# **QUARTERLY STATEMENT**

**OF THE** 

**Insurors Indemnity Select Insurance Company** 

TO THE

**Insurance Department** 

**OF THE** 

**STATE OF** 

Texas

FOR THE QUARTER ENDED SEPTEMBER 30, 2022

PROPERTY AND CASUALTY

2022



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2022 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

Organized under the Laws of	(Current) (Prior) Texas		, State of Domicile or Port of Er	ntry	TX
		United States			
Country of Domicile		Offited States	Commenced Business		05/01/2003
Incorporated/Organized	08/12/2002		Commenced Business		
Statutory Home Office	225 South Fifth Stre (Street and Numbe		(City or T	Waco, TX, US 7 Fown, State, Countr	
50 V 222	(Olisoi alla Mallia)	donessamment			The state of the s
Main Administrative Office		225 South F (Street and			
	Waco, TX, US 76701	,		254-759-372	
(City or To	own, State, Country and Zip Code)		(Are	ea Code) (Telephor	ie Number)
Mail Address	P.O. Box 32577			Waco, TX, US 7	
	(Street and Number or P.O. Bo	ox)	(City or I	Fown, State, Countr	y and Zip Code)
Primary Location of Books and R	ecords	225 South (Street and	Fifth Street		
	Waco, TX, US 76701	(Street and		254-759-372	
(City or To	own, State, Country and Zip Code)	j	(Are	ea Code) (Telephor	e Number)
Internet Website Address		www.insurorsi	ndemnity.com		
Statutory Statement Contact	Tammy Tie	eperman		254-759	-3727
	(Nam	-d		(Area Code) (Tele	
Ttjepe	rman@insurorsindemnity.com (E-mail Address)		-	254-754-137 (FAX Numbe	
	A= 111-01 110-010-01				
8 80 8955	D	OFFIC		Th	omas G Chase Jr.
President & CEO Secretary			rieasurer		Sillas & Gillase Gr.
Scoretary					
Somers W Goodman	. Vice President	OTH Rhett Dawson,	Vice President	Michae	Vieregg, Vice President
Tammy Tieperman,		Erick Alford Morela	nd #, Vice President		
		DIRECTORS O			
Dave E To William R			G Chase Jr A Nesbitt		elicia C Goodman Lyndon L Olson
Thomas Georg		7,111,2111			
State of	Texas	SS:			
County of	McLennan	See all			
all of the herein described asset statement, together with related i condition and affairs of the said r in accordance with the NAIC An rules or regulations require diff cascallusts. Extended the	is were the absolute property of the exhibits, schedules and explanation reporting entity as of the reporting nual Statement Instructions and Afferences in reporting not related cope of this attestation by the determined in the explanation of the explanation of the exhibits and the explanation of the explanation of the explanation of the explanation of the exhibits and exhibits a series of the exhibits and ex	he said reporting entity ns therein contained, an period stated above, an occounting Practices an to accounting practice perihed officers also inco-	, free and clear from any liens on nexed or referred to, is a full an id of its income and deductions to development of the procedures manual except to es and procedures, according to tudes the related corresponding ment. The electronic filing may to	or claims thereon, id true statement of herefrom for the pe the extent that: (1) to the best of thei electronic filing with	ton the reporting period stated above, except as herein stated, and that this all the assets and liabilities and of the riod ended, and have been completed state law may differ; or, (2) that state r information, knowledge and belief, the NAIC, when required, that is an lous regulators in lieu of or in addition.  Thomas G. Chase, Jr.
President & CE		Secre	700		Treasurer
Subscribed and sworn to before day of	November, 2  Novem	NE WASDEN 0 # 13397382-3 mission Expires -30-2026	a. Is this an original filing? b. If no, 1. State the amendmen 2. Date filed 3. Number of pages att	nt number	Yes [ X ] No [ ]

# **ASSETS**

		Current Statement Date		4	
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	2,117,443	Tronadimited / toolio		1,977,240
		2,117,440		2,117,440	1,077,240
2.	Stocks:			0	0
	2.1 Preferred stocks				
	2.2 Common stocks	29,004,004		29,004,004	32,741,376
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens.			0	0
4.	Real estate:				
	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 (\$				
0.	(\$				
		1 007 450		1 007 450	1 001 405
	investments (\$				
6.	Contract loans (including \$ premium notes)				0
7.	Derivatives				0
8.	Other invested assets				0
9.	Receivables for securities				0
10.	Securities lending reinvested collateral assets			0	0
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	32,929,766	0	32,929,766	35,740,023
13.	Title plants less \$ charged off (for Title insurers				
	only)			0	0
14.	Investment income due and accrued				12,338
15.	Premiums and considerations:	,		ŕ	,
	15.1 Uncollected premiums and agents' balances in the course of collection	337 851		337,851	293 037
	15.2 Deferred premiums, agents' balances and installments booked but				200,007
	deferred and not yet due (including \$				
	, Company of the comp			0	0
	earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$			_	
	contracts subject to redetermination (\$			0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	9,201		·	6,059
	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
	Receivables from parent, subsidiaries and affiliates			0	0
23.	•				
24.	Health care (\$				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)	33 284 370	0	33,284,370	36 051 457
27	From Separate Accounts, Segregated Accounts and Protected Cell				
21.	Accounts			0	0
28.	Total (Lines 26 and 27)	33,284,370	0	33,284,370	36,051,457
	DETAILS OF WRITE-INS				
1101.					
1101.					
1103.	0				
1198.	Summary of remaining write-ins for Line 11 from overflow page			0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.					
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	0

# LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Statement Date	2 December 31, Prior Year
1.	Losses (current accident year \$)		
2.	Reinsurance payable on paid losses and loss adjustment expenses		0
3.	Loss adjustment expenses		
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		(8,488)
7.1	Current federal and foreign income taxes (including \$ on realized capital gains (losses))	63,643	70,613
7.2	Net deferred tax liability		
8.	Borrowed money \$ and interest thereon \$		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ and		
	including warranty reserves of \$ and accrued accident and health experience rating refunds		
	including \$0 for medical loss ratio rebate per the Public Health Service Act)		
10.	Advance premium	37,507	18,891
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)	221,926	257,557
13.	Funds held by company under reinsurance treaties		0
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$ certified)		0
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates	31,945	6,569
20.	Derivatives		0
21.	Payable for securities		
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$ and interest thereon \$		
25.	Aggregate write-ins for liabilities	0	0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	591,778	345,142
27.	Protected cell liabilities	, i	,
28.	Total liabilities (Lines 26 and 27)		345 142
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock		
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)	, , ,	
		2,930,901	
36.	Less treasury stock, at cost:		
	36.1 shares common (value included in Line 30 \$ )		
07			2E 70e 04F
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)		35,706,315
38.	Totals (Page 2, Line 28, Col. 3)	33,284,370	36,051,457
050:	DETAILS OF WRITE-INS		
2501.			
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0
2902.		-	
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201.	Guaranty Fund		0
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page	0	0
3299.	Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

