authorized, reciprocal jurisdiction, unauthorized and certified reinsurers), any amounts more than 90 days overdue (for authorized, reciprocal jurisdiction, unauthorized and certified reinsurers), and for amounts recoverable the collateral held (for unauthorized and certified reinsurers) as respects amounts recoverable from unauthorized and certified reinsurers:

1. Authorized Reinsurers

Company	Total Paid/Loss/LAE Recoverable	Amounts Over 90 Days Overdue
Total	\$	-

2. Unauthorized Reinsurers

Company	Total Paid/Loss/LAE Recoverable	Amounts Over 90 Days Overdue	Collateral Held
Total	\$	-	\$

3. Certified Reinsurers

Company	Total Paid/Loss/LAE Recoverable	Amounts Over 90 Days Overdue	Collateral Held
Total	\$	-	\$

4. Reciprocal Jurisdiction Reinsurers

Company	Total Paid/Loss/LAE Recoverable	Amounts Over 90 Days Overdue
Total	\$	-

G. Reinsurance Accounted for as a Deposit

Description	Interest Income	Cash Recoveries	Deposit Balance
-------------	-----------------	-----------------	-----------------

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements  
Company input

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

(1) Reporting Entity Ceding to Certified Reinsurer Whose Rating Was Downgraded or Status Subject to Revocation

Name of Certified Reinsurer	Relationship to Reporting Entity	Date of Action	Jurisdiction of Action	Collateral Percentage Requirement		Net Obligation Subject to Collateral	Collateral Required (but not received)
				Before	After		

(2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation

NOTES TO FINANCIAL STATEMENTS

Date of Action	Jurisdiction of Action	Collateral Percentage Requirement		Net Obligation Subject to Collateral	Collateral Required (but not yet Funded)
		Before	After		

- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation
- (1) Company input
- (2) The amount of unexhausted limit as of the reporting date.

Name of Reinsurer	Amount of Unexhausted Limit
-------------------	-----------------------------

- K. Reinsurance Credit
- Company input

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. Company input
- B. Company input
- C. Company input
- D. Medical loss ratio rebates required pursuant to the Public Health Service Act.

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(2) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(3) Medical loss ratio rebates unpaid	\$ -	\$ -	\$ -	\$ -	\$ -
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(8) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(9) Medical loss ratio rebates unpaid	\$ -	\$ -	\$ -	\$ -	\$ -
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -

- E.
- (1) For Ten Percent (10%) Method of Determining Nonadmitted Retrospective Premium
- a. Total accrued retro premium
- b. Unsecured amount
- c. Less: Nonadmitted amount (10%)
- d. Less: Nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted
- e. Admitted amount (a) - (c) - (d)

- (2) For Quality Rating Method of Determining Nonadmitted Retrospective Premium

	(1)	(2)	(3)	(4)
	Insured's Current Quality Rating	Total Amount	Unsecured Balances	Nonadmitted Amount (2) x %
a.	1		1%	\$ -
b.	2		2%	\$ -
c.	3		5%	\$ -
d.	4		10%	\$ -
e.	5		20%	\$ -
f.	6		100%	\$ -
g.	Nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted			
h.	Total (a) through (f)			
- (g)	\$ -	\$ -	\$ -	\$ -

- F. Risk Sharing Provisions of the Affordable Care Act
- (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?
- Yes [ ] No [X]

- (2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year
- Amount
- a. Permanent ACA Risk Adjustment Program
- Assets
1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)
- Liabilities
2. Risk adjustment user fees payable for ACA Risk Adjustment
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)
- Operations (Revenue & Expense)



NOTES TO FINANCIAL STATEMENTS

4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)
- b. Transitional ACA Reinsurance Program
- Assets
1. Amounts recoverable for claims paid due to ACA Reinsurance
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance
- Liabilities
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium
5. Ceded reinsurance premiums payable due to ACA Reinsurance
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance
- Operations (Revenue & Expense)
7. Ceded reinsurance premiums due to ACA Reinsurance
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments
9. ACA Reinsurance contributions – not reported as ceded premium
- c. Temporary ACA Risk Corridors Program
- Assets
1. Accrued retrospective premium due to ACA Risk Corridors
- Liabilities
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors
- Operations (Revenue & Expense)
3. Effect of ACA Risk Corridors on net premium income (paid/received)
4. Effect of ACA Risk Corridors on change in reserves for rate credits

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable	Ref	Receivable	Payable
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)					\$ -	\$ -			A	\$ -	\$ -
2. Premium adjustments (payable) (including high risk pool premium)					\$ -	\$ -			B	\$ -	\$ -
3. Subtotal ACA Permanent Risk Adjustment Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid					\$ -	\$ -			C	\$ -	\$ -
2. Amounts recoverable for claims unpaid (contra liability)					\$ -	\$ -			D	\$ -	\$ -
3. Amounts receivable relating to uninsured plans					\$ -	\$ -			E	\$ -	\$ -
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium					\$ -	\$ -			F	\$ -	\$ -
5. Ceded reinsurance premiums payable					\$ -	\$ -			G	\$ -	\$ -
6. Liability for amounts held under uninsured plans					\$ -	\$ -			H	\$ -	\$ -
7. Subtotal ACA Transitional Reinsurance Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium					\$ -	\$ -			I	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -			J	\$ -	\$ -
3. Subtotal ACA Risk Corridors Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
d. Total for ACA Risk Sharing Provisions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -

Explanations of Adjustments

- A.
- B.
- C.
- D.
- E.
- F.
- G.
- H.

NOTES TO FINANCIAL STATEMENTS

I.

J.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

	Accrued During the Prior Year on Business Written		Received or Paid as of the Current Year on Business		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
	Before December 31 of the Prior Year		Written Before December 31 of the Prior Year		Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable	Ref	Receivable	Payable
a. 2014											
1. Accrued retrospective premium					\$ -	\$ -			A	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -			B	\$ -	\$ -
b. 2015											
1. Accrued retrospective premium					\$ -	\$ -			C	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -			D	\$ -	\$ -
c. 2016											
1. Accrued retrospective premium					\$ -	\$ -			E	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -			F	\$ -	\$ -
d. Total for Risk Corridors	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -

Explanations of Adjustments

- A.
- B.
- C.
- D.
- E.
- F.

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Column 1 through 10 respectively)

(5) ACA Risk Corridors Receivable as of Reporting Date

	1	2	3	4	5	6
Risk Corridors Program Year	Estimated Amount to be Filed or Final Amount Filed with CMS	Non-Accrued Amounts for Impairment or Other Reasons	Amounts received from CMS	Asset Balance (Gross of Non-admissions) (1-2-3)	Non-admitted Amount	Net Admitted Asset (4 - 5)
a. 2014				\$ -		\$ -
b. 2015				\$ -		\$ -
c. 2016				\$ -		\$ -
d. Total (a + b + c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

24E(5)d (Column 4) should equal 24E(3)c1 (Column 9)

24E(5)d (Column 6) should equal 24E(2)c1

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Company input

NOTE 26 Intercompany Pooling Arrangements

Company input

NOTE 27 Structured Settlements

	Loss Reserves Eliminated by Annuities	Unrecorded Loss Contingencies
27A. Structured Settlements		
27B.	Licensed in Company's State of Domicile Yes/No	Statement Value (i.e., Present Value) of Annuities
Life Insurance Company And Location		

NOTE 28 Health Care Receivables

- A. Pharmaceutical Rebate Receivables

NOTES TO FINANCIAL STATEMENTS

	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
Date					

B. Risk-Sharing Receivables

		Risk Sharing Receivable as Estimated in the Prior Year	Risk Sharing Receivable as Estimated in the Current Year	Risk Sharing Receivable Billed	Risk Sharing Receivable Not Yet Billed	Actual Risk Sharing Amounts Received in Year Billed	Actual Risk Sharing Amounts Received First Year Subsequent	Actual Risk Sharing Amounts Received Second Year Subsequent	Actual Risk Sharing Amounts Received - All Other
Calendar Year	Evaluation Period Year Ending								

NOTE 29 Participating Policies

Company input

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves
2. Date of the most recent evaluation of this liability
3. Was anticipated investment income utilized in the calculation? 

Yes [] No []

NOTE 31 High Deductibles

Company input

A. Reserve Credit Recorded on Unpaid Claims and Amount Billed and Recoverable on Paid Claims for High Deductibles

(1) Counter Party Exposure Recorded on Unpaid Claims and Billed Recoverables on Paid Claims

Annual Statement Line of Business (ASL)		3	4	5	6
1	2	Gross (of High Deductible) Loss Reserves	Reserve Credit for High Deductibles	Billed Recoverables on Paid Claims	Total High Deductibles and Billed Recoverables (Col 4 + Col 5)
ASL #	ASL Description				
Total		\$ -	\$ -	\$ -	\$ -

(2) Unsecured Amounts of High Deductibles

- a. Total high deductibles and billed recoverables on paid claims (Should equal total line for Column 6 for A(1) above) 

\$ -
- b. Collateral on balance sheet (Must be equal to or greater than zero)
- c. Collateral off balance sheet (Must be equal to or greater than zero)
- d. Total unsecured deductibles and billed recoverables on paid claims d=a-(b+c) (Must be equal to or greater than zero) 

\$ -
- e. Percentage unsecured 

0.0%

(3) High Deductible Recoverables Amounts on Paid Claims

- a. Amount of overdue nonadmitted (either due to aging or collateral)
- b. Total over 90 days overdue admitted
- c. Total overdue (a+b) 

\$ -

(4) The Deductible Amounts for the Highest Ten Unsecured High Deductible Policies

Counterparty Ranking	Top Ten Unsecured High Deductibles Amounts
----------------------	---

- Counterparty 1
- Counterparty 2
- Counterparty 3
- Counterparty 4
- Counterparty 5
- Counterparty 6
- Counterparty 7
- Counterparty 8
- Counterparty 9
- Counterparty 10

B. Unsecured High Deductible Recoverables for Individual Obligors Part of a Group Under the Same Management or Control Which Are Greater Than 1% of Capital and Surplus. For this purpose, a group of entities under common control shall be regarded as a single customer.

(1) Total Group Unsecured Aggregate Recoverable

Group Name	Total Unsecured Aggregate Recoverable
------------	---

(2) Obligors and Related Members in the Group

Group Name	Obligors and Related Group Members
------------	------------------------------------

NOTES TO FINANCIAL STATEMENTS

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

A. Tabular Discount

	Tabular Discount Included in Schedule P, Part 1*	
	(1) Case	(2) IBNR
1. Homeowners/Farmowners		
2. Private Passenger Auto Liability/Medical		
3. Commercial Auto/Truck Liability/Medical		
4. Workers' Compensation		
5. Commercial Multiple Peril		
6. Medical Professional Liability - occurrence		
7. Medical Professional Liability - claims-made		
8. Special Liability		
9. Other Liability - occurrence		
10. Other Liability - claims-made		
11. Special Property		
12. Auto Physical Damage		
13. Fidelity, Surety		
14. Other (including Credit, Accident & Health)		
15. International		
16. Reinsurance Nonproportional Assumed Property		
17. Reinsurance Nonproportional Assumed Liability		
18. Reinsurance Nonproportional Assumed Financial Lines		
19. Products Liability - occurrence		
20. Products Liability - claims-made		
21. Financial Guaranty/Mortgage Guaranty		
22. Warranty		
23. Total	\$ -	\$ -

\* Must exclude medical loss reserves and all loss adjustment expense reserves.

