QUARTERLY STATEMENT

OF THE

Insurors Indemnity Select Insurance Company

TO THE

Insurance Department

OF THE

STATE OF

Texas

FOR THE QUARTER ENDED SEPTEMBER 30, 2024

PROPERTY AND CASUALTY

2024



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2024 OF THE CONDITION AND AFFAIRS OF THE

Insurors Indemnity Select Insurance Company
NAIC Group Code 3279 3279 NAIC Company Code 11496 Employer's ID Number 76-0702699

| Organized under the Laws of | (Current) (Prior | | , State of Domicile or Port of I | intry TX | | | |
|-----------------------------------|--|---|---|---|-----------------------|--|--|
| Country of Domicile | | | es of America | | | | |
| Incorporated/Organized | | | Commenced Business | 05/01/2003 | | | |
| Statutory Home Office | 225 South Fifth S | treet | Waco, TX, US 76701 | | | | |
| | (Street and Num | | (City or | Town, State, Country and Zip Code) | | | |
| Main Administrative Office | | | Fifth Street | | | | |
| | Waco, TX, US 76701 | (Street a | nd Number) | 254-759-3727 | | | |
| (City or T | own, State, Country and Zip Coo | le) | (A | rea Code) (Telephone Number) | | | |
| Mail Address | P.O. Box 32577 | | 1 80 | Waco, TX, US 76703 | | | |
| | (Street and Number or P.O. | Box) | (City or | Town, State, Country and Zlp Code) | | | |
| Primary Location of Books and I | Records | 225 Sout | h Fifth Street | | | | |
| , | | (Street a | nd Number) | 054 750 0707 | | | |
| (City or T | Waco, TX, US 76701 Town, State, Country and Zip Coo | le) | (A | 254-759-3727 rea Code) (Telephone Number) | | | |
| | | | | | | | |
| Internet Website Address | | www.insuror | sindemnity.com | | - | | |
| Statutory Statement Contact | Tammy | | | 254-759-3727 | | | |
| Ttien | (N erman@insurorsindemnity.com | ame) | | (Area Code) (Telephone Number) | | | |
| 100 | (E-mail Address) | | | (FAX Number) | | | |
| | | OFF | ICERS | | | | |
| President & CEO | Dave E Talb | | | Thomas G Chase Jr. | | | |
| | Tammy Tiepe | | | | | | |
| | | 0. | THER | | | | |
| | /ice President - Surety | Sales Control of the | Vice President - Claims | Rhett Dawson, Vice President - P&C & Bus I | Dev | | |
| Tammy Tieperman, Vice | President - Accounting | Audrey Teague | , Assistant Secretary | | | | |
| | | | OR TRUSTEES | | | | |
| Dave E ' | Talbert R Vance | | s G Chase Jr m A Nesbitt | Felicia C Goodman Lyndon L Oison | | | |
| Thomas Geor | | 0 0 111100 | 11771100010 | ajiidat a dibat. | | | |
| | | | | | | | |
| State of | Texas | - ss· | | | | | |
| County of | McLennan | _ | | | | | |
| | | | | | | | |
| The officers of this reporting en | tity being duly swom, each depo | se and say that they are | the described officers of said reg | orting entity, and that on the reporting period states or claims thereon, except as herein stated, and | d above, | | |
| statement, together with related | exhibits, schedules and explana | ations therein contained. | annexed or referred to, is a full: | and true statement of all the assets and liabilities a | nd of the | | |
| condition and affairs of the said | reporting entity as of the reporting | ng period stated above, d Accounting Practices | and of its income and deductions and Procedures manual except : | therefrom for the period ended, and have been co to the extent that: (1) state law may differ; or, (2) to | ompleted hat state | | |
| nules or regulations regulae di | ifferences in reporting not relat | ed to accounting pract | ices and procedures, according | to the best of their information, knowledge an | ıd belief. | | |
| respectively. Furthermore, the | scope of this attestation by the | described officers also | includes the related correspondit | g electronic filing with the NAIC, when required to be requested by various regulators in lieu of or in | hat is an | | |
| to the enclosed statement. | ig dinerations and to electronic i | mig) or the choloses sa | turnont in alcoholis in give, | | / | | |
| | 1 10 | 1 1 | | Manual Miles | | | |
| due a | Werd - | Jammys | uperman | / MONNING GUADA | | | |
| Davis E. Talk | -4 | Tomm | Tieperman | Thomas G. Chase, Jr. | | | |
| Dave E. Talbe President & C | | | cretary | Treasurer | | | |
| | | | - 1- Abd | - New York Village 1 | | | |
| Subscribed and swom to before | me this | - 4 | a. Is this an original filir b. If no, | g? Yes[X]No[] | | | |
| day of | November, 202 | 24 | State the amenda | | | | |
| Christny | u lunden | | Date filed Number of pages | | | | |
| | U CAOCO | | o. radinuel of pages | W 1999 W 1990 W | | | |