# **STATEMENT OF INCOME**

		1 Current	2 Prior Year	3 Prior Year Ended
	UNDERWRITING INCOME	Year to Date	to Date	December 31
1.	Premiums earned: 1.1 Direct (written \$1,465,854 )	1.319.779	297.618	616.026
	1.2 Assumed (written \$)			0
	1.3 Ceded (written \$1,465,854 )			
	1.4 Net (written \$	0	0	0
2.	Losses incurred (current accident year \$):			
	2.1 Direct		·	
	2.2 Assumed			
	2.4 Net			
3.	Loss adjustment expenses incurred			
4.	Other underwriting expenses incurred	(118,830)	(174,847)	(270,562)
5. 6.	Aggregate write-ins for underwriting deductions  Total underwriting deductions (Lines 2 through 5)	(118.830)	(174.847)	(270.562)
7.	Net income of protected cells			
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	118,830	174,847	270,562
9.	INVESTMENT INCOME  Net investment income earned	3/ 036	45,334	62,186
10.	Net realized capital gains (losses) less capital gains tax of \$		40,004	02,100
11.	Net investment gain (loss) (Lines 9 + 10)		45,334	62,186
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered  \$	_	ا ۱	0
13.	Finance and service charges not included in premiums			3,512
14.	Aggregate write-ins for miscellaneous income	0	0	0
15.	Total other income (Lines 12 through 14)	3,986	2,268	3,512
16. 17.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	157,545	222,449	336,260
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and	457.545	000 440	000 000
19.	foreign income taxes (Line 16 minus Line 17)	33,030	222,449 46,294	336,260
20.	Net income (Line 18 minus Line 19)(to Line 22)	124,515	176,155	265,647
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year	35,706,315	2,701,500	2,701,500
22. 23.	Net income (from Line 20)			265,647
24.	Change in net unrealized capital gains (losses) less capital gains tax of \$			
25.	Change in net unrealized foreign exchange capital gain (loss)			
26. 27.	Change in net deferred income tax			
28.	Change in provision for reinsurance			0
29.	Change in surplus notes			
30.	Surplus (contributed to) withdrawn from protected cells			
31. 32.	Cumulative effect of changes in accounting principles			
02.	32.1 Paid in			
	32.2 Transferred from surplus (Stock Dividend)		2,500,000	2,500,000
33.	32.3 Transferred to surplus			
33.	33.1 Paid in	0	27,238,625	27,238,625
	33.2 Transferred to capital (Stock Dividend)			(2,500,000)
24	33.3 Transferred from capital			
34. 35.	Net remittances from or (to) Home Office			
36.	Change in treasury stock			0
37.	Aggregate write-ins for gains and losses in surplus		0	0
38.	Change in surplus as regards policyholders (Lines 22 through 37)	(3,013,723) 32,692,592	29,667,214 32,368,714	33,004,815
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)  DETAILS OF WRITE-INS	32,092,392	32,300,714	35,706,315
0501.	DETAILS OF WAIT-ING			
0502.				
0503. 0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599.	Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1401.				
1402.				
1403. 1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
3701.				
3702. 3703.				
3798.	Summary of remaining write-ins for Line 37 from overflow page		0	0
3799.	Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	0	0

# **CASH FLOW**

	CASH FLOW	1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	(61,829)	285,482	(25,715)
2.	Net investment income	40 , 187	47,966	61,979
3.	Miscellaneous income	2,905	2,268	3,512
4.	Total (Lines 1 to 3)	(18,737)	335,716	39,776
5.	Benefit and loss related payments	3,142	9, 165	6,059
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	(127,318)	(174,847)	(262,074)
8.	Dividends paid to policyholders	0	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	40,000	3,633	3,633
10.	Total (Lines 5 through 9)	(84, 176)	(162,049)	(252,382)
11.	Net cash from operations (Line 4 minus Line 10)	65,439	497,765	292,158
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	817,917	509,166	5,010
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
	12.7 Miscellaneous proceeds	236,757	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,054,674	509, 166	5,010
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	959.435	27.857.625	0
		0		
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	959,435	27,857,625	27,238,625
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	95,239	(27,348,459)	(27,233,615)
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock			29,738,625
	16.3 Borrowed funds			0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		_	0
	16.5 Dividends to stockholders		0	0
	16.6 Other cash provided (applied)	25,376	(505)	(2,493,431)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	25,376	27,238,120	27,245,194
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.		186,054	387,426	303,737
19.	Cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	100,034		000,131
13.		1,021,405	717,668	717,668

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

#### NOTE 1 Summary of Significant Accounting Policies and Going Concern

Accounting Practices

The financial statements of the Company are presented on the basis of accounting practices prescribed by the Texas Department of Insurance

The Texas Department of Insurance recoginzes only statutory accounting practices prescribed or permitted by the State of Texas for determining and reporting the financial condition and results of operations of an insurance company, for determining solvency under the Texas Insurance Law. The current effective version of the NAIC accounting practices and procedures manual has been adopted as a component of SAP. The Commissioner of Insurance has the right to permit specific practices that deviate from prescribed practices.

	SSAP#	F/S Page	F/S Line #	2022	2021
NET INCOME (1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 124,515	\$ 265,647
(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	\$ 124,515	\$ 265,647
SURPLUS (5) State basis (Page 3, Line 37, Columns 1 & 2)	xxx	XXX	XXX	\$ 32,692,592	\$ 35,706,315
(6) State Prescribed Practices that are an increase/(decrease	) from NAIC SA	AP:			
(7) State Permitted Practices that are an increase/(decrease)	from NAIC SAI	P:			
(8) NAIC SAP (5-6-7=8)	XXX	xxx	XXX	\$ 32,692,592	\$ 35,706,315

Use of Estimates in the Preparation of the Financial Statements No significant change

Accounting Policy

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

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

Going Concern

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

#### NOTE 2 Accounting Changes and Corrections of Errors

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

#### NOTE 3 Business Combinations and Goodwill

Statutory Purchase Method

The Company has no Business Combinations and Goodwill

#### NOTE 4 Discontinued Operations

The Company has no disconinued Operations

#### NOTE 5 Investments

- Mortgage Loans, including Mezzanine Real Estate Loans (1) NONE

B.	Debt Restructuring
	NONE

Current Year Prior Year

- Reverse Mortgages C.
  - (1) NONE
- Loan-Backed Securities
  - (1) PREPAYMENT ASSUMPTIONS ARE OBTAINED BY OUR PORTFOLIO MANAGER FROM BROKER DEALER VALUES. THESE ASSUMPTIONS ARE CONSISTANT WITH THE CURRENT INTEREST RATE AND ECONOMIC ENVIRONMENTS.