B. Nontabular Discount

	(1) Case	(2) IBNR	(3) Defense & Cost Containment Expense	(4) Adjusting & Other Expense
1. Homeowners/Farmowners				
2. Private Passenger Auto Liability/Medical				
3. Commercial Auto/Truck Liability/Medical				
4. Workers' Compensation				
5. Commercial Multiple Peril				
6. Medical Professional Liability - occurrence				
7. Medical Professional Liability - claims-made				
8. Special Liability				
9. Other Liability - occurrence				
10. Other Liability - claims-made				
11. Special Property				
12. Auto Physical Damage				
13. Fidelity, Surety				
14. Other (including Credit, Accident & Health)				
15. International				
16. Reinsurance Nonproportional Assumed Property				
17. Reinsurance Nonproportional Assumed Liability				
18. Reinsurance Nonproportional Assumed Financial Lines				
19. Products Liability - occurrence				
20. Products Liability - claims-made				
21. Financial Guaranty/Mortgage Guaranty				
22. Warranty				
23. Total	\$ -	\$ -	\$ -	\$ -

\*\* Should include medical loss reserves and all loss adjustment expense reserves, whether reported as tabular or nontabular in Schedule P.

C. Company input

NOTE 33 Asbestos/Environmental Reserves

A. Company input

(1) Direct

	2017	2018	2019	2020	2021
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves:	\$ -	\$ -	\$ -	\$ -	\$ -

(2) Assumed Reinsurance

	2017	2018	2019	2020	2021
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves:	\$ -	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

(3) Net of Ceded Reinsurance

	2017	2018	2019	2020	2021
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves:	\$ -	\$ -	\$ -	\$ -	\$ -

B. State the amount of the ending reserves for Bulk + IBNR included in A (Loss & LAE):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

C. State the amount of the ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

D. Company input

(1) Direct

	2017	2018	2019	2020	2021
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves:	\$ -	\$ -	\$ -	\$ -	\$ -

(2) Assumed Reinsurance

	2017	2018	2019	2020	2021
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves:	\$ -	\$ -	\$ -	\$ -	\$ -

(3) Net of Ceded Reinsurance

	2017	2018	2019	2020	2021
a. Beginning reserves:					\$ -
b. Incurred losses and loss adjustment expense:					
c. Calendar year payments for losses and loss adjustment expenses:					
d. Ending reserves:	\$ -	\$ -	\$ -	\$ -	\$ -

E. State the amount of the ending reserves for Bulk + IBNR included in D (Loss & LAE):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

F. State the amount of the ending reserves for loss adjustment expenses included in D (Case, Bulk + IBNR):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

NOTE 34 Subscriber Savings Accounts  
Company input

NOTE 35 Multiple Peril Crop Insurance  
Company input

NOTE 36 Financial Guaranty Insurance  
A.

- (1) Financial guarantee insurance contracts where premiums are received as installment payments over the period of the contract, rather than at inception:
  - a. Company input
  - b. Schedule of premiums (undiscounted) expected to be collected under all installment contracts:
    - 1. (a) 1st Quarter 2022
    - (b) 2nd Quarter 2022
    - (c) 3rd Quarter 2022
    - (d) 4th Quarter 2022
    - (e) Year 2023
    - (f) Year 2024
    - (g) Year 2025

NOTES TO FINANCIAL STATEMENTS

(h) Year 2026		
2.	(a) 2027 through 2031	
	(b) 2032 through 2036	
	(c) 2037 through 2041	
	(d) 2042 through 2046	
	(e) 2047 through 2051	
	(f) 2052 through 2056	
	(g) 2057 through 2061	
	(h) 2062 through 2066	
	(i) 2067 through 2071	
	(j) 2072 through 2076	
	(k) 2077 through 2081	
	(l) 2082 through 2086	
	(m) 2087 through 2091	
	(n) 2092 through 2096	
	(o) 2097 through 2101	
	(p) 2102 through 2106	
	(q) 2107 through 2111	
	(r) 2112 through 2116	
	(s) 2117 through 2121	
	(t) 2122 through 2126	
	(u) 2127 through 2131	
	(v) 2132 through 2136	
	(w) 2137 through 2141	
	(x) 2142 through 2146	
	(y) 2147 through 2151	
c. Roll forward of the expected future premiums (undiscounted), including:		
1.	Expected future premiums - Beginning of Year	\$ -
2.	Less - Premium payments received for existing installment contracts	
3.	Add - Expected premium payments for new installment contracts	
4.	Adjustments to the expected future premium payments	
5.	Expected future premiums - End of Year	\$ -
(2) Non-installment contracts:		
a. Company input		
b. Schedule of the future expected earned premium revenue on non-installment contracts as of the latest date of the statement of financial position:		
1.	(a) 1st Quarter 2022	
	(b) 2nd Quarter 2022	
	(c) 3rd Quarter 2022	
	(d) 4th Quarter 2022	
	(e) Year 2023	
	(f) Year 2024	
	(g) Year 2025	
	(h) Year 2026	
2.	(a) 2027 through 2031	
	(b) 2032 through 2036	
	(c) 2037 through 2041	
	(d) 2042 through 2046	
	(e) 2047 through 2051	
	(f) 2052 through 2056	
	(g) 2057 through 2061	
	(h) 2062 through 2066	
	(i) 2067 through 2071	
	(j) 2072 through 2076	
	(k) 2077 through 2081	
	(l) 2082 through 2086	
	(m) 2087 through 2091	
	(n) 2092 through 2096	
	(o) 2097 through 2101	
	(p) 2102 through 2106	
	(q) 2107 through 2111	
	(r) 2112 through 2116	
	(s) 2117 through 2121	
	(t) 2122 through 2126	
	(u) 2127 through 2131	
	(v) 2132 through 2136	
	(w) 2137 through 2141	
	(x) 2142 through 2146	
	(y) 2147 through 2151	
(3) Claim liability		
a. Company input		
b. Significant components of the change in the claim liability for the period		
	Components	Amount
(1)	Accretion of the discount	
(2)	Changes in timing	
(3)	New reserves for defaults of insured contracts	
(4)	Change in deficiency reserves	
(5)	Change in incurred but not reported claims	
(6)	Total	\$ -
(4) Company input		
B. Schedule of insured financial obligations at the end of the period		

14.37

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 ☒ 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 ☐ 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 ☒

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 ☒

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.

12/31/2017

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.

12/31/2017

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).

06/24/2019

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 ☒ No ☐ N/A ☐

3.6

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

Yes ☒ 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 ☒  
Yes ☐ No ☒

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 ☒  
Yes ☐ No ☒

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 ☒

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 ☒

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 ☒

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 or government, manager or attorney in fact).

%

1 Nationality	2 Type of Entity



ANNUAL STATEMENT FOR THE YEAR 2021 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 location (city and state of the main office) of any affiliates regulated by a federal 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 reporting entity? ..... 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 [   ] N/A [ X ]
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, P.C. 5400 BOSQUE BLVD SUITE 500 WACO, TEXAS 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 [   ] N/A [ X ]
- 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 2021 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 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 2021 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? Yes [ ] No [ ] N/A [ X ]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [ ] No [ ] N/A [ X ]

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

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. \$ 0

25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$ 0

25.093 Total payable for securities lending reported on the liability page. \$ 0

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). Yes [ ] No [ X ]

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? Yes [ ] No [ X ]

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ] N/A [ X ]  
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? Yes [ ] No [ X ]

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

27.41 Special accounting provision of SSAP No. 108 Yes [ ] No [ X ]

27.42 Permitted accounting practice Yes [ ] No [ X ]

27.43 Other accounting guidance Yes [ ] No [ X ]

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:

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

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

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.

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? Yes [ ] No [ X ]

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? Yes [ X ] No [ ]

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

ANNUAL STATEMENT FOR THE YEAR 2021 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. 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

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 [    ] No [ X ]

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 [    ] No [ X ]

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

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 2021 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 .....	1,977,708	2,034,402	56,694
31.2 Preferred stocks .....	0		0
31.3 Totals	1,977,708	2,034,402	56,694

31.4 Describe the sources or methods utilized in determining the fair values:  
12-31-2021 HILLTOP SECURITIES STATEMENT .....

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 the following elements of each self-designated PLGI security:  
a. The security was purchased prior to January 1, 2018.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
c. The NAIC Designation was 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 held by the insurer and available for examination by state insurance regulators.  
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.  
Has the reporting entity self-designated PLGI securities? ..... 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 [ ] No [ X ] N/A [ ]

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

OTHER

38.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....0

38.2 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 Name	2 Amount Paid
.....	.....

39.1 Amount of payments for legal expenses, if any? .....\$ .....0

39.2 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 Name	2 Amount Paid
.....	.....

40.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? .....\$ .....0

40.2 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 Name	2 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 .....

0

2.2

Premium Denominator .....

0

2.3

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

0.000

0.000

2.4

Reserve Numerator .....

0

0

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 2021 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?

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.

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?

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 ☒ 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 ratio cap, an aggregate limit or any similar provisions)?

Yes ☐ No ☒

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 ☒

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 ☒

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 ☐

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 ☒

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 ☒

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 ☒

Yes ☒ No ☐

Yes ☐ No ☒

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 ☒



ANNUAL STATEMENT FOR THE YEAR 2021 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): .....\$

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:  
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

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 [ ☒ ]

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 .....

\$ .....