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 | 5,630,887 | | | 2,388,385 |
| | Stocks: | , , | | , , | |
| | 2.1 Preferred stocks | | | 0 | 0 |
| | 2.2 Common stocks | | | 9,549,378 | |
| 3. | Mortgage loans on real estate: | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | ,,,,,,,, | , |
| • | 3.1 First liens | | | 0 | 0 |
| | 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 |
| _ | Cash (\$2,855,077), cash equivalents | | | | |
| 5. | | | | | |
| | (\$153,613) and short-term | 2 000 600 | | 2 000 600 | 700 016 |
| _ | investments (\$ | | | 3,008,690 | , |
| | Contract loans (including \$ premium notes) | | | | 0 |
| 7. | Derivatives | | | 0 | 0 |
| 8. | Other invested assets | | | 0 | 0 |
| 9. | Receivables for securities | | | | 0 |
| 10. | Securities lending reinvested collateral assets | | | | 0 |
| | Aggregate write-ins for invested assets | | 0 | | 0 |
| | Subtotals, cash and invested assets (Lines 1 to 11) | 18, 188, 955 | 0 | 18, 188, 955 | 12,370,823 |
| 13. | Title plants less \$ charged off (for Title insurers | | | | |
| | only) | | | 0 | |
| 14. | Investment income due and accrued | 29,866 | | 29,866 | 13,329 |
| 15. | Premiums and considerations: | | | | |
| | 15.1 Uncollected premiums and agents' balances in the course of collection | 1,446,566 | | 1,446,566 | 633,264 |
| | 15.2 Deferred premiums, agents' balances and installments booked but | | | | |
| | deferred and not yet due (including \$ | | | | |
| | earned but unbilled premiums) | | | 0 | 0 |
| | 15.3 Accrued retrospective premiums (\$ | | | | |
| | contracts subject to redetermination (\$ | | | 0 | 0 |
| 16. | Reinsurance: | | | | |
| | 16.1 Amounts recoverable from reinsurers | 67, 168 | | 67, 168 | 48,509 |
| | 16.2 Funds held by or deposited with reinsured companies | | | 0 | 0 |
| | 16.3 Other amounts receivable under reinsurance contracts | | | 0 | 0 |
| 17. | Amounts receivable relating to uninsured plans | | | 0 | 0 |
| 18.1 | Current federal and foreign income tax recoverable and interest thereon | | | 0 | 0 |
| 18.2 | Net deferred tax asset | | | 0 | 0 |
| 19. | Guaranty funds receivable or on deposit | | | 0 | 0 |
| 20. | Electronic data processing equipment and software | | | 0 | 0 |
| 21. | Furniture and equipment, including health care delivery assets | | | | |
| | (\$) | | | 0 | 0 |
| 22. | Net adjustment in assets and liabilities due to foreign exchange rates | | | 0 | 0 |
| 23. | Receivables from parent, subsidiaries and affiliates | | | 0 | 4,860,000 |
| 24. | Health care (\$) and other amounts receivable | | | 0 | 0 |
| | Aggregate write-ins for other than invested assets | | | 379,167 | 416,667 |
| | Total assets excluding Separate Accounts, Segregated Accounts and | | | | |
| | Protected Cell Accounts (Lines 12 to 25) | 20,111,722 | 0 | 20,111,722 | 18,342,592 |
| 27. | From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | 0 | 0 |
| 28. | Total (Lines 26 and 27) | 20,111,722 | 0 | | 18,342,592 |
| ۷٥. | DETAILS OF WRITE-INS | 20,111,122 | 0 | 20,111,122 | 10,042,082 |
| 4404 | | | | | |
| 1101. | | | | | |
| 1102. | | | | | |
| 1103. | | | | | |
| | 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. | Goodwill of purchase of Roadrunner Indemnity Company | 379, 167 | | 379, 167 | 416,667 |
| 2502. | | | | | |
| 2503. | | | | | |
| 2598. | Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 |
| 2599. | Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) | 379, 167 | 0 | 379, 167 | 416,667 |