(2)	OTTI recognized 1st Quarter
	NONE

- (5) No significant change
- Dollar Repurchase Agreements and/or Securities Lending Transactions
  - (1) NONE
- Repurchase Agreements Transactions Accounted for as Secured Borrowing
  - (1) NONE
- Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
  - (1) NONE
- Repurchase Agreements Transactions Accounted for as a Sale

- (1) NONE
- Reverse Repurchase Agreements Transactions Accounted for as a Sale
  - (1) NONE
- J. Real Estate
  - (1) NONE
- Low Income Housing tax Credits (LIHTC)
  - (1) NONE
- Restricted Assets

No significant change

Working Capital Finance Investments

The Company has no working capital finance investments

Offsetting and Netting of Assets and Liabilities

NONE

5GI Securities Ο.

NONE

Short Sales

NONE

Prepayment Penalty and Acceleration Fees Q.

NONE

Reporting Entity's Share of Cash Pool by Asset Type

NONE

Percent Share Asset Type

- (1) Cash
- (2) Cash Equivalents
- (3) Short-Term Investments
- (4) Total

#### NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

No significant change

В. No significant change

# NOTE 7 Investment Income A. No significant change

NOTE 8 Derivative Instruments

NONE

NOTE 9 Income Taxes

No significant change

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

NOTE 11 Debt

NONE

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

Defined Benefit Plan NONE

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

No significant change

#### NOTE 14 Liabilities, Contingencies and Assessments

Contingent Commitments

No significant change

#### NOTE 15 Leases

Lessee Operating Lease:

(1) No significant change

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

NONE

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

Transfers of Receivables Reported as Sales

No significant change

Transfer and Servicing of Financial Assets No significant change

C. Wash Sales

(1) The company has no wash sales to report

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

ASO Plans:

The company does not administer uninsured or partially insured plans.

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

No significant change

Name and Address of Managing Gene 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

(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	\$ -	\$ -	\$ -	\$ -	\$ -

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

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy The Company has no assets / liabilities that are Level 3

(3) The company has no assets / liabilities transferred between levels

(4) Fair values for the company's portfolio are provided by our investment custodian, US Bank. US Bank obtains the fair values from investments from FT Interactive

(5) NONE

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

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)

Not Practicable to Estimate Fair Value

IVOLI	Tacticable to Estimate Fair Value				
	Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation

E. NONE

#### NOTE 21 Other Items

Unusual or Infrequent Items No significant change

В Troubled Debt Restructuring: Debtors NONE

Other Disclosures NONE

D. **Business Interruption Insurance Recoveries** NONE

State Transferable and Non-transferable Tax Credits NONE

Subprime Mortgage Related Risk Exposure F.

G. Insurance-Linked Securities (ILS) Contracts

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

NONE

#### NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:

Subsequent events have been considered for these statutory financial statements through the current period

Type II - Nonrecognized Subsequent Events:

There were no events occuring subsequent to the end of the quarter that merited recognition or disclosure in these statements

Assumed Reinsurance

#### NOTE 23 Reinsurance

Unsecured Reinsurance Recoverables

NONE

Reinsurance Recoverable in Dispute

Reinsurance Assumed and Ceded

(1)

	Premium Commission Reserve Equity		Premium Reserve	Commission	on	Premium Reserve	Commission Equity		
a. Affiliates	 			\$ 1,404,216			\$ (1,404,216)	\$	-
b. All Other							\$ -	\$	-
c. Total	\$ -	\$	-	\$ 1,404,216	\$	-	\$ (1,404,216)	\$	-

Ceded Reinsurance

Net

d. Direct Unearned Premium Reserve

D Uncollectible Reinsurance

Disclosures for the Transfer of Property and Casualty Run-off Agreements

NONE

Certified Reinsurer Rating Downgraded or Status Subject to Revocation I.

NONE

Reinsurance Agreements Qualifying for Reinsurer Aggregation

Reinsurance Credit

NONE

#### NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

The company does not have any retrospectively rated contracts and contracts subject to redeterminations

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

No significant change

#### NOTE 26 Intercompany Pooling Arrangements

NONE

#### NOTE 27 Structured Settlements

NONE

#### NOTE 28 Health Care Receivables

NONE

#### NOTE 29 Participating Policies

NONE

## NOTE 30 Premium Deficiency Reserves

NONE

#### NOTE 31 High Deductibles

The company does not have any high deductibles

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

The company does not have any discounting of liabilities for unpaid losses or unpaid loss adjustment expenses

# NOTE 33 Asbestos/Environmental Reserves A. NONE

NOTE 34 Subscriber Savings Accounts
NONE

NOTE 35 Multiple Peril Crop Insurance NONE

NOTE 36 Financial Guaranty Insurance
The company does not write financial guaranty Insurance

## **GENERAL INTERROGATORIES**

### PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

1.1	Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?	Yes [ ] No [ X ]
1.2	If yes, has the report been filed with the domiciliary state?	Yes [ ] No [ ]
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes [ ] No [ X ]
2.2	If yes, date of change:	
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?  If yes, complete Schedule Y, Parts 1 and 1A.	Yes [ X ] No [ ]
3.2	Have there been any substantial changes in the organizational chart since the prior quarter end?	Yes [ ] No [ X ]
3.3	If the response to 3.2 is yes, provide a brief description of those changes.	
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?	
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.	
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	Yes [ ] No [ X ]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of 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 NAIC Company Code State of Domicile	
5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?	] No [ X ] N/A [
C 4	Charles as a further date the latest financial evanciation of the reporting ontity was made as in being made	
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	12/31/2017
6.1	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.	
	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This	12/31/2017
6.2	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.  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	12/31/2017
6.2	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.  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).	12/31/2017 06/24/2019
<ul><li>6.2</li><li>6.3</li><li>6.4</li></ul>	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.  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).  By what department or departments?  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial	12/31/2017 06/24/2019 X ] No [ ] N/A [
<ul><li>6.2</li><li>6.3</li><li>6.4</li><li>6.5</li></ul>	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.  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).  By what department or departments?  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?	12/31/2017 06/24/2019 X ] No [ ] N/A [
<ul><li>6.2</li><li>6.3</li><li>6.4</li><li>6.5</li><li>6.6</li></ul>	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.  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).  By what department or departments?  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [  Have all of the recommendations within the latest financial examination report been complied with?  Yes [  Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or	12/31/2017 06/24/2019 X ] No [ ] N/A [ X ] No [ ] N/A [
<ul><li>6.2</li><li>6.3</li><li>6.4</li><li>6.5</li><li>6.6</li><li>7.1</li></ul>	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.  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).  By what department or departments?  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [  Have all of the recommendations within the latest financial examination report been complied with?  Yes [  Has this 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?	12/31/2017 06/24/2019 X ] No [ ] N/A [ X ] No [ ] N/A [ Yes [ ] No [ X ]
<ul><li>6.2</li><li>6.3</li><li>6.4</li><li>6.5</li><li>6.6</li><li>7.1</li><li>7.2</li></ul>	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.  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).  By what department or departments?  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [  Have all of the recommendations within the latest financial examination report been complied with?	12/31/2017 06/24/2019 X ] No [ ] N/A [ X ] No [ ] N/A [ Yes [ ] No [ X ]
6.2 6.3 6.4 6.5 6.6 7.1 7.2	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.  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).  By what department or departments?  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [ Have all of the recommendations within the latest financial examination report been complied with?	12/31/2017 06/24/2019 X ] No [ ] N/A [ X ] No [ ] N/A [ Yes [ ] No [ X ]
6.2 6.3 6.4 6.5 6.6 7.1 7.2 8.1 8.2	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.  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).  By what department or departments?  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [ Have all of the recommendations within the latest financial examination report been complied with?  Yes [ Has this 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?  If yes, give full information:  Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?  If response to 8.1 is yes, please identify the name of the bank holding company.	12/31/2017  06/24/2019  X ] No [ ] N/A [ X ] No [ ] N/A [ Yes [ ] No [ X ]  Yes [ ] No [ X ]
6.2 6.3 6.4 6.5 6.6 7.1 7.2 8.1 8.2	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.  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).  By what department or departments?  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Have all of the recommendations within the latest financial examination report been complied with?  Yes [ Has this 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?  If yes, give full information:  Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?  If response to 8.1 is yes, please identify the name of the bank holding company.  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	12/31/2017  06/24/2019  X ] No [ ] N/A [ X ] No [ ] N/A [ Yes [ ] No [ X ]  Yes [ ] No [ X ]