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 2021 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 2021	2 2020	3 2019	4 2018	5 2017
<b>Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	0	382,050	445,042	443,095	421,222
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	246,237	2,747,939	3,030,114	2,872,731	2,839,701
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	1,015,342	10,321,183	12,025,919	10,820,298	9,866,265
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)	1,261,579	13,451,172	15,501,075	14,136,124	13,127,188
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	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)	270,562	(57,555)	(62,941)	(77,119)	(4,955)
14. Net investment gain or (loss) (Line 11)	62,186	15,047	3,085	4,921	645
15. Total other income (Line 15)	3,512	51,385	62,772	63,249	62,007
16. Dividends to policyholders (Line 17)		0	0	0	0
17. Federal and foreign income taxes incurred (Line 19)	70,613	1,426	116	(1,879)	19,617
18. Net income (Line 20)	265,647	7,451	2,800	(7,070)	38,080
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	36,051,457	2,714,259	5,752,452	5,485,966	4,986,537
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	293,037	0	137,229	70,461	96,808
20.2 Deferred and not yet due (Line 15.2)	0	0	2,491,968	2,329,625	1,975,481
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26)	345,142	12,759	3,058,266	2,795,623	2,286,634
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	0	0	0
25. Capital paid up (Page 3, Lines 30 & 31)	2,500,000	0	0	0	0
26. Surplus as regards policyholders (Page 3, Line 37)	35,706,315	2,701,500	2,694,186	2,690,343	2,699,903
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11)	292,158	39,681	(113,010)	95,162	8,885
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital	35,706,315	2,701,500	2,694,186	2,690,343	2,699,903
29. Authorized control level risk-based capital	3,793,929	11,167	122,423	163,283	11,076
<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)	5.5	73.4	81.1	67.3	78.5
31. Stocks (Lines 2.1 & 2.2)	91.6	0.0	0.0	0.0	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)	2.9	26.6	18.9	32.7	21.5
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	0	0	0
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)	0	0	0	0	0
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	32,741,378	0	0	0	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	32,741,378	0	0	0	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)	91.7	0.0	0.0	0.0	0.0

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2021	2 2020	3 2019	4 2018	5 2017
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24) .....	5,500,543	(137)	1,043	(2,490)	1,185
52. Dividends to stockholders (Line 35) .....		0	0	0	0
53. Change in surplus as regards policyholders for the year (Line 38) .....	33,004,815	7,314	3,843	(9,560)	39,265
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	0	4,557	5,818	1,847	92,598
55. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	0	1,012,667	1,951,827	539,385	537,158
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	16,198	6,112,782	4,989,670	3,157,182	3,849,977
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) .....	16,198	7,130,006	6,947,315	3,698,414	4,479,733
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	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 [ X ] No [ ]

If no, please explain: .....



ANNUAL STATEMENT FOR THE YEAR 2021 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 2021 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 .....	206,088	184,543		21,545		10,678	10,678				3,480	
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 .....	1,015,342	391,334		624,008	16,198	32,969	16,771				228,330	
5.1 Commercial multiple peril (non-liability portion) .....												
5.2 Commercial multiple peril (liability portion) .....												
6. Mortgage guaranty .....												
8. Ocean marine .....												
9. Inland marine .....	40,149	40,149				2,080	2,080				212	
10. Financial guaranty .....												
11. Medical professional liability .....												
12. Earthquake .....												
13. Group accident and health (b) .....												
14. Credit accident and health (group and individual) .....												
15.1 Collectively renewable accident and health (b) .....												
15.2 Non-cancelable accident and health(b) .....												
15.3 Guaranteed renewable accident and health(b) .....												
15.4 Non-renewable for stated reasons only (b) .....												
15.5 Other accident only .....												
15.6 Medicare Title XVIII exempt from state taxes or fees .....												
15.7 All other accident and health (b) .....												
15.8 Federal employees health benefits plan premium (b) .....												
16. Workers' compensation .....												
17.1 Other Liability - occurrence .....												
17.2 Other Liability - claims made .....												
17.3 Excess workers' compensation .....												
18. Products liability .....												
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 .....												
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a) .....	1,261,579	616,026	0	645,553	16,198	45,727	29,529	0	0	0	232,022	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 thru 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 \$ .....3,512  
(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 2021 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 2021 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 .....	206,088	184,543	.0	21,545	.0	10,678	10,678	.0	.0	.0	3,480	.0
2.1 Allied lines .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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 .....	1,015,342	391,334	.0	624,008	16,198	32,969	16,771	.0	.0	.0	228,330	.0
5.1 Commercial multiple peril (non-liability portion) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5.2 Commercial multiple peril (liability portion) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
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. Inland marine .....	40,149	40,149	.0	.0	.0	2,080	2,080	.0	.0	.0	212	.0
10. Financial guaranty .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
11. Medical professional liability .....	.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. Group accident and health (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
14. Credit accident and health (group and individual) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.1 Collectively renewable accident and health (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.2 Non-cancelable accident and health(b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.3 Guaranteed renewable accident and health(b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.4 Non-renewable for stated reasons only (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.5 Other accident only .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.6 Medicare Title XVIII exempt from state taxes or fees .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.7 All other accident and health (b) .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
15.8 Federal employees health benefits plan premium (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 .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.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. Products liability .....	.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
34. Aggregate write-ins for other lines of business .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
35. TOTALS (a) .....	1,261,579	616,026	0	645,553	16,198	45,727	29,529	0	0	0	232,022	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 thru 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 \$ .....3,512  
(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 Effectuated or (Canceled)

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2021 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		
0499999. Total Authorized - Affiliates - U.S. Non-Pool						0	0	0	0	0	0	0	0	0	0	0	0	0	0
74-2262949	43273	INSURORS INDEMNITY COMPANY	USA		1,210	6								6		244		(238)	
0699999. Total Authorized - Affiliates - Other (Non-U.S.) - Other						1,210	6	0	0	0	0	0	0	6	0	244	0	(238)	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)						1,210	6	0	0	0	0	0	0	6	0	244	0	(238)	0
0899999. Total Authorized - Affiliates						1,210	6	0	0	0	0	0	0	6	0	244	0	(238)	0
05-0316605	21482	FACTORY MUTUAL INSURANCE CO	RI		52									0		13		(13)	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers						52	0	0	0	0	0	0	0	0	0	13	0	(13)	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)						1,262	6	0	0	0	0	0	0	6	0	257	0	(251)	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool						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
2299999. Total Unauthorized - Affiliates						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
3299999. Total Certified - Affiliates - U.S. Non-Pool						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
3699999. Total Certified - Affiliates						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
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool						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
5099999. Total Reciprocal Jurisdiction - Affiliates						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
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)						1,262	6	0	0	0	0	0	0	6	0	257	0	(251)	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
9999999 Totals						1,262	6	0	0	0	0	0	0	6	0	257	0	(251)	0



ANNUAL STATEMENT FOR THE YEAR 2021 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)
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
74-2262949. INSURORS INDEMNITY COMPANY						6	0	0	6	7	7	0	0	0	1	0	0
0699999. Total Authorized - Affiliates - Other (Non-U.S.) - Other		0	0	XXX	0	6	0	0	6	7	7	0	0	0	XXX	0	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	0	XXX	0	6	0	0	6	7	7	0	0	0	XXX	0	0
0899999. Total Authorized - Affiliates		0	0	XXX	0	6	0	0	6	7	7	0	0	0	XXX	0	0
05-0316605. FACTORY MUTUAL INSURANCE CO						0	0	0	0	0	0	0	0	0	1	0	0
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	0	XXX	0	6	0	0	6	7	7	0	0	0	XXX	0	0
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	6	0	0	6	7	7	0	0	0	XXX	0	0
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	6	0	0	6	7	7	0	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 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											
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
74-2262949. INSURORS INDEMNITY COMPANY		6					0	6		6	0		0.0	0.0	0.0	YES	0
0699999. Total Authorized - Affiliates - Other (Non-U.S.) - Other		6	0	0	0	0	0	6	0	6	0	0	0.0	0.0	0.0	XXX	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		6	0	0	0	0	0	6	0	6	0	0	0.0	0.0	0.0	XXX	0
0899999. Total Authorized - Affiliates		6	0	0	0	0	0	6	0	6	0	0	0.0	0.0	0.0	XXX	0
05-0316605. FACTORY MUTUAL INSURANCE CO							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	XXX	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		6	0	0	0	0	0	6	0	6	0	0	0.0	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	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	XXX	0
2299999. Total Unauthorized - Affiliates		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	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	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	XXX	0
3699999. Total Certified - Affiliates		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	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	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	XXX	0
5099999. Total Reciprocal Jurisdiction - Affiliates		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	XXX	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		6	0	0	0	0	0	6	0	6	0	0	0.0	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	XXX	0
9999999 Totals		6	0	0	0	0	0	6	0	6	0	0	0.0	0.0	0.0	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance														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)
		54	55	56	57	58	59	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%)	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	
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)											
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
74-2262949. INSURORS INDEMNITY COMPANY		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0699999. Total Authorized - Affiliates - Other (Non-U.S.) - Other				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999. Total Authorized - Affiliates				XXX	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	XXX
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2299999. Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3299999. Total Certified - Affiliates - U.S. Non-Pool				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
3699999. Total Certified - Affiliates				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5099999. Total Reciprocal Jurisdiction - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0
9999999 Totals				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 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)
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	XXX	XXX	0	0	0	XXX	XXX	0
74-2262949 ... INSURORS INDEMNITY COMPANY		0	XXX	XXX	0	0	0	XXX	XXX	0
0699999. Total Authorized - Affiliates - Other (Non-U.S.) - Other		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) .....	35,740,023		35,740,023
2. Premiums and considerations (Line 15) .....	293,037		293,037
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	6,059		6,059
4. Funds held by or deposited with reinsured companies (Line 16.2) .....	0		0
5. Other assets .....	12,338		12,338
6. Net amount recoverable from reinsurers .....			0
7. Protected cell assets (Line 27) .....	0		0
8. Totals (Line 28) .....	36,051,457	0	36,051,457
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	0		0
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	62,125		62,125
11. Unearned premiums (Line 9) .....			0
12. Advance premiums (Line 10) .....	18,891		18,891
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....	257,557		257,557
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 .....	6,569		6,569
19. Total liabilities excluding protected cell business (Line 26) .....	345,142	0	345,142
20. Protected cell liabilities (Line 27) .....			0
21. Surplus as regards policyholders (Line 37)	35,706,315	XXX	35,706,315
22. Totals (Line 38)	36,051,457	0	36,051,457

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 [     ]

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 2021 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. 2012.....	4,847	4,847	0	1,386	1,386	106	106	123	123	59	0	XXX
3. 2013.....	5,660	5,660	0	1,956	1,956	35	35	144	144	68	0	XXX
4. 2014.....	6,812	6,812	0	2,703	2,703	163	163	178	178	23	0	XXX
5. 2015.....	8,837	8,837	0	4,713	4,713	133	133	212	212	411	0	XXX
6. 2016.....	11,823	11,823	0	6,680	6,680	191	191	418	418	82	0	XXX
7. 2017.....	12,956	12,956	0	4,913	4,913	298	298	358	358	92	0	XXX
8. 2018.....	13,650	13,650	0	2,846	2,846	37	37	261	261	34	0	XXX
9. 2019.....	14,726	14,726	0	6,374	6,374	18	18	277	277	81	0	XXX
10. 2020.....	13,236	13,236	0	5,421	5,421	2	2	317	317	22	0	XXX
11. 2021.....	616	616	0	16	16	0	0	3	3	0	0	XXX
12. Totals	XXX	XXX	XXX	37,008	37,008	983	983	2,291	2,291	872	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	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	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	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	30	30	0	0	0	0	0	0	0	0	XXX
12. Totals	0	0	30	30	0	0	0	0	0	0	0	0	XXX