LIABILITIES, SURPLUS AND OTHER FUNDS

| | | 1 Current Statement Date | 2 December 31, Prior Year |
|----------------|---|--------------------------------|---------------------------------|
| 1. | Losses (current accident year \$ | | 0 |
| 2. | Reinsurance payable on paid losses and loss adjustment expenses | | 0 |
| 3. | Loss adjustment expenses | | 0 |
| 4. | Commissions payable, contingent commissions and other similar charges | | 138,972 |
| 5. | Other expenses (excluding taxes, licenses and fees) | | 5,716 |
| 6. | Taxes, licenses and fees (excluding federal and foreign income taxes) | | 2,020 |
| 7.1 | Current federal and foreign income taxes (including \$ on realized capital gains (losses)) | | 90,330 |
| 7.2 | Net deferred tax liability | | |
| 8. | Borrowed money \$ and interest thereon \$ | | |
| 9. | Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ and | | |
| ì | including warranty reserves of \$ and accrued accident and health experience rating refunds | | |
| ì | including \$0 for medical loss ratio rebate per the Public Health Service Act) | | |
| | Advance premium | | 28,535 |
| 11. | Dividends declared and unpaid: | | |
| Ī | 11.1 Stockholders | | |
| Ī | 11.2 Policyholders | | |
| 12. | Ceded reinsurance premiums payable (net of ceding commissions) | | |
| 13. | Funds held by company under reinsurance treaties | | |
| 14. | Amounts withheld or retained by company for account of others | | |
| 15. | Remittances and items not allocated | | |
| 16. | Provision for reinsurance (including \$ certified) | | |
| 17. | Net adjustments in assets and liabilities due to foreign exchange rates | | |
| 18. | Drafts outstanding | | |
| 19. | Payable to parent, subsidiaries and affiliates | | 28,141 |
| 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 |
| 26. | Total liabilities excluding protected cell liabilities (Lines 1 through 25) | 1,015,685 | 500,218 |
| 27. | Protected cell liabilities | 1 015 005 | F00 010 |
| 28. | Total liabilities (Lines 26 and 27) | | |
| 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 | | 0 |
| 33. | Surplus notes Gross paid in and contributed surplus | | |
| 34. | Unassigned funds (surplus) | | |
| 35. 36. | | 2,473,013 | 1,219,952 |
| 30. | Less treasury stock, at cost: 36.1 shares common (value included in Line 30 \$ | | |
| ì | 36.2shares continuit (value included in Line 30 \$ | | |
| 37. | Surplus as regards policyholders (Lines 29 to 35, less 36) | | 17,842,374 |
| | | | |
| 38. | Totals (Page 2, Line 28, Col. 3) | 20,111,722 | 18,342,592 |
| 0504 | 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) | | |
| 2901. | | | |
| 2902. | | | |
| 2903. | Cummany of remaining write ine for Line 20 from everflow page | | |
| 2998. | Summary of remaining write-ins for Line 29 from overflow page | | 0 |
| 2999. | Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) | 0 | 0 |
| 3201. | Guaranty Fund | | 0 |
| 3202. | | | |
| 0000 | | 1 | |
| 3203. 3298. | Summary of remaining write-ins for Line 32 from overflow page | | 0 |