# **GENERAL INTERROGATORIES**

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	sonal and professional	Yes [	X ] No [ ]
	(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.			
9.11	If the response to 9.1 is No, please explain:			
9.2	Has the code of ethics for senior managers been amended?		Yes [	] No [ X ]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).			
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [	] No [ X ]
	FINANCIAL			
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement If yes, indicate any amounts receivable from parent included in the Page 2 amount:			
	INVESTMENT			
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or ot use by another person? (Exclude securities under securities lending agreements.)  If yes, give full and complete information relating thereto:			] No [ X ]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		.\$	
13.	Amount of real estate and mortgages held in short-term investments:			
14.1 14.2	Does the reporting entity have any investments in parent, subsidiaries and affiliates?		Yes [	
		1 Prior Year-End	C	2 urrent Quarter
		Book/Adjusted	Е	Book/Adjusted
	Bonds	Carrying Value		Carrying Value
	Preferred Stock Common Stock			29,604,864
	Short-Term Investments			29,004,804
	Mortgage Loans on Real Estate			
	All Other			
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)			29,604,864
	Total Investment in Parent included in Lines 14.21 to 14.26 above			
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		Yes [	1 No [ X ]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?  If no, attach a description with this statement.	Ye.	s [ ] No	[ ] N/A [ X ]
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement dates	te:		
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2		\$	0
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, F	Parts 1 and 2	\$	
	16.3 Total payable for securities lending reported on the liability page.		\$	0

## **GENERAL INTERROGATORIES**

	offices, vaults or safet custodial agreement v Outsourcing of Critical	y deposit boxes, v vith a qualified bar l Functions, Custo	<ul> <li>Special Deposits, real estate, mere all stocks, bonds and other short frust company in accordandial or Safekeeping Agreements requirements of the NAIC Finance</li> </ul>	securities, owner ice with Section of s of the NAIC Fin	d throughout I, III - Genera ancial Condi	the current year al Examination C tion Examiners H	neld pursuant to a onsiderations, F. andbook?	Yes	[ X	] [	No [
Γ		1	F ( )			2					
-	US Bank	Name of Cust	odian(s)	2204 Lakeshor	e Drive, Ste	Custodian Addr 30, Birmingham	ess , AL 35209				
	For all agreements that location and a comple		vith the requirements of the NAIC	Financial Cond	ition Examin	ers Handbook, pi	ovide the name,				
ſ	1 Name(		2 Location(s)			3 Complete Explai	nation(s)				
	Have there been any of the state of the stat			n(s) identified in		he current quarte		Yes	[ X ]	, No	) [
L	1 Old Custo	odian	2 New Custodian	Date	3 of Change		4 Reason				
	Hillton Committee	les.	US Bank	07.0	n4 /2022	Agreement with Management, In	o an Investment Manageme New England Asset c. and they work with US	Bank			
	Hilltop Securities,	Inc	US Bank	07/0	)1/2022						
r	make investment deci	sions on behalf of	vestment advisors, investment n the reporting entity. For assets t tment accounts"; "handle secu	that are manage urities"]	r/dealers, inc d internally b	luding individuals y employees of th	that have the authority to be reporting entity, note as				
		Name of Firm	l or Individual	2 Affiliat							
		nagement, Inc		U							
1	17.5097 For those firm	ns/individuals liste	d in the table for Question 17.5, more than 10% of the reporting	do any firms/ind	viduals unafl	filiated with the re	porting entity (i.e.	Yes	]	] [	No [
1	17.5098 For firms/indi total assets u	viduals unaffiliate inder managemer	d with the reporting entity (i.e. de at aggregate to more than 50% of	esignated with a ' f the reporting er	'U") listed in t	the table for Que	stion 17.5, does the	Yes	. [	] [	√o [
	For those firms or inditable below.	viduals listed in th	e table for 17.5 with an affiliation	n code of "A" (aff	liated) or "U"	(unaffiliated), pr	ovide the information for th	ie			
Ī	1		2			3	4				nent ment
	Central Registration Depository Number		Name of Firm or Individual		Legal Entity	/ Identifier (LEI)	Registered With		Agı		ent
			et Management, Inc.		KURB5EPS4GQF	2TFC130	U.S. Securities and Exch				
Ŀ											
	If no, list exceptions:	irements of the P	urposes and Procedures Manual	I of the NAIC Inv							No [
li E	If no, list exceptions:  By self-designating 50 a. Documentation security is not a b. Issuer or obligo c. The insurer has	GI securities, the re necessary to per available. or is current on all s an actual expect	eporting entity is certifying the fol mit a full credit analysis of the se contracted interest and principal ation of ultimate payment of all c 5GI securities?	llowing elements ecurity does not e payments. contracted interes	estment Ana for each selt exist or an NA st and princip	lysis Office been f-designated 5GI NC CRP credit ra	followed?security: ting for an FE or PL		[ X ]	] N	l ol
li E	If no, list exceptions:  By self-designating 50 a. Documentation security is not a b. Issuer or obligo c. The insurer has Has the reporting entil  By self-designating PL a. The security wa b. The reporting er c. The NAIC Desig on a current priv d. The reporting er	of securities, the representation in necessary to permane a contract of all securities of the securiti	eporting entity is certifying the fol mit a full credit analysis of the se contracted interest and principal ation of ultimate payment of all c	llowing elements curity does not e payments. contracted interesting following element C Designation red by an NAIC CR for examination be PL security with	for each self exist or an NA st and princip ts of each se ported for the P in its legal by state insur.	f-designated 5GI NC CRP credit ra al.  If-designated PL e security. capacity as a NF ance regulators.	security: ting for an FE or PL  GI security:	Yes	[ X	] N	