	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. 2012.....	1,615	1,615	0	33.3	33.3	0.0	0	0		0	0
3. 2013.....	2,135	2,135	0	37.7	37.7	0.0	0	0		0	0
4. 2014.....	3,044	3,044	0	44.7	44.7	0.0	0	0		0	0
5. 2015.....	5,058	5,058	0	57.2	57.2	0.0	0	0		0	0
6. 2016.....	7,289	7,289	0	61.7	61.7	0.0	0	0		0	0
7. 2017.....	5,569	5,569	0	43.0	43.0	0.0	0	0		0	0
8. 2018.....	3,144	3,144	0	23.0	23.0	0.0	0	0		0	0
9. 2019.....	6,669	6,669	0	45.3	45.3	0.0	0	0		0	0
10. 2020.....	5,740	5,740	0	43.4	43.4	0.0	0	0		0	0
11. 2021.....	49	49	0	8.0	8.0	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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	XXX	XXX
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	XXX	XXX
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX	XXX
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
11. 2021.....	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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 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	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	391	391	0	16	16	0	0	3	3	0	0	9
12. Totals	XXX	XXX	XXX	16	16	0	0	3	3	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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	0	0	17	17	0	0	0	0	0	0	0	0	0
12. Totals	0	0	17	17	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	36	36	0	9.2	9.2	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 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

(\$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 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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

(\$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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 1D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
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				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					
	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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 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. 2012.....	3,689	3,689	0	1,014	1,014	72	72	99	99	57	0	127
3. 2013.....	4,298	4,298	0	1,782	1,782	32	32	121	121	64	0	170
4. 2014.....	5,224	5,224	0	1,751	1,751	97	97	127	127	16	0	172
5. 2015.....	6,967	6,967	0	4,434	4,434	118	118	180	180	387	0	262
6. 2016.....	8,852	8,852	0	5,957	5,957	187	187	359	359	22	0	435
7. 2017.....	9,662	9,662	0	4,217	4,217	287	287	279	279	91	0	397
8. 2018.....	10,245	10,245	0	2,411	2,411	17	17	209	209	32	0	275
9. 2019.....	11,346	11,346	0	4,100	4,100	10	10	212	212	51	0	370
10. 2020.....	10,229	10,229	0	4,731	4,731	2	2	256	256	21	0	455
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	30,397	30,397	822	822	1,842	1,842	741	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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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	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. 2012.....	1,185	1,185	0	32.1	32.1	0.0	0	0	0.0	0	0
3. 2013.....	1,935	1,935	0	45.0	45.0	0.0	0	0	0.0	0	0
4. 2014.....	1,975	1,975	0	37.8	37.8	0.0	0	0	0.0	0	0
5. 2015.....	4,732	4,732	0	67.9	67.9	0.0	0	0	0.0	0	0
6. 2016.....	6,503	6,503	0	73.5	73.5	0.0	0	0	0.0	0	0
7. 2017.....	4,783	4,783	0	49.5	49.5	0.0	0	0	0.0	0	0
8. 2018.....	2,637	2,637	0	25.7	25.7	0.0	0	0	0.0	0	0
9. 2019.....	4,322	4,322	0	38.1	38.1	0.0	0	0	0.0	0	0
10. 2020.....	4,989	4,989	0	48.8	48.8	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

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

(\$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 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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
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	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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			Loss and Loss Expense Percentage			Nontabular Discount		34	Net Balance Sheet	
	Losses and Loss Expenses Incurred			(Incurred /Premiums Earned)					Inter- Company Pooling Participation Percentage	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL 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 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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
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	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),  
BOILER AND MACHINERY)**

(\$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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	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. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021	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. 2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021	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 2021 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. 2012.....	257	257	0	1	1	1	1	2	2	0	0	3
3. 2013.....	306	306	0	1	1	0	0	0	0	0	0	2
4. 2014.....	358	358	0	2	2	8	8	3	3	3	0	9
5. 2015.....	415	415	0	5	5	5	5	1	1	0	0	3
6. 2016.....	419	419	0	0	0	4	4	3	3	0	0	2
7. 2017.....	400	400	0	28	28	0	0	2	2	0	0	1
8. 2018.....	395	395	0	4	4	19	19	7	7	1	0	5
9. 2019.....	401	401	0	2	2	7	7	4	4	1	0	5
10. 2020.....	323	323	0	10	10	0	0	1	1	1	0	5
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	53	53	44	44	23	23	6	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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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	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. 2012.....	4	4	0	1.6	1.6	0.0	0	0	0.0	0	0
3. 2013.....	1	1	0	0.3	0.3	0.0	0	0	0.0	0	0
4. 2014.....	13	13	0	3.6	3.6	0.0	0	0	0.0	0	0
5. 2015.....	11	11	0	2.7	2.7	0.0	0	0	0.0	0	0
6. 2016.....	7	7	0	1.7	1.7	0.0	0	0	0.0	0	0
7. 2017.....	30	30	0	7.5	7.5	0.0	0	0	0.0	0	0
8. 2018.....	30	30	0	7.6	7.6	0.0	0	0	0.0	0	0
9. 2019.....	13	13	0	3.2	3.2	0.0	0	0	0.0	0	0
10. 2020.....	11	11	0	3.4	3.4	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 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 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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 11 - 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. 2020.....	2,647	2,647	.....0	.....679	.....679	.....0	.....0	.....60	.....60	.....0	.....0	XXX
3. 2021.....	225	225	0	0	0	0	0	0	0	0	0	XXX
4. Totals.....	XXX	XXX	XXX	679	679	0	0	60	60	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. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021	0	0	13	13	0	0	0	0	0	0	0	0	0
4. Totals	0	0	13	13	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. 2020	739	739	0	27.9	27.9	0.0	0	0	0.0	0	0
3. 2021	13	13	0	5.8	5.8	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$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. 2020.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 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. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 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	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. 2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 1K - FIDELITY/SURETY

(\$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. 2020.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX
3. 2021.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 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. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 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. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

(\$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. 2020.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX
3. 2021.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 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. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 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. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1M - INTERNATIONAL**

(\$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	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY**

(\$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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	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	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	XXX

	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 10 - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY**

(\$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	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	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	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	XXX

	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		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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 1P - REINSURANCE - NONPROPORTIONAL ASSUMED FINANCIAL LINES

(\$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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	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	XXX
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	XXX
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	XXX

	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 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. 2012.....	41	41	0	0	0	0	0	0	0	0	0	0
3. 2013.....	33	33	0	1	1	3	3	1	1	0	0	3
4. 2014.....	32	32	0	52	52	39	39	2	2	0	0	1
5. 2015.....	40	40	0	31	31	10	10	1	1	0	0	4
6. 2016.....	40	40	0	1	1	0	0	1	1	1	0	2
7. 2017.....	39	39	0	14	14	1	1	2	2	1	0	3
8. 2018.....	40	40	0	0	0	0	0	0	0	0	0	0
9. 2019.....	47	47	0	0	0	0	0	0	0	0	0	0
10. 2020.....	37	37	0	1	1	0	0	0	0	0	0	1
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	100	100	53	53	7	7	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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	5	5	0	15.2	15.2	0.0	0	0	0.0	0	0
4. 2014.....	93	93	0	290.6	290.6	0.0	0	0	0.0	0	0
5. 2015.....	42	42	0	105.0	105.0	0.0	0	0	0.0	0	0
6. 2016.....	2	2	0	5.0	5.0	0.0	0	0	0.0	0	0
7. 2017.....	17	17	0	43.6	43.6	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	1	1	0	2.7	2.7	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE**

(\$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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
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. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2021.....	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	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. 2012.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2013.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2014.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2015.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2021.....	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 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1S - FINANCIAL GUARANTY/MORTGAGE GUARANTY**

(\$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. 2020.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	XXX
3. 2021.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 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. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 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. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 1T - WARRANTY**

(\$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. 2020.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
3. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 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. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 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. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	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.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	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.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	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.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

SCHEDULE P - PART 2T - WARRANTY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
4. Totals											0	0

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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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	3	6

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0		

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0		

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0		

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	5	
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	66	61
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	104	66
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	99	73
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	176	86
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	252	183
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	204	193
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	157	118
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	226	144
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	264	191
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0			

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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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0		

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0		

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0		
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	2
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1	1
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	5	4
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	3	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	1	1
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	1	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	3	2
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	3	2
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	2	3
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0		

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0		
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0		

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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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.0	.0	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.0	.0		
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.0	.0	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.0	.0	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX

SCHEDULE P - PART 3O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	XXX	XXX

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

1. Prior.....	.000	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	XXX	XXX
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	XXX	XXX
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	XXX	XXX
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	XXX	XXX
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	XXX	XXX
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	XXX	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	.000.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.2.....	
2. 2012.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
3. 2013.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.2.....	.1.....
4. 2014.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.1.....	.0.....
5. 2015.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.3.....	.1.....
6. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.2.....	.0.....
7. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.2.....	.1.....
8. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
9. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....
10. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.1.....	.0.....
11. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....		

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

1. Prior.....	.000.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	
2. 2012.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
3. 2013.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
4. 2014.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
5. 2015.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
6. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
7. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
8. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....	.0.....
9. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....	.0.....
10. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....
11. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....		

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

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.000.....	.0.....	.0.....	XXX.....	XXX.....
2. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	XXX.....	XXX.....
3. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	XXX.....	XXX.....

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

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.000.....	.0.....	.0.....	.0.....	
2. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....	.0.....
3. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.0.....	.0.....	.0.....

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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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2012	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2016	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2017	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2012	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2016	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2017	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

SCHEDULE P - PART 4O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2012	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2016	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2017	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

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

1. Prior	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2012	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2016	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2017	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

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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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

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

1. Prior.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2. 2012.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
3. 2013.....	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. 2014.....	XXX	XXX	.0	.0	.0	.0	.0	.0	.0	.0
5. 2015.....	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0	.0
6. 2016.....	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0	.0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0	.0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0	.0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0	.0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	.0
3. 2021.....	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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9

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**SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0



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**SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 5D - WORKERS' COMPENSATION  
(EXCLUDING EXCESS WORKERS' COMPENSATION)

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	30	2	2	1	0	0	0	0	0	
2. 2012.....	40	59	62	65	66	66	66	66	66	66
3. 2013.....	XXX	79	105	103	104	104	104	104	104	104
4. 2014.....	XXX	XXX	61	84	97	98	98	99	99	99
5. 2015.....	XXX	XXX	XXX	94	153	171	171	173	176	176
6. 2016.....	XXX	XXX	XXX	XXX	151	224	241	243	252	252
7. 2017.....	XXX	XXX	XXX	XXX	XXX	143	191	197	199	204
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	110	144	154	157
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	142	219	226
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	178	264
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	10	5	2	0	0	0	0	0	0	
2. 2012.....	22	8	3	2	0	0	0	0	0	
3. 2013.....	XXX	27	2	3	0	0	0	0	0	
4. 2014.....	XXX	XXX	27	9	2	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	48	14	7	1	1	0	
6. 2016.....	XXX	XXX	XXX	XXX	101	31	13	3	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	60	17	9	5	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	30	6	3	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	7	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	86	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	18	2	0	0	0	0	0	0	0	0
2. 2012.....	109	123	125	127	127	127	127	127	127	127
3. 2013.....	XXX	161	169	169	170	170	170	170	170	170
4. 2014.....	XXX	XXX	149	162	170	170	170	170	172	172
5. 2015.....	XXX	XXX	XXX	225	258	259	260	262	262	262
6. 2016.....	XXX	XXX	XXX	XXX	390	423	435	435	436	435
7. 2017.....	XXX	XXX	XXX	XXX	XXX	351	388	393	397	397
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	250	267	275	275
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	261	370	370
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	455	455
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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**SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