STATEMENT OF INCOME

| Treat Linear Li | | OTATEMENT OF INC | 1 | 2 | 3 |
|--|-----|--|-------------------------|-----------------------|---------------------------------|
| 1. Previams samed. | | | Current Year to Date | Prior Year to Date | Prior Year Ended December 31 |
| 1.1 Direct (prefilters 5.34), 31 1.78, 350 2.33, 37 1.2 Assumed cyntris 5.34, 31 1.78, 350 2.33, 37 1.2 Assumed cyntris 5.34, 31 1.78, 350 2.33, 37 1.2 Net (cyntris 5.64), 31 1.78, 350 2.33, 37 1.2 Net (cyntris 5.64), 31 1.78, 350 2.33, 37 1.3 Net (cyntris 5.64), 31 1.78, 350 2.33, 37 1.3 Leaves interarted (partners) accorded by year 5.2 2.2 Leaves 7.2 1.78, 77 5.44, 60 682, 21 2.3 Castered 1.78, 77 5.44, 60 682, 21 2.4 Seatmed 1.78, 77 5.44, 60 682, 21 2.5 Leaves 7.5 7.5 7.5 7.5 2.6 Leaves 7.5 7.5 7.5 7.5 2.7 Leaves 7.5 7.5 7.5 7.5 7.5 2.8 Leaves 7.5 7.5 7.5 7.5 7.5 2.9 Leaves 7.5 7.5 7.5 7.5 7.5 2.0 Other commonding appears incurred 1.78, 77 1.78, 78 1.78, 32 1.78, 32 3.0 Other commonding appears incurred 1.78, 78 7.5 7.5 3.0 Other commonding appears incurred 1.78, 78 7.5 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 7.5 7.5 7.5 7.5 7.5 3.0 Net condemonding appears incurred 1.78, 78 7.5 | 1 | | | | |
| 1.3 Code of Contracts 5 | 1. | | 3 913 112 | 1 728 593 | 2 333 997 |
| 1.3 Cacked (written 8 | | | | | |
| 1 A top persons 0 | | | | | |
| 2. Losses incurred (parment accident years 3 2.1 Losses incurred (parment accident years 3 2.1 Losses 1.1,22,176 648,661 662,221 2.2 Assured | | | | | |
| 2 1 Proct | | DEDUCTIONS: | | | |
| 2 A searmed | 2. | , , , | | | |
| 2 Costed | | 2.1 Direct | 1,322,176 | 648,601 | 692,321 |
| 2.4 Net | | | | | |
| 3. Loss adjustment expenses incurred 1956,963 1(15,302 115,402 1.05,302 1.05,302 1.05,302 1.05,302 1.05,302 1.05,402 1.05 | | | | | , |
| 4 Other underwriting openesies insurand | | | | | |
| 5. Aggrapate write-ins for underwriting deductions (Line 2 strough 5) | | | | | |
| 6. Total underwriting deutschares (Lines 2 through 6). 7. Net lucroare of protection cells: 8. Net underwriting gain (poss) (Line 9 in Insus Line 6 - Line 7). 8. Net underwriting gain (poss) (Line 9 in Insus Line 6 - Line 7). 8. Net underwriting gain (poss) (Line 9 in Insus Line 6 - Line 7). 8. Net underwriting gain (poss) (Line 9 in Insus Line 6 - Line 7). 8. Net underwriting gain (poss) (Line 9 in Insus Line 6 - Line 7). 8. Net underwriting gain (poss) (Line 9 in Insus Line 6 - Line 7). 8. Net revealment gain (poss) (Line 9 in Insus Line 6 in Line 7). 9. Net investment gain (poss) (Line 9 in Insus Line 6 in Line 7). 11. Net revealment gain (poss) (Line 9 in Insus Line 6 in Line 7). 12. Net gain or (loss) from agentis consumers and line of the Insus Line 7 in Line | | | | | |
| 7. Net roome of protected cells Net underwriting gain (boss) (Irm 1 minus Line 6 + Line 7) 998 883 185 882 195 482 181 183 185 182 185 182 183 185 182 185 182 183 185 183 | | Total underwriting deductions (Lines 2 through 5) | (958 983) | (165, 362) | (105, 442) |