## **GENERAL INTERROGATORIES**

### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?	[ ] No [	] N/A [ X ]
2.	Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?	Yes [ ] No	o [ X ]
3.1	Have any of the reporting entity's primary reinsurance contracts been canceled?	Yes [ ] No	o [ X ]
3.2	If yes, give full and complete information thereto.		
4.1	Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero?	Yes [ ] No	o [ X ]
	TOTAL DISCOUNT DISCOUNT TAKEN		
Line	1         2         3         4         5         6         7         8         9           Maximum         Discount         Unpaid         Unpaid	10 IBNR	11 TOTAL
LIIIC	TOTAL 0 0 0 0 0 0	0	TOTAL (
5.	Operating Percentages:  5.1 A&H loss percent		
	5.2 A&H cost containment percent		
	5.3 A&H expense percent excluding cost containment expenses		
6.1	Do you act as a custodian for health savings accounts?	Yes [ ] No	o [ X ]
6.2	If yes, please provide the amount of custodial funds held as of the reporting date\$		
6.3	Do you act as an administrator for health savings accounts?	Yes [ ] No	o [ X ]
6.4	If yes, please provide the balance of the funds administered as of the reporting date\$		
7.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [ ] No	o [ X ]
7.1	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	o [ X ]

### SCHEDULE F - CEDED REINSURANCE

		Showing All New Reinsurers - Current Year to			
1 NAIC Company Code	2 ID Number	3 4  Domiciliary Name of Reinsurer Jurisdiction	5 Ce	6 ertified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
Company Code	Number	Name of Reinstref Junsdiction	Type of Remsurer	(1 through 6)	Raing
	• · · · · · · · · · · · · · · · · · · ·				
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	•	NONE			
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•••••	•				••••••

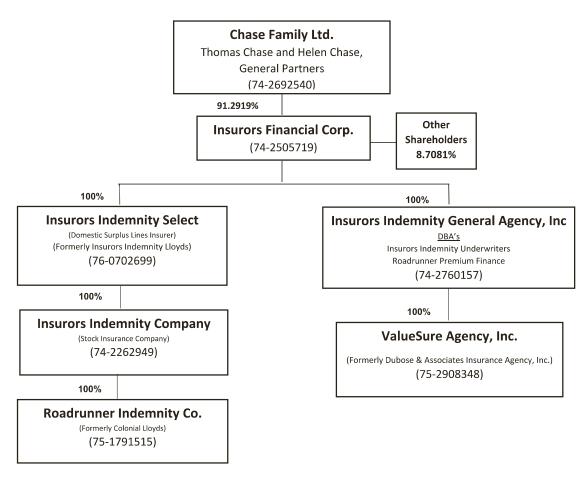
### **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Current Year to Date - Allocated by States and Territories

					by States and Terr	itories		
		1 Active	Direct Premi	ums Written 3	Direct Losses Paid	Deducting Salvage) 5	Direct Los	ses Unpaid
		Status	∠ Current Year	ડ Prior Year	4 Current Year	່ວ Prior Year	Current Year	<i>l</i> Prior Year
	States, etc.	(a)	To Date	To Date	To Date	To Date	To Date	To Date
1.	AlabamaAL	NN.						
	AlaskaAK	N						
3.	ArizonaAZ	NN.						
4.	ArkansasAR	N						
5.	CaliforniaCA	N						
	Colorado CO	N.						
	ConnecticutCT	N						
8.	DelawareDE	N						
	District of ColumbiaDC	N						
	FloridaFL	N						
	GeorgiaGA	N						
	HawaiiHI	N.						
13.	IdahoID	N.						
	IllinoisIL							
	IndianaIN	NNN						
	lowaIA							
	KansasKS	N						
	KentuckyKY	N						
	LouisianaLA	N						
	MaineME	N						
	MarylandMD	N						
	MassachusettsMA	N						
	MichiganMI	N						
	MinnesotaMN	N						
	MississippiMS	N						
26.	MissouriMO	N						
27.	MontanaMT	N.						
28.	NebraskaNE	N.						
29.	NevadaNV	N						
30.	New HampshireNH	N						
	New JerseyNJ	N						
	New MexicoNM	NN.						
	New YorkNY	N.						
	North CarolinaNC	N						
	North DakotaND	N.						
	OhioOH	N.						
	OklahomaOK	N						
	OregonOR	N.						
	PennsylvaniaPA	N						
	Rhode IslandRI	NN.						
		N						
41.	South CarolinaSC	NN.						
42.	South DakotaSD							
43.	TennesseeTN	N	4 405 054	770 400	400 545	40.400	400 405	04 440
44.	TexasTX	L	1,465,854	770 , 186	160,545	16,198	188 , 105	24 , 142
	UtahUT	N						
	VermontVT	N						
47.	VirginiaVA	N	<b></b>					
	WashingtonWA	N						
	West VirginiaWV	N						
	WisconsinWI	N						
	WyomingWY	N						
	American SamoaAS	N						
	GuamGU	N						
54.	Puerto RicoPR	N						
55.	U.S. Virgin IslandsVI	N						
56.	Northern Mariana							
	IslandsMP	N						
57.	CanadaCAN	N						
58.	Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59.	Totals	XXX	1,465,854	770,186	160,545	16,198	188, 105	24,142
	DETAILS OF WRITE-INS							
58001	DETAILS OF WINTE-INS	XXX						
		XXX						
		XXX						
o6998.	Summary of remaining write-ins for Line 58 from							
	overflow page	XXX	0	0	0	0	0	0
58999	Totals (Lines 58001 through							
55555.	58003 plus 58998)(Line 58							
	above)	XXX	0	0	0	0	0	0
	e Status Counts:							•

- L Licensed or Chartered Licensed Insurance carrier or domiciled RRG... E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other .....0
- lines in the state of domicile.
- ..........1 R Registered Non-domiciled RRGs......
  - Q Qualified Qualified or accredited reinsurer. ......0
  - N None of the above Not allowed to write business in the state ...