**SECTION 1B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

**SECTION 1A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	3	0	0	0	0	0	0	0	0	
2. 2012.....	1	1	1	1	1	1	1	1	1	1
3. 2013.....	XXX	0	1	1	1	1	1	1	1	1
4. 2014.....	XXX	XXX	4	5	5	5	5	5	5	5
5. 2015.....	XXX	XXX	XXX	1	3	3	3	3	3	3
6. 2016.....	XXX	XXX	XXX	XXX	1	1	1	1	1	1
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1	3	3	3
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	1	1	1	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	1	0	1	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	1	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	1	1	1	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	2	1	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	2	2	3	3	3	3	3	3	3	3
3. 2013.....	XXX	2	2	2	2	2	2	2	2	2
4. 2014.....	XXX	XXX	8	8	9	9	9	9	9	9
5. 2015.....	XXX	XXX	XXX	2	3	3	3	3	3	3
6. 2016.....	XXX	XXX	XXX	XXX	2	2	2	2	2	2
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	6	7	7	5
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	6	5
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	5
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

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

**SECTION 1B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

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

**SECTION 1A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	1	2	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	2	1	1	2	2	2	2	2	2
4. 2014.....	XXX	XXX	0	0	0	0	1	1	1	1
5. 2015.....	XXX	XXX	XXX	1	3	3	3	3	3	3
6. 2016.....	XXX	XXX	XXX	XXX	1	2	2	3	2	2
7. 2017.....	XXX	XXX	XXX	XXX	XXX	2	3	2	2	2
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	2	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	1	1	1	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	1	1	1	0	0	0	
5. 2015.....	XXX	XXX	XXX	2	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	1	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3A**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	3	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	3	3	3	3	3	3	3	3	3
4. 2014.....	XXX	XXX	1	1	1	1	1	1	1	1
5. 2015.....	XXX	XXX	XXX	3	4	4	4	4	4	4
6. 2016.....	XXX	XXX	XXX	XXX	2	2	2	2	2	2
7. 2017.....	XXX	XXX	XXX	XXX	XXX	2	3	3	3	3
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 5R - PRODUCTS LIABILITY - CLAIMS-MADE**

**SECTION 1B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3B**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2012.....	0	0	0	0	0	0	0	0	0	0
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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**SCHEDULE P - PART 5T - WARRANTY**

**SECTION 1**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SECTION 2**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3**

Years in 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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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**SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**

**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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION**

**(EXCLUDING EXCESS WORKERS' COMPENSATION)**

**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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,229	10,229	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	3,689	4,298	5,224	6,967	8,852	9,662	10,245	11,346	10,229	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,229	10,229	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	3,689	4,298	5,224	6,967	8,852	9,662	10,245	11,346	10,229	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	323	323	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	257	306	358	415	419	400	395	401	323	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	323	323	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	257	306	358	415	419	400	395	401	323	0	XXX

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SCHEDULE P - PART 6H - OTHER 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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

SCHEDULE P - PART 6M - INTERNATIONAL

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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

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**SCHEDULE P - PART 6N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY**

**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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

**SCHEDULE P - PART 6O - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY**

**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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

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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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	47	47	47	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	37	37	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	41	33	32	40	40	39	40	47	37	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	37	37	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	41	33	32	40	40	39	40	47	37	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	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	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2012.....	0	0	0	0	0	0	0	0	0	0	
3. 2013.....	XXX	0	0	0	0	0	0	0	0	0	
4. 2014.....	XXX	XXX	0	0	0	0	0	0	0	0	
5. 2015.....	XXX	XXX	XXX	0	0	0	0	0	0	0	
6. 2016.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**

**SECTION 1**

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners .....	0		0.0	0		0.0
2. Private Passenger Auto Liability/ Medical .....	0		0.0	0		0.0
3. Commercial Auto/Truck Liability/ Medical .....	0		0.0	0		0.0
4. Workers' Compensation .....	0		0.0	0		0.0
5. Commercial Multiple Peril .....	0		0.0	0		0.0
6. Medical Professional Liability - Occurrence .....	0		0.0	0		0.0
7. Medical Professional Liability - Claims - Made .....	0		0.0	0		0.0
8. Special Liability .....	0		0.0	0		0.0
9. Other Liability - Occurrence .....	0		0.0	0		0.0
10. Other Liability - Claims-Made .....	0		0.0	0		0.0
11. Special Property .....	0		0.0	0		0.0
12. Auto Physical Damage .....	0		0.0	0		0.0
13. Fidelity/Surety .....	0		0.0	0		0.0
14. Other .....	0		0.0	0		0.0
15. International .....	0		0.0	0		0.0
16. Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence .....	0		0.0	0		0.0
20. Products Liability - Claims-Made .....	0		0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty .....	0		0.0	0		0.0
22. Warranty .....	0		0.0	0		0.0
23. Totals	0	0	0.0	0	0	0.0

**SECTION 2**

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3**

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (Continued)**

**SECTION 4**

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 5**

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

Schedule P - Part 1	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners .....	0		0.0	.0		0.0
2. Private Passenger Auto Liability/Medical .....	0		0.0	.0		0.0
3. Commercial Auto/Truck Liability/Medical .....	0		0.0	.0		0.0
4. Workers' Compensation .....	0		0.0	.0		0.0
5. Commercial Multiple Peril .....	0		0.0	.0		0.0
6. Medical Professional Liability - Occurrence .....	0		0.0	.0		0.0
7. Medical Professional Liability - Claims - Made .....	0		0.0	.0		0.0
8. Special Liability .....	0		0.0	.0		0.0
9. Other Liability - Occurrence .....	0		0.0	.0		0.0
10. Other Liability - Claims-Made .....	0		0.0	.0		0.0
11. Special Property .....	0		0.0	.0		0.0
12. Auto Physical Damage .....	0		0.0	.0		0.0
13. Fidelity/Surety .....	0		0.0	.0		0.0
14. Other .....	0		0.0	.0		0.0
15. International .....	0		0.0	.0		0.0
16. Reinsurance - Nonproportional Assumed Property .....	0		0.0	.0		0.0
17. Reinsurance - Nonproportional Assumed Liability .....	0		0.0	.0		0.0
18. Reinsurance - Nonproportional Assumed Financial Lines .....	0		0.0	.0		0.0
19. Products Liability - Occurrence .....	0		0.0	.0		0.0
20. Products Liability - Claims-Made .....	0		0.0	.0		0.0
21. Financial Guaranty/Mortgage Guaranty .....	0		0.0	.0		0.0
22. Warranty .....	0		0.0	.0		0.0
23. Totals	0	0	0.0	0	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (Continued)**

**SECTION 4**

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 5**

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 6**

Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 7**

Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	0	0	0	0	0	0	0	0	0	
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XXX							
6. 2016.....	XXX	XXX	XXX	XXX						
7. 2017.....	XXX	XXX	XXX	XXX	XXX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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 [ ☒ ]  
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 [ ☒ ]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? ..... Yes [   ] No [ ☒ ]
- 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 [ ☒ ]
- 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	2012 .....		
1.603	2013 .....		
1.604	2014 .....		
1.605	2015 .....		
1.606	2016 .....		
1.607	2017 .....		
1.608	2018 .....		
1.609	2019 .....		
1.610	2020 .....		
1.611	2021 .....		
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 [ ☒ ] 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 [ ☒ ] 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 [ ☒ ]  
  
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 [ ☒ ]
- 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	N							
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	N							
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	L	1,261,579	616,026	0	16,198	45,727	29,529	3,512
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	1,261,579	616,026	0	16,198	45,727	29,529	3,512	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

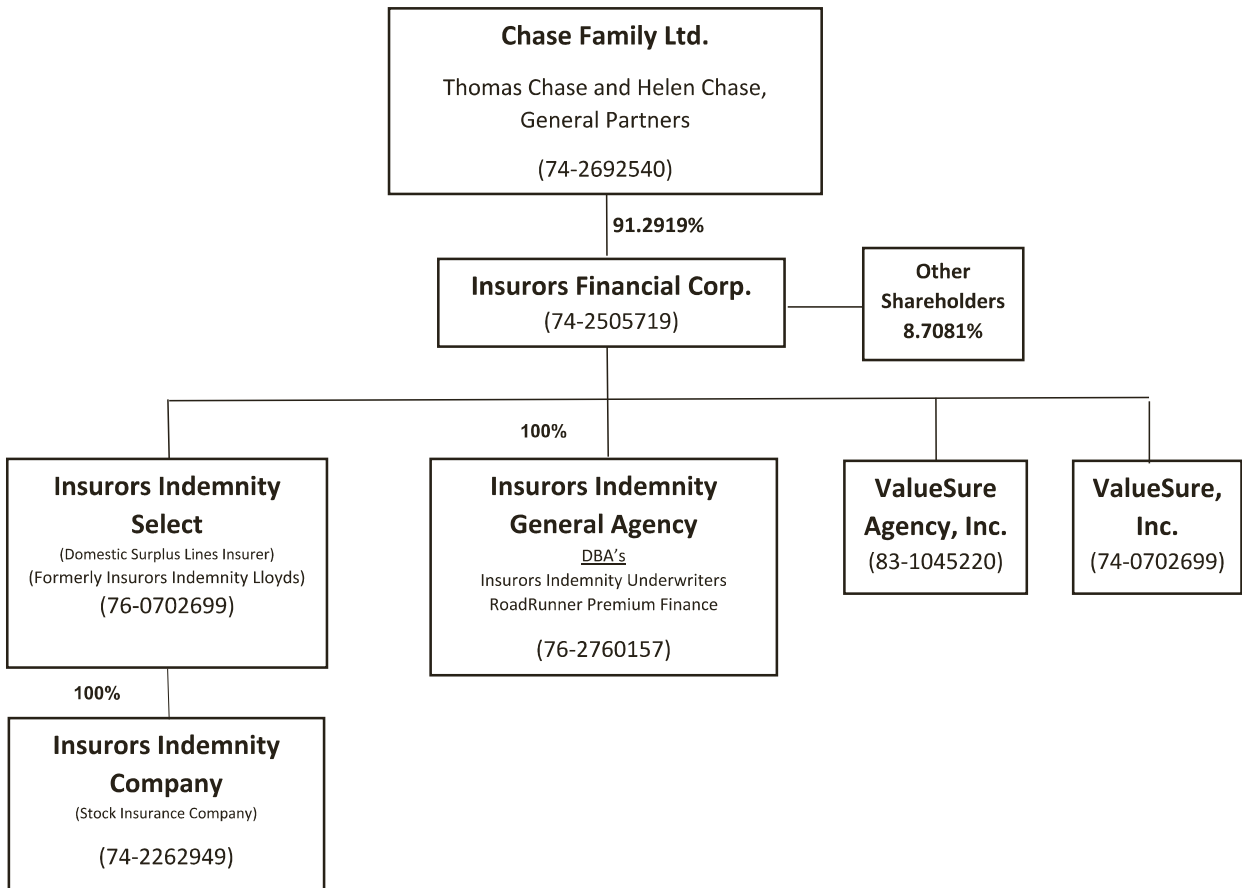
(a) Active Status Counts:  
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....1 R - Registered - Non-domiciled RRGs.....0  
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI).....0 Q - Qualified - Qualified or accredited reinsurer.....0  
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus business in the state .....56  
lines in the state of domicile.....0  
(b) Explanation of basis of allocation of premiums by states, etc.  
Premiums are allocated based on Direct Written Premiums written in the state location

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

Allocated by States and Territories

		Direct Business Only				
		1	2	3	4	6
States, Etc.		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	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



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

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

Asterisk	Explanation



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

## SCHEDULE Y

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

[illegible]

Schedule Y - Part 3

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES







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

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
APRIL FILING		
28.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
29.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	NO
30.	Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	NO
31.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....	NO
32.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? .....	NO
33.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
34.	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
35.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
36.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
AUGUST FILING		
37.	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.		
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37.		

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 2021 OF THE Insurors Indemnity Select Insurance Company

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

16.	Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	 1 1 4 9 6 2 0 2 1 3 8 5 0 0 0 0 0
17.	Reinsurance Summary Supplemental Filing [Document Identifier 401]	 1 1 4 9 6 2 0 2 1 4 0 1 0 0 0 0 0
18.	Medicare Part D Coverage Supplement [Document Identifier 365]	 1 1 4 9 6 2 0 2 1 3 6 5 0 0 0 0 0
20.	Reinsurance Attestation Supplement [Document Identifier 399]	 1 1 4 9 6 2 0 2 1 3 9 9 0 0 0 0 0
21.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 1 4 9 6 2 0 2 1 4 0 0 0 0 0 0 0
22.	Bail Bond Supplement [Document Identifier 500]	 1 1 4 9 6 2 0 2 1 5 0 0 0 0 0 0 0
23.	Director and Officer Insurance Coverage Supplement [Document Identifier 505]	 1 1 4 9 6 2 0 2 1 5 0 5 0 0 0 0 0
24.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 1 1 4 9 6 2 0 2 1 2 2 4 0 0 0 0 0
25.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 1 1 4 9 6 2 0 2 1 2 2 5 0 0 0 0 0
26.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 1 1 4 9 6 2 0 2 1 2 2 6 0 0 0 0 0
27.	Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]	 1 1 4 9 6 2 0 2 1 5 5 5 0 0 0 0 0
28.	Credit Insurance Experience Exhibit [Document Identifier 230]	 1 1 4 9 6 2 0 2 1 2 3 0 0 0 0 0 0
29.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 1 1 4 9 6 2 0 2 1 3 0 6 0 0 0 0 0
30.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 1 1 4 9 6 2 0 2 1 2 1 0 0 0 0 0 0
31.	Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]	 1 1 4 9 6 2 0 2 1 2 1 6 0 0 0 0 0
32.	Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]	 1 1 4 9 6 2 0 2 1 2 1 7 0 0 0 0 0
33.	Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]	 1 1 4 9 6 2 0 2 1 5 5 0 0 0 0 0 0
34.	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 1 1 4 9 6 2 0 2 1 2 9 0 0 0 0 0 0
35.	Private Flood Insurance Supplement [Document Identifier 560]	 1 1 4 9 6 2 0 2 1 5 6 0 0 0 0 0 0
36.	Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]	 1 1 4 9 6 2 0 2 1 5 6 5 0 0 0 0 0
37.	Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]	 1 1 4 9 6 2 0 2 1 2 2 3 0 0 0 0 0

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**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 .....	0	0.000			0	0.000
1.02 All other governments .....	0	0.000			0	0.000
1.03 U.S. states, territories and possessions, etc. guaranteed .....	51,112	0.143	51,112		51,112	0.143
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed .....	0	0.000			0	0.000
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed .....	15,128	0.042	15,128		15,128	0.042
1.06 Industrial and miscellaneous .....	1,911,000	5.347	1,911,000		1,911,000	5.347
1.07 Hybrid securities .....	0	0.000			0	0.000
1.08 Parent, subsidiaries and affiliates .....	0	0.000			0	0.000
1.09 SVO identified funds .....	0	0.000			0	0.000
1.10 Unaffiliated Bank loans .....	0	0.000			0	0.000
1.11 Total long-term bonds .....	1,977,240	5.532	1,977,240	0	1,977,240	5.532
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated) .....	0	0.000			0	0.000
2.02 Parent, subsidiaries and affiliates .....	0	0.000			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	0.000
3.02 Industrial and miscellaneous Other (Unaffiliated) .....	0	0.000			0	0.000
3.03 Parent, subsidiaries and affiliates Publicly traded .....	0	0.000			0	0.000
3.04 Parent, subsidiaries and affiliates Other .....	32,741,378	91.610	32,741,378		32,741,378	91.610
3.05 Mutual funds .....	0	0.000			0	0.000
3.06 Unit investment trusts .....	0	0.000			0	0.000
3.07 Closed-end funds .....	0	0.000			0	0.000
3.08 Total common stocks .....	32,741,378	91.610	32,741,378	0	32,741,378	91.610
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages .....	0	0.000			0	0.000
4.02 Residential mortgages .....	0	0.000			0	0.000
4.03 Commercial mortgages .....	0	0.000			0	0.000
4.04 Mezzanine real estate loans .....	0	0.000			0	0.000
4.05 Total valuation allowance .....		0.000			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	0.000
5.02 Properties held for production of income .....		0.000	0		0	0.000
5.03 Properties held for sale .....		0.000	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) .....	1,021,405	2.858	1,021,405		1,021,405	2.858
6.02 Cash equivalents (Schedule E, Part 2) .....		0.000	0		0	0.000
6.03 Short-term investments (Schedule DA) .....		0.000	0		0	0.000
6.04 Total cash, cash equivalents and short-term investments .....	1,021,405	2.858	1,021,405	0	1,021,405	2.858
7. Contract loans .....	0	0.000	0		0	0.000
8. Derivatives (Schedule DB) .....	0	0.000	0		0	0.000
9. Other invested assets (Schedule BA) .....	0	0.000	0		0	0.000
10. Receivables for securities .....	0	0.000	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	0.000
13. Total invested assets	35,740,023	100.000	35,740,023	0	35,740,023	100.000

Schedule A - Verification - Real Estate

**N O N E**

Schedule B - Verification - Mortgage Loans

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2021 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 .....	1,985,052
2.	Cost of bonds and stocks acquired, Part 3, Column 7 .....	27,238,625
3.	Accrual of discount .....	0
4.	Unrealized valuation increase (decrease):	
	4.1. Part 1, Column 12 .....	(2,210)
	4.2. Part 2, Section 1, Column 15 .....	
	4.3. Part 2, Section 2, Column 13 .....	5,502,753
	4.4. Part 4, Column 11 .....	0
		5,500,543
5.	Total gain (loss) on disposals, Part 4, Column 19 .....	0
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7 .....	5,010
7.	Deduct amortization of premium .....	592
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) .....	34,718,618
12.	Deduct total nonadmitted amounts .....	0
13.	Statement value at end of current period (Line 11 minus Line 12) .....	34,718,618



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	1. United States .....	0	0	0	0
Governments (Including all obligations guaranteed by governments)	2. Canada .....				
	3. Other Countries				
	4. Totals	0	0	0	0
U.S. States, Territories and Possessions (Direct and guaranteed)					
	5. Totals	51,112	51,112	50,000	50,000
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)					
	6. Totals	0	0	0	0
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	15,128	15,128	111,813	13,948
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans and Hybrid Securities (unaffiliated)	8. United States .....	1,911,000	1,968,162	1,911,000	1,911,000
	9. Canada .....				
	10. Other Countries				
	11. Totals	1,911,000	1,968,162	1,911,000	1,911,000
Parent, Subsidiaries and Affiliates	12. Totals	0	0	0	0
	13. Total Bonds	1,977,240	2,034,402	2,072,813	1,974,948
PREFERRED STOCKS	14. United States .....				
Industrial and Miscellaneous (unaffiliated)	15. Canada .....				
	16. Other Countries				
	17. Totals	0	0	0	
Parent, Subsidiaries and Affiliates	18. Totals	0	0	0	
	19. Total Preferred Stocks	0	0	0	
COMMON STOCKS	20. United States .....				
Industrial and Miscellaneous (unaffiliated)	21. Canada .....				
	22. Other Countries				
	23. Totals	0	0	0	
Parent, Subsidiaries and Affiliates	24. Totals	32,741,378	32,741,378	27,238,625	
	25. Total Common Stocks	32,741,378	32,741,378	27,238,625	
	26. Total Stocks	32,741,378	32,741,378	27,238,625	
	27. Total Bonds and Stocks	34,718,618	34,775,780	29,311,438	

ANNUAL STATEMENT FOR THE YEAR 2021 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 11.7	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 .....						XXX	0	0.0	0	0.0		0
1.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
1.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
1.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
1.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
1.6 NAIC 6 .....						XXX	0	0.0	0	0.0		0
1.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2. All Other Governments												
2.1 NAIC 1 .....						XXX	0	0.0	0	0.0		0
2.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
2.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
2.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
2.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
2.6 NAIC 6 .....						XXX	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 .....	51,112					XXX	51,112	2.6	52,947	2.0	51,112	0
3.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
3.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
3.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
3.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
3.6 NAIC 6 .....						XXX	0	0.0	0	0.0		0
3.7 Totals	51,112	0	0	0	0	XXX	51,112	2.6	52,947	2.0	51,112	0
4. U.S. Political Subdivisions of States, Territories and Possessions , Guaranteed												
4.1 NAIC 1 .....						XXX	0	0.0	0	0.0		0
4.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
4.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
4.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
4.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
4.6 NAIC 6 .....						XXX	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 .....		15,128				XXX	15,128	0.8	21,105	0.8	15,128	0
5.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
5.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
5.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
5.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
5.6 NAIC 6 .....						XXX	0	0.0	0	0.0		0
5.7 Totals	0	15,128	0	0	0	XXX	15,128	0.8	21,105	0.8	15,128	0