Effective PENDING

 $S: \label{thm:company} S: \label{thm:compan$ 

# SCHEDULE Y

# PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

						1									
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	lf		ļ	1
											of Control	Control			1
											(Ownership,	is		ls an	1
						Name of Canonitian			Dalation						1
						Name of Securities		l	Relation-		Board,	Owner-		SCA	1
						Exchange		Domi-	ship		Management,	ship		Filing	1
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	1
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	1
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
3279	INSURORS INDEMNITY COMPANIES	40673	76-1791515	0	0	<i>'</i>	ROADRUNNER INDEMNITY COMPANY	TX	RF	INSURORS INDEMNITY COMPANY	Ownership.	100.000	CHASE FAMILY, LTD		0
										INSURORS INDEMNITY SELECT INSURANCE COMPANY					
3279	INSURORS INDEMNITY COMPANIES	43273	74-2262949	0	0		INSURORS INDEMNITY COMPANY	TX	RE		Ownership	100.000	CHASE FAMILY, LTD	.	0
3279	INSURORS INDEMNITY COMPANIES	11496	76-0702699	0	0		INSURORS INDEMNITY SELECT INSURANCE COMPANY.	TX	RE	INSURORS FINANCIAL CORP	Ownership	100.000	CHASE FAMILY, LTD		0
0000		00000	75-2908348	0	0		VALUESURE AGENCY, INC.	TX	IA.	INSURORS INDEMNITY GENERAL AGENCY, INC	Ownership		CHASE FAMILY, LTD		0
0000		00000	74-2760157	0	0		INSURORS INDEMNITY GENERAL AGENCY, INC	TX	IA	INSURORS FINANCIAL CORP	Ownership		CHASE FAMILY LTD	.	0
											,		THOMAS G & HELEN M CHASE, GENERAL		
0000		00000	74-2505719	0	0		INSURORS FINANCIAL CORP	TX	UDP	CHASE FAMILY, LTD	Owner ship.	100.000	PARTNERS	.	0
										,					
														.	
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Asterisk	Evalenation
ASIETISK	Explanation

# **PART 1 - LOSS EXPERIENCE**

Line of Business	1 Direct Premiums Earned	Current Year to Date  2  Direct Losses Incurred	3 Direct Loss Percentage	4 Prior Year to Date Direct Loss Percentage
1. Fire			0.0	8.
2.1 Allied Lines	,		0.0	
2.2 Multiple peril crop			0.0	
2.3 Federal flood			0.0	
2.4 Private crop			0.0	
2.5 Private flood			0.0	
Farmowners multiple peril			0.0	0.
4. Homeowners multiple peril	1,268,597		25.2	19.
5. Commercial multiple peril			0.0	8.
6. Mortgage guaranty			0.0	0.
8. Ocean marine			0.0	0.
9. Inland marine	(2,712)		0.0	0.
10. Financial guaranty			0.0	0.
11.1 Medical professional liability - occurrence			0.0	0.
11.2 Medical professional liability - claims-made			0.0	0.
12. Earthquake			0.0	0.
13.1 Comprehensive (hospital and medical) individual			0.0	
13.2 Comprehensive (hospital and medical) group			0.0	
14. Credit accident and health			0.0	0.
15.1 Vision only			0.0	
15.2 Dental only			0.0	
15.3 Disablity income			0.0	
15.4 Medicare supplement			0.0	
15.5 Medicaid Title XIX			0.0	
15.6 Medicare Title XVIII			0.0	
15.7 Long-term care			0.0	
15.8 Federal employees health benefits plan			0.0	
15.9 Other health			0.0	
16. Workers' compensation			0.0	0.
17.1 Other liability - occurrence			0.0	0.
17.2 Other liability - claims-made			0.0	0.
17.3 Excess workers' compensation			0.0	0.
18.1 Products liability - occurrence			0.0	0.
18.2 Products liability - claims-made			0.0	0.
19.1 Private passenger auto no-fault (personal injury protection)			0.0	
19.2 Other private passenger auto liability			0.0	
19.3 Commercial auto no-fault (personal injury protection)			0.0	
19.4 Other commercial auto liability			0.0	
21.1 Private passenger auto physical damage			0.0	
21.2 Commercial auto physical damage			0.0	
22. Aircraft (all perils)			0.0	0.
23. Fidelity			0.0	0.
24. Surety				0.
26. Burglary and theft				0.
27. Boiler and machinery				0.
28. Credit			0.0	0.
29. International			0.0	0.
30. Warranty				0.
31. Reinsurance - Nonproportional Assumed Property				XXX
32. Reinsurance - Nonproportional Assumed Liability				
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business	0	0	0.0	0.
35. Totals	1,319,779	319,121	24.2	13.
DETAILS OF WRITE-INS 3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0.0	0.
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0.0	0.

## **PART 2 - DIRECT PREMIUMS WRITTEN**

	Line of Business	Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire		67,958	123,01
2.1	Allied Lines			
2.2	Multiple peril crop	0		
2.3	Federal flood			
2.4	Private crop	0		
2.5	Private flood	0		
3.	Farmowners multiple peril	0		
4.	Homeowners multiple peril	481,062	1,353,243	592,34
5.	Commercial multiple peril	0		30,95
6.	Mortgage guaranty	0		
8.	Ocean marine	0		
9.	Inland marine	15,862	44,653	
10.	Financial guaranty	0		
11.1	Medical professional liability - occurrence	0		
11.2	Medical professional liability - claims-made	0		
	Earthquake			
	Comprehensive (hospital and medical) individual			
	Comprehensive (hospital and medical) group			
	Credit accident and health			
	Vision only			
	Dental only			
	•			
	Disablity income	_		
	Medicare supplement			
	Medicaid Title XIX			
	Medicare Title XVIII	_		
	Long-term care			
	Federal employees health benefits plan			
15.9	Other health			
16.	Workers' compensation			
17.1	Other liability - occurrence	0		
17.2	Other liability - claims-made			
17.3	Excess workers' compensation	0		
18.1	Products liability - occurrence	0		
18.2	Products liability - claims-made	0		
19.1	Private passenger auto no-fault (personal injury protection)	0		
19.2	Other private passenger auto liability	0		
19.3	Commercial auto no-fault (personal injury protection)	0		
19.4	Other commercial auto liability	0		
	Private passenger auto physical damage			
	Commercial auto physical damage			
	Aircraft (all perils)			
	Fidelity			
	Surety	_		
	Burglary and theft			
	Boiler and machinery			
	Credit			
	International			
	Warranty			
	Reinsurance - Nonproportional Assumed Property			
	Reinsurance - Nonproportional Assumed Liability			
	Reinsurance - Nonproportional Assumed Financial Lines	_		XXX
34.	Aggregate write-ins for other lines of business		0	
35.	Totals	521,093	1,465,854	746,31
I	DETAILS OF WRITE-INS			
3401.				
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	
	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	

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

	1	2	3	4	5	6	7	8	9	10	11	12	13
											Prior Year-End	Prior Year-End	
								Q.S. Date Known			Known Case Loss	IBNR Loss and	Prior Year-End
			T	00001	2022 Loss and		Q.S. Date Known				and LAE Reserves	LAE Reserves	Total Loss and
		D-iV	Total Prior	2022 Loss and	LAE Payments on	T-4-1 0000 1	Case Loss and	LAE Reserves on		T-4-1 O O 1	Developed	Developed	LAE Reserve
Years in Which	Prior Year-End	Prior Year- End IBNR	Year-End Loss and LAE	LAE Payments on Claims Reported	Claims Unreported	Total 2022 Loss and LAE	LAE Reserves on Claims Reported	Claims Reported or Reopened	Q.S. Date IBNR	Total Q.S. Loss and LAE	(Savings)/ Deficiency	(Savings)/ Deficiency	Developed (Savings)/
Losses	Known Case Loss	Loss and LAE	Reserves	as of Prior	as of Prior	Payments	and Open as of	Subsequent to	Loss and LAE	Reserves	(Cols.4+7	(Cols. 5+8+9	Deficiency
Occurred	and LAE Reserves	Reserves	(Cols. 1+2)	Year-End	Year-End	(Cols. 4+5)	Prior Year End	Prior Year End	Reserves	(Cols.7+8+9)	minus Col. 1)	minus Col. 2)	(Cols. 11+12)
	a.i.a 2.12 i toooii too	110001100	(00.0 2)	1001 2110	100. 2110	(00.0. 1 0)	11101 1001 2110			(00.0 0 0)			(0010: 11 12)
1. 2019 + Prior													
2. 2020							·····						
3. Subtotals 2020 + Prior													
4. 2021													
5. Subtotals 2021 + Prior													
6. 2022	XXX	XXX	XXX	XXX			XXX				XXX	XXX	XXX
7. Totals	-												
8. Prior Year-End Surplus					·	·			·	·	Col. 11, Line 7	Col. 12, Line 7	Col. 13, Line 7
As Regards											As % of Col. 1	As % of Col. 2	As % of Col. 3
Policyholders											Line 7	Line 7	Line 7
											1.	2.	3.

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	<u>-</u>	Response
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
	AUGUST FILING	
5.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A
	Explanations:	
1.		
2.		
3.		
4.		
	Bar Codes:	
1.	Trusteed Surplus Statement [Document Identifier 490]	
2.	Supplement A to Schedule T [Document Identifier 455]	
3.	Medicare Part D Coverage Supplement [Document Identifier 365]	
4.	Director and Officer Supplement [Document Identifier 505]	

# STATEMENT AS OF SEPTEMBER 30, 2022 OF THE Insurors Indemnity Select Insurance Company OVERFLOW PAGE FOR WRITE-INS

### **SCHEDULE A - VERIFICATION**

Real Estate

		1	2
		'	Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted rying		
7.	Deduct current year's other than temporary impailment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

### **SCHEDULE B - VERIFICATION**

Mortgage Loans

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

## **SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

### **SCHEDULE D - VERIFICATION**

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	34,718,618	1,985,052
2.	Cost of bonds and stocks acquired		
3.	Accrual of discount	1,082	0
4.	Unrealized valuation increase (decrease)	(3, 138, 238)	5,500,543
5.	Total gain (loss) on disposals		
6.	Deduct consideration for bonds and stocks disposed of	817,917	5,010
7.	Deduct amortization of premium	466	592
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	31,722,307	34,718,618
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	31,722,307	34,718,618

## **SCHEDULE D - PART 1B**

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

	Juring the Current Quarter to	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
	Beginning	During	During	During	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	1,595,742	959,435	638,446	839	1,856,467	1,595,742	1,917,570	1,977,240
2. NAIC 2 (a)	0	0	0	0	0	0	0	0
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	1,595,742	959,435	638,446	839	1,856,467	1,595,742	1,917,570	1,977,240
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0
9. NAIC 2	0	0	0		0	0	0	0
9. NAIC 2	0	0		0	0	0	0	0
9. NAIC 2	0 0	0 0 0	0	0	0 0 0	000	0 0 0	0
9. NAIC 2	0 0 0 0	0 0 0	0	0		0	0	00000
9. NAIC 2	0 0 0		0	0 0 0 0	0			

a	) Book/Adj	usted (	Carrying	Value	column	for the	end c	of the	current	report	ina p	eriod	lincl	udes	the	followi	ng ar	nount	of sh	ort-te	rm an	d cas	h eai	uivale	nt bon	ds b	v NA	AIC d	esiar	nation

## **SCHEDULE DA - PART 1**

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year-to-Date	5 Paid for Accrued Interest Year-to-Date
770999999 Totals	198,472	xxx	196,785	0	0

## **SCHEDULE DA - VERIFICATION**

Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	
2.	Cost of short-term investments acquired	745,827	
3.	Accrual of discount	1,687	
4.	Unrealized valuation increase (decrease)	0	
5.	Total gain (loss) on disposals	0	
6.	Deduct consideration received on disposals	549,042	
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)	198,472	0
11.	Deduct total nonadmitted amounts	0	
12.	Statement value at end of current period (Line 10 minus Line 11)	198,472	0

# Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

Schedule DB - Part B - Verification - Futures Contracts

## NONE

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

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

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

# NONE

# **SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	(Odon Equivalents)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	619,000
2.	Cost of cash equivalents acquired	1,751,696	0
3.	Accrual of discount	766	0
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	0
6.	Deduct consideration received on disposals	1,337,823	619,000
7.	Deduct amortization of premium	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	414,639	0
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	414,639	0

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

Schedule A - Part 3 - Real Estate Disposed

## NONE

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

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

NONE

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

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

# ΜÓ

## STATEMENT AS OF SEPTEMBER 30, 2022 OF THE Insurors Indemnity Select Insurance Company

# **SCHEDULE D - PART 3**

Show All Long-Term	Pande and Stack	Acquired During the	Current Quarter

			SHOW All I	Long-Term Bonds and Stock Acquired During the Current Quarter					
1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation,
									NAIC
									Designation
									Modifier
									and
									SVO
					Number of			Paid for Accrued	Admini-
CUSIP			Date		Shares of			Interest and	strative
Identification	Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
	UNBS - POOL BT8164		09/07/2022	BIMO CAPITAL MARKETS CORP.		235,488	247,272	313	
3140QP-2F-3	UMBS - POOL CB4373		09/06/2022	WELLS FARGO SECURITIES LLC		488,507	496,065	717	1.A FE
	Subtotal - Bonds - U.S. Special Revenues		00 100 10000	TRULAT ACAIDITICA INA		723,995	743,337	1,030	XXX
	REALTY INCOME CORP		09/29/2022	TRUIST SECURITIES INC.		235,440	250,000	, , , , , , , , , , , , , , , , , , , ,	1.G FE
	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					235,440	250,000	1,317	XXX
	otal - Bonds - Part 3					959,435	993,337	2,347	
	otal - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. T						959,435	993,337	2,347	XXX
	otal - Preferred Stocks - Part 3					0	XXX	0	XXX
	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
	otal - Preferred Stocks					0	XXX	0	XXX
5989999997. T	otal - Common Stocks - Part 3					0	XXX	0	XXX
5989999998. T	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
5989999999. T	otal - Common Stocks					0	XXX	0	XXX
5999999999. T	otal - Preferred and Common Stocks					0	XXX	0	XXX
6009999999 -	Totals					959.435	XXX	2.347	XXX