ANNUAL STATEMENT FOR THE YEAR 2021 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 11.7	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 .....	766,000	1,145,000				XXX	1,911,000	96.6	2,530,000	97.2	1,911,000	0
6.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
6.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
6.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
6.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
6.6 NAIC 6 .....						XXX	0	0.0	0	0.0		0
6.7 Totals	766,000	1,145,000	0	0	0	XXX	1,911,000	96.6	2,530,000	97.2	1,911,000	0
7. Hybrid Securities												
7.1 NAIC 1 .....						XXX	0	0.0	0	0.0		0
7.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
7.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
7.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
7.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
7.6 NAIC 6 .....						XXX	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 .....						XXX	0	0.0	0	0.0		0
8.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
8.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
8.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
8.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
8.6 NAIC 6 .....						XXX	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
9.2 NAIC 2 .....	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.3 NAIC 3 .....	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.4 NAIC 4 .....	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.5 NAIC 5 .....	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0		0
9.6 NAIC 6 .....	XXX	XXX	XXX	XXX	XXX		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 .....						XXX	0	0.0	0	0.0		0
10.2 NAIC 2 .....						XXX	0	0.0	0	0.0		0
10.3 NAIC 3 .....						XXX	0	0.0	0	0.0		0
10.4 NAIC 4 .....						XXX	0	0.0	0	0.0		0
10.5 NAIC 5 .....						XXX	0	0.0	0	0.0		0
10.6 NAIC 6 .....						XXX	0	0.0	0	0.0		0
10.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 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 11.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
11. Total Bonds Current Year												
11.1 NAIC 1 .....	(d) 817,112	1,160,128	0	0	0	0	1,977,240	100.0	XXX	XXX	1,977,240	0
11.2 NAIC 2 .....	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
11.3 NAIC 3 .....	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
11.4 NAIC 4 .....	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
11.5 NAIC 5 .....	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
11.6 NAIC 6 .....	(d) 0	0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
11.7 Totals .....	817,112	1,160,128	0	0	0	0	(b) 1,977,240	100.0	XXX	XXX	1,977,240	0
11.8 Line 11.7 as a % of Col. 7	41.3	58.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
12. Total Bonds Prior Year												
12.1 NAIC 1 .....	619,000	1,985,052	0	0	0	0	XXX	XXX	2,604,052	100.0	2,604,052	0
12.2 NAIC 2 .....	0	0	0	0	0	0	XXX	XXX	0	0.0	0	0
12.3 NAIC 3 .....	0	0	0	0	0	0	XXX	XXX	0	0.0	0	0
12.4 NAIC 4 .....	0	0	0	0	0	0	XXX	XXX	0	0.0	0	0
12.5 NAIC 5 .....	0	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
12.6 NAIC 6 .....	0	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
12.7 Totals .....	619,000	1,985,052	0	0	0	0	XXX	XXX	(b) 2,604,052	100.0	2,604,052	0
12.8 Line 12.7 as a % of Col. 9	23.8	76.2	0.0	0.0	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
13. Total Publicly Traded Bonds												
13.1 NAIC 1 .....	817,112	1,160,128					1,977,240	100.0	2,604,052	100.0	1,977,240	XXX
13.2 NAIC 2 .....							0	0.0	0	0.0	0	XXX
13.3 NAIC 3 .....							0	0.0	0	0.0	0	XXX
13.4 NAIC 4 .....							0	0.0	0	0.0	0	XXX
13.5 NAIC 5 .....							0	0.0	0	0.0	0	XXX
13.6 NAIC 6 .....							0	0.0	0	0.0	0	XXX
13.7 Totals .....	817,112	1,160,128	0	0	0	0	1,977,240	100.0	2,604,052	100.0	1,977,240	XXX
13.8 Line 13.7 as a % of Col. 7	41.3	58.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13.9 Line 13.7 as a % of Line 11.7, Col. 7, Section 11	41.3	58.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
14. Total Privately Placed Bonds												
14.1 NAIC 1 .....	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
14.2 NAIC 2 .....	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
14.3 NAIC 3 .....	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
14.4 NAIC 4 .....	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
14.5 NAIC 5 .....	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
14.6 NAIC 6 .....	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
14.7 Totals .....	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
14.8 Line 14.7 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
14.9 Line 14.7 as a % of Line 11.7, Col. 7, Section 11	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

(a) Includes \$ \_\_\_\_\_ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ \_\_\_\_\_ current year of bonds with Z designations and \$ \_\_\_\_\_ 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 \$ \_\_\_\_\_ current year, \$ \_\_\_\_\_ prior year of bonds with 5GI designations and \$ \_\_\_\_\_ current year, \$ \_\_\_\_\_ 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 \$ \_\_\_\_\_ ; NAIC 2 \$ \_\_\_\_\_ ; NAIC 3 \$ \_\_\_\_\_ ; NAIC 4 \$ \_\_\_\_\_ ; NAIC 5 \$ \_\_\_\_\_ ; NAIC 6 \$ \_\_\_\_\_

ANNUAL STATEMENT FOR THE YEAR 2021 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 11.08	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 .....						XXX	0	0.0	0	0.0		0
1.02 Residential Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
1.03 Commercial Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
1.04 Other Loan-Backed and Structured Securities .....						XXX	0	0.0	0	0.0		0
1.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2. All Other Governments												
2.01 Issuer Obligations .....						XXX	0	0.0	0	0.0		0
2.02 Residential Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
2.03 Commercial Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
2.04 Other Loan-Backed and Structured Securities .....						XXX	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 .....	51,112					XXX	51,112	2.6	52,947	2.0	51,112	0
3.02 Residential Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
3.03 Commercial Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
3.04 Other Loan-Backed and Structured Securities .....						XXX	0	0.0	0	0.0		0
3.05 Totals	51,112	0	0	0	0	XXX	51,112	2.6	52,947	2.0	51,112	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01 Issuer Obligations .....						XXX	0	0.0	0	0.0		0
4.02 Residential Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
4.03 Commercial Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
4.04 Other Loan-Backed and Structured Securities .....						XXX	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 .....		15,128				XXX	15,128	0.8	21,105	0.8	15,128	0
5.02 Residential Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
5.03 Commercial Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
5.04 Other Loan-Backed and Structured Securities .....						XXX	0	0.0	0	0.0		0
5.05 Totals	0	15,128	0	0	0	XXX	15,128	0.8	21,105	0.8	15,128	0
6. Industrial and Miscellaneous												
6.01 Issuer Obligations .....	766,000	1,145,000				XXX	1,911,000	96.6	2,530,000	97.2	1,911,000	0
6.02 Residential Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
6.03 Commercial Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
6.04 Other Loan-Backed and Structured Securities .....						XXX	0	0.0	0	0.0		0
6.05 Totals	766,000	1,145,000	0	0	0	XXX	1,911,000	96.6	2,530,000	97.2	1,911,000	0
7. Hybrid Securities												
7.01 Issuer Obligations .....						XXX	0	0.0	0	0.0		0
7.02 Residential Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
7.03 Commercial Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
7.04 Other Loan-Backed and Structured Securities .....						XXX	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 .....						XXX	0	0.0	0	0.0		0
8.02 Residential Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
8.03 Commercial Mortgage-Backed Securities .....						XXX	0	0.0	0	0.0		0
8.04 Other Loan-Backed and Structured Securities .....						XXX	0	0.0	0	0.0		0
8.05 Affiliated Bank Loans - Issued .....						XXX	0	0.0	0	0.0		0
8.06 Affiliated Bank Loans - Acquired .....						XXX	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 2021 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

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 11.08	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 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
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued						XXX	0	0.0	0	0.0		0
10.02 Unaffiliated Bank Loans - Acquired						XXX	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. Total Bonds Current Year												
11.01 Issuer Obligations	817,112	1,160,128	0	0	0	XXX	1,977,240	100.0	XXX	XXX	1,977,240	0
11.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
11.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.08 Totals	817,112	1,160,128	0	0	0	0	1,977,240	100.0	XXX	XXX	1,977,240	0
11.09 Line 11.08 as a % of Col. 7	41.3	58.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
12. Total Bonds Prior Year												
12.01 Issuer Obligations	619,000	1,985,052	0	0	0	XXX	XXX	XXX	2,604,052	100.0	2,604,052	0
12.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
12.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
12.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	0	0.0	0	0
12.06 Affiliated Bank Loans	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
12.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
12.08 Totals	619,000	1,985,052	0	0	0	0	XXX	XXX	2,604,052	100.0	2,604,052	0
12.09 Line 12.08 as a % of Col. 9	23.8	76.2	0.0	0.0	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
13. Total Publicly Traded Bonds												
13.01 Issuer Obligations	817,112	1,160,128				XXX	1,977,240	100.0	2,604,052	100.0	1,977,240	XXX
13.02 Residential Mortgage-Backed Securities						XXX	0	0.0	0	0.0	0	XXX
13.03 Commercial Mortgage-Backed Securities						XXX	0	0.0	0	0.0	0	XXX
13.04 Other Loan-Backed and Structured Securities						XXX	0	0.0	0	0.0	0	XXX
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0	0	XXX
13.06 Affiliated Bank Loans						XXX	0	0.0	0	0.0	0	XXX
13.07 Unaffiliated Bank Loans						XXX	0	0.0	0	0.0	0	XXX
13.08 Totals	817,112	1,160,128	0	0	0	0	1,977,240	100.0	2,604,052	100.0	1,977,240	XXX
13.09 Line 13.08 as a % of Col. 7	41.3	58.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
13.10 Line 13.08 as a % of Line 11.08, Col. 7, Section 11	41.3	58.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
14. Total Privately Placed Bonds												
14.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	XXX	0
14.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.08 Totals	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
14.09 Line 14.08 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
14.10 Line 14.08 as a % of Line 11.08, Col. 7, Section 11	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

Schedule DA - Verification - Short-Term Investments

**N O N E**

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 2021 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 .....	619,000	619,000	0	0
2. Cost of cash equivalents 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 .....	619,000	619,000		
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	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