## **SCHEDULE D - PART 4**

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

	-				Show All Lo	ing-renni bo	inds and Sto	ik Sola, Rea													
1	2	3	4	5	6	7	8	9	10	Ch	nange In Bo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current	Change in	Foreign					Bond		nation
												Year's	Book/	Exchange	Book/				Interest/		Modifier
									Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Stock	Stated	and
										Unrealized		Temporary	Carrying	Book	Carrying		Realized		Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain	Received		Admini-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eian	Disposal	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)		nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
	GOVERNMENT NATIONAL MORTGAGE A 05-56 JA	- 3	09/01/2022		Otook	446	446	498	446	15	(15)		13)	value 0	446		0	0	15		1.A FE
	9. Subtotal - Bonds - U.S. Governme		9070172022	IIIDO TATIDONA		446	446	498	446	15	(15)		0	0	446		0	0	15	XXX	XXX
	EANES TX INDEP SCH DIST		08/01/2022	MATURITY at 100.0000		50,000	50.000	50.000	51, 112	(1, 112)	0	0	(1, 112)	0	50.000		0	0	2.000	08/01/2022	1
070999999	9. Subtotal - Bonds - U.S. Political Su	ubdivisi	ions of Stat	tes, Territories and F	Possessions	50,000	50,000	50,000	51,112	(1,112)	0	0	(1, 112)	0	50,000	0	0	0	2,000	XXX	XXX
02007G-LJ-0	ALLY BANK			MATURITY at 100.0000		250,000	250,000	250,000	250,000	0	0	0	0	0	250,000	0	0	0	4,625	08/29/2022	1.A FE
				CITIGROUP GLOBAL MARKETS	8																
	CAPITAL ONE BANK USA NA		09/14/2022			137,793	138,000	138,000	138,000	0	0	0	0	0	138,000	0	(207)	(207)	2, 183		1.A FE
	9. Subtotal - Bonds - Industrial and M	liscella	ineous (Una	affiliated)		387,793	388,000	388,000	388,000	0	0		0	0	388,000		(201)	(207)	6,808	XXX	XXX
	7. Total - Bonds - Part 4					438,239	438,446	438,498	439,558	(1,097)			(1, 112)	0	438,446		(207)	(207)	8,823	XXX	XXX
	8. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	9. Total - Bonds					438,239	438,446	438,498	439,558	(1,097)	(15)	0	(1,112)	0	438,446	0	(207)	(207)	8,823	XXX	XXX
	7. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	8. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	9. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	7. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	8. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	9. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
599999999	9. Total - Preferred and Common Sto	cks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
												-									
												-				·					
	00 T-1-1-				ļ	400 5		400 400	400 5	/4 00=1		-	,,			-		/0			
600999999	19 - I otais					438,239	XXX	438,498	439,558	(1,097)	(15)	0	(1, 112)	0	438,446	0	(207)	(207)	8,823	XXX	XXX

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

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

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

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

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

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

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

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

# **SCHEDULE E - PART 1 - CASH**

Month End Depository E	Balances
------------------------	----------

1	-	3	4	5				9
			A mount of	Amount of		uring Current Quart		4
					б	/	8	
		Pate of						
Depository	Code				First Month	Second Month	Third Month	*
Depository   Code   Interest   Quarter   Statement Date   First Month   Second Month	0	XXX.						
Central National Bank								
		0.200	209		31 421	33 001	233 596	XXX
		0.200					200,000	
		0.200	31		2 391	2 432	2 445	.xxx
Central National Bank iMGA								,
		0.000			198.052	234.854	358.307	xxx.
0199998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	501	0	232,216	270,287	594,348	XXX
0299998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See				_	_		_	
instructions) - Suspended Depositories	Amount of Interest Received During Current Quarter   Statement Date   First Month   Second Month   Third		XXX					
0299999. Totals - Suspended Depositories				-	U	Ü	,	XXX
0399999. Total Cash on Deposit	XXX	XXX	501	0	232,216	270,287	594,348	XXX
0499999. Cash in Company's Office	Rate of Code   Interest   Rate of During Current Quarter   Statement Date   First Month   Second Month   Third Month   *	XXX						
		ļ						
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		ļ						
								<u> </u>
0599999. Total - Cash	XXX	XXX	501	0	232,216	270,287	594,348	XXX

# **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Chau	Investments	Owned End	of Curront	Ougston

1 2  CUSIP Description 0109999999. Total - U.S. Government Bonds	3	4	5				
111			3	6	1	8	9
111					Book/Adjusted	Amount of Interest	Amount Received
111	Codo	Data Assuired	Data of Interest	Maturity Date	Carrying Value	Due and Accrued	
0109999999. Total - U.S. Government Bonds	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying value	Due and Accrued	During Year
					0	0	(
0309999999. Total - All Other Government Bonds					0	0	(
0509999999. Total - U.S. States, Territories and Possessions Bonds					0	0	(
0709999999. Total - U.S. Political Subdivisions Bonds					0	0	(
090999999. Total - U.S. Special Revenues Bonds					0	0	(
1109999999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	
1309999999. Total - Hybrid Securities					0	0	
1509999999. Total - Parent, Subsidiaries and Affiliates Bonds					0	0	
190999999. Subtotal - Unaffiliated Bank Loans					0	0	
241999999. Total - Issuer Obligations					0	0	(
242999999. Total - Residential Mortgage-Backed Securities					0	0	(
243999999. Total - Commercial Mortgage-Backed Securities					0	0	
244999999. Total - Other Loan-Backed and Structured Securities					0	0	(
2459999999. Total - SVO Identified Funds					0	0	(
2469999999. Total - Affiliated Bank Loans					0	0	(
					0	0	(
2479999999. TOTAL - UNAUMATED BANK LOANS					, and the second	ů	`
2479999999. Total - Unaffiliated Bank Loans 2509999999. Total Bonds					0	0	(
2509999999. Total Bonds	T	09/15/2022	0.000		0 414.639	0	(
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7		09/15/2022	0.000		0 	00	
2509999999. Total Bonds	<u> </u>	09/15/2022	0.000		0 414,639 414,639	0 0	(
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7		09/15/2022	0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7		09/15/2022	0.000			00	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7		09/15/2022	0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7		.09/15/2022	0.000			00	(
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			00	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7		.09/15/2022	0.000			0 0	(
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			00	(
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7		.09/15/2022	0.000			00	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7			0.000			0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7						0 0	
250999999. Total Bonds 31846V-54-2 FIRST AMER TREASURY OBLIG-7						0 0	