(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 2021 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 Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization) 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
0599999. Total - U.S. Government Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
1099999. Total - All Other Government Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
270083-G3-6	JEANES TX ISD REF SER B OBLIG				1.	50,000	102.2200	51,112	50,000	51,112	(1,835)				4.000	4.000	FA	661	2,000	07/28/2015	08/01/2022
1199999. Subtotal - Bonds - U.S. States, Territories and Possessions - Issuer Obligations						50,000	XXX	51,112	50,000	51,112	(1,835)	0	0	0	XXX	XXX	XXX	661	2,000	XXX	XXX
1799999. Total - U.S. States, Territories and Possessions Bonds						50,000	XXX	51,112	50,000	51,112	(1,835)	0	0	0	XXX	XXX	XXX	661	2,000	XXX	XXX
2499999. Total - U.S. Political Subdivisions Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
38374L-RZ-6	GNMA 2005-56 JA				1.	111,813		15,128	13,948	15,128	(375)	(592)			5.000	5.000	MON		829	02/01/2013	05/17/2035
2599999. Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations						111,813	XXX	15,128	13,948	15,128	(375)	(592)	0	0	XXX	XXX	XXX	0	829	XXX	XXX
3199999. Total - U.S. Special Revenues Bonds						111,813	XXX	15,128	13,948	15,128	(375)	(592)	0	0	XXX	XXX	XXX	0	829	XXX	XXX
140420-V5-6	Capital One Bank USA CD				1.	69,000	100.1800	69,123	69,000	69,000					2.250	2.250	FA	643	1,553	02/01/2017	02/01/2022
000000-00-0	Central National Bank CD				1.	50,000	100.0000	50,000	50,000	50,000					1.490	1.490	FMAN	17	745	02/22/2017	02/22/2022
38147J-C9-1	Goldman Sachs Bk USA NY CD				1.	100,000	101.0300	101,025	100,000	100,000					2.900	2.900	JD	1,450	2,900	05/28/2014	05/31/2022
38148J-VB-4	Goldman Sachs Bank USA NY CD				1.	59,000	100.9200	59,542	59,000	59,000					2.400	2.400	JD	696	1,416	06/03/2015	06/03/2022
02589A-AK-8	AMER EXPR NATL BK SALT LAKE CITY UT CD				1.	100,000	101.3000	101,297	100,000	100,000					3.100	3.100	AO	1,266	3,100	06/12/2018	06/13/2022
02007G-LJ-0	Ally Bk Sandy UT				1.	250,000	101.0400	252,603	250,000	250,000					1.850	1.850	MM	1,169	4,625	08/29/2019	08/29/2022
140420-L3-2	Capital One USA Glen Allen VA CD				1.	138,000	101.0700	139,477	138,000	138,000					1.750	1.750	FA	275	2,415	10/19/2016	10/19/2022
45581E-AR-2	INDUSTRIAL COML BANK CHINA NY CD				1.	250,000	102.5300	256,320	250,000	250,000					2.650	2.650	MON	294	6,625	02/14/2018	02/14/2023
949763-YD-2	Wells Fargo Bk Souix Falls SD				1.	250,000	104.9200	262,293	250,000	250,000					2.950	2.950	MON	348	7,375	03/13/2019	03/13/2024
14042R-NS-6	Capital One NA McLean VA				1.	150,000	102.8500	154,281	150,000	150,000					1.900	1.900	MS	673	2,850	09/05/2019	09/05/2024
73319F-AK-5	Poppy Bk Santa Rosa CA				1.	100,000	100.4600	100,462	100,000	100,000					1.100	1.100	MON	9	1,100	03/27/2020	03/27/2025
17284D-BS-0	Cit Bank Salt Lake City Utah CD				1.	200,000	106.5600	213,114	200,000	200,000					2.950	2.950	JD	2,901	5,900	06/03/2015	06/03/2025
38148J-ZR-5	Goldman Sachs Bk USA NY CD				1.	100,000	107.0600	107,064	100,000	100,000					3.050	3.050	JJ	1,025	3,050	07/29/2015	07/29/2025
254672-TE-8	Discover Bank Greenwood Del CD				1.	95,000	106.9100	101,563	95,000	95,000					3.000	3.000	FA	910	2,850	08/05/2015	08/05/2025
3299999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations						1,911,000	XXX	1,968,162	1,911,000	1,911,000	0	0	0	0	XXX	XXX	XXX	11,676	46,503	XXX	XXX
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						1,911,000	XXX	1,968,162	1,911,000	1,911,000	0	0	0	0	XXX	XXX	XXX	11,676	46,503	XXX	XXX
4899999. Total - Hybrid Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
5599999. Total - Parent, Subsidiaries and Affiliates Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
6599999. Subtotal - Unaffiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
7699999. Total - Issuer Obligations						2,072,813	XXX	2,034,402	1,974,948	1,977,240	(2,210)	(592)	0	0	XXX	XXX	XXX	12,337	49,332	XXX	XXX
7799999. Total - Residential Mortgage-Backed Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
7899999. Total - Commercial Mortgage-Backed Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
7999999. Total - Other Loan-Backed and Structured Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
8099999. Total - SVO Identified Funds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
8199999. Total - Affiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
8299999. Total - Unaffiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
8399999 - Total Bonds						2,072,813	XXX	2,034,402	1,974,948	1,977,240	(2,210)	(592)	0	0	XXX	XXX	XXX	12,337	49,332	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

Line Number	Book/Adjusted Carrying Value by NAIC Designation Category Footnote:									
1A	1A ..\$ .....	1,977,240	1B ..\$ .....	0	1C ..\$ .....	0	1D ..\$ .....	0	1E ..\$ .....	0
1B	2A ..\$ .....	0	2B ..\$ .....	0	2C ..\$ .....	0	1F ..\$ .....	0	1G ..\$ .....	0
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]

1. Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:								
Number								
1A	1A ...\$ .....	0	1B ...\$ .....	0	1C ...\$ .....	0	1D ...\$ .....	0
1B	2A ...\$ .....	0	2B ...\$ .....	0	2C ...\$ .....	0	1E ...\$ .....	0
1C	3A ...\$ .....	0	3B ...\$ .....	0	3C ...\$ .....	0	1F ...\$ .....	0
1D	4A ...\$ .....	0	4B ...\$ .....	0	4C ...\$ .....	0		
1E	5A ...\$ .....	0	5B ...\$ .....	0	5C ...\$ .....	0		
1F	6 .... \$ .....	0						

# ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

## SCHEDULE D - PART 3

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

[illegible]

# ANNUAL STATEMENT FOR THE YEAR 2021 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 Identifi- cation	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	GNMA 2005-56 JA		12/25/2021	PAY DOWN OF SECURITY		5,010	5,010	5,010	5,010		0		0		5,010		0	0	0	.05/17/2035	
31999999. Subtotal - Bonds - U.S. Special Revenues						5,010	5,010	5,010	5,010	0	0	0	0	0	5,010	0	0	0	0	0	XXX
83999997. Total - Bonds - Part 4						5,010	5,010	5,010	5,010	0	0	0	0	0	5,010	0	0	0	0	0	XXX
83999998. Total - Bonds - Part 5																				XXX	
83999999. Total - Bonds						5,010	5,010	5,010	5,010	0	0	0	0	0	5,010	0	0	0	0	0	XXX
89999997. Total - Preferred Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
89999998. Total - Preferred Stocks - Part 5							XXX													XXX	
89999999. Total - Preferred Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
97999997. Total - Common Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
97999998. Total - Common Stocks - Part 5							XXX													XXX	
97999999. Total - Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
98999999. Total - Preferred and Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	
99999999 - Totals						5,010	XXX	5,010	5,010	0	0	0	0	0	5,010	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 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

1	2	3	4	5	6	7	8	9	10	11	Change in Book/Adjusted Carrying Value					17	18	19	20	21
											12	13	14	15	16					
CUSIP Identi- fication	Description	For- eign	Date Acquired	Name of Vendor	Disposal Date	Name of Purchaser	Par Value (Bonds) or Number of Shares (Stock)	Actual Cost	Consid- eration	Book/ Adjusted Carrying Value at Disposal	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amort- ization)/ Accretion	Current Year's Other- Than- Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Valu (12 + 13 - 14)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Interest and Dividends Received During Year	Paid for Accrued Interest and Dividends
NONE																				



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

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

[illegible]

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	*
HILLTOP CUSTODIAN ACCOUNT ..... WACO, TX .....		0.010	.72		683,705	XXX
CENTRAL NATIONAL BANK OPERATING ..... WACO, TX .....		0.100	.13		76,014	XXX
CENTRAL NATIONAL BANK ATLAS OPERATING ..... WACO, TX .....		0.100	.11		2,352	XXX
CENTRAL NATIONAL BANK PREMIUM ..... WACO, TX .....		0.100			259,334	XXX
0199998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - open depositories	XXX	XXX				XXX
0199999. Totals - Open Depositories	XXX	XXX	96	0	1,021,405	XXX
0299998 Deposits in ... depositories which 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	XXX
0399999. Total Cash on Deposit	XXX	XXX	96	0	1,021,405	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX		XXX
.....						
.....						
.....						
.....						
.....						
.....						
.....						
.....						
0599999 Total - Cash	XXX	XXX	96	0	1,021,405	XXX

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

1. January.....	100,789	4. April.....	110,549	7. July.....	464,593	10. October.....	1,199,626
2. February.....	108,896	5. May.....	154,130	8. August.....	934,280	11. November.....	1,202,863
3. March.....	106,183	6. June.....	269,591	9. September.....	1,105,094	12. December.....	1,021,405

Schedule E - Part 2 - Cash Equivalents Owned

**N O N E**

Schedule E - Part 3 - Special Deposits

**N O N E**

**STATEMENT OF ACTUARIAL OPINION**  
**for**  
**INSURORS INDEMNITY SELECT INSURANCE COMPANY**  
**as of**  
**DECEMBER 31, 2021**

**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 1, 2021 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, 2021, and reviewed information provided to me through February 4, 2022. 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 Mr. Joe Brooks, CFO of 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 for all unpaid loss and loss adjustment expense obligations of the Company under the terms of its contracts and agreements.

This Opinion is for reserves for loss and loss adjustment expense combined.

**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 did write a small amount of a small amount of residential property business in the Texas surplus lines market. Only nine claims have been reported and all are closed at 12/31/2021. 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 no open claims from business written in 2021, 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.

I have reviewed any potential impacts of the Covid-19 pandemic on the Company's operations. Because all outstanding loss and loss adjustment expense liabilities of the Company as of 10/31/2020 were assumed by Insurors Indemnity Company, I do not believe the pandemic has had any material effect on the Company's operations.

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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February 21, 2022



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)	\$30,000
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)	\$0
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)  | \$35,706,315 |          |         |
| 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<br>9.1 Nontabular Discount [Notes, Line 32B23, (Amounts 1,2,3,&4)],<br>Electronic Filing Cols 1,2,3,&4,<br>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          |          |         |

# SUPPLEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

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.

SUPPLEMENT FOR THE YEAR 2021 OF THE Insurors Indemnity Select Insurance Company

**Exhibit A: SCOPE**

1  
Amount

Loss and Loss Adjustment Expense Reserves:

1. Unpaid Losses (Liabilities, Surplus and Other Funds page, Col. 1, Line 1) ..... 30,000
2. Unpaid Loss Adjustment Expenses (Liabilities, Surplus and Other Funds page, Col. 1, Line 3) .....
3. Unpaid Losses - Direct and Assumed (Should equal Schedule P, Part 1, Totals from Cols. 13 and 15, Line 12 \* 1000) .....
4. Unpaid Loss Adjustment Expenses - Direct and Assumed (Should equal Schedule P, Part 1, Totals from Cols. 17, 19 and 21, Line 12 \* 1000) .....
5. The Page 3 write-in item reserve, "Retroactive Reinsurance Reserve Assumed" .....
6. Other Loss Reserve items on which the Appointed Actuary is expressing an Opinion (list separately, adding additional lines as needed)

1  
Amount

Premium Reserves:

7. Reserve for Direct and Assumed Unearned Premiums for P&C Long Duration Contracts .....
8. Reserve for Net Unearned Premiums for P&C Long Duration Contracts .....
9. Other Premium Reserve items on which the Appointed Actuary is expressing an Opinion (list separately, adding additional lines as needed)

SUPPLEMENT FOR THE YEAR 2021 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) .....

35,706,315

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) .....

0

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 .....

0

9.2 Tabular Discount [Notes, Line 32A23, (Amounts 1 & 2)], Electronic Filing Col 1 & 2 .....

0

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. ....

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 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 .....

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 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 .....

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 "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.