| 8. Net underwriting gain tossy (Line 9 minus Line 6 - Line 7) | | | | (100,002) | (100,442) |
| Net Investment income earned | | Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7) | 958.983 | 165.362 | 105.442 |
| 10. Net realized capital gaines (losses) less capital gains tax of \$ | 0. | | | | |
| 10. Net realized capital gaines (losses) less capital gains tax of \$ | 9. | | 247,756 | 78,976 | 102,118 |
| 11. Not investment gain (ose) (Lines 9 + 10) | 10. | | | , | , |
| THE Not gain or (loss) from agents' or premium balances charged off (amount recovered \$ \$ amount charged off \$ \$) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 11. | | | 78,976 | 102,118 |
| S | | | | | |
| 13. Finance and service charges not included in premiums | 12. | | | | |
| 13. Finance and service charges not included in premiums | | \$ amount charged off \$ | 0 | 0 | |
| 1.5 Total other income (Lines 12 through 14) 1.5 8.5 1.5 | 13. | Finance and service charges not included in premiums | | 4,282 | 5,855 |
| 161 Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 8 + 11 + 15) | 14. | Aggregate write-ins for miscellaneous income | | - | |
| and foreign income taxes (Lines 8 + 11 + 15) | 15. | · · · · · · · · · · · · · · · · · · · | 8,544 | 4,282 | 5,855 |
| 17. Dividends to policyholders. after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17) 17. 18. | 16. | Net income before dividends to policyholders, after capital gains tax and before all other federal | 1 000 000 | 040,000 | 040 445 |
| 18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes incurred | 47 | | 1,223,680 | 248,620 | 213,415 |
| foreign income taxes (Line 16 minus Line 17) | | | | | |
| 19. Federal and foreign income taxes incurred | 10. | foreign income taxes (Line 16 minus Line 17) | 1,223,680 | 248,620 | 213,415 |
| 20. Net income (Line 18 minus Line 19)(to Line 22) 966, 707 196, 410 168, 588 | 19. | | | | 44,817 |
| 2.1 Surplus as regards policyholders, December 31 prior year 17,842,374 53,352,986 35,352,986 28, 535, | 20. | <u> </u> | 966,707 | 196,410 | 168,598 |
| 22 Net income (from Line 20) 966,707 196,410 168,588 | | CAPITAL AND SURPLUS ACCOUNT | | | |
| 23 | 21. | Surplus as regards policyholders, December 31 prior year | 17,842,374 | 35,352,964 | 35,352,964 |
| 23 | 22. | Net income (from Line 20) | 966,707 | 196,410 | 168,598 |
| 25. Change in net unrealized foreign exchange capital gain (loss) | 23. | Net transfers (to) from Protected Cell accounts | | | |
| 26. Change in net deferred income tax | 24. | Change in net unrealized capital gains (losses) less capital gains tax of \$ | 286,956 | (5,255,134) | (4,979,651) |
| 27. Change in nonadmitted assets | 25. | | | | |
| 28. Change in provision for reinsurance | 26. | Change in net deferred income tax | | | |
| 29 | 27. | <u> </u> | | | |
| 30. Surplus (contributed to) withdrawn from protected cells | | • 1 | | | 0 |
| 31. Cumulative effect of changes in accounting principles | | • . | | | |
| 32. Capital changes: 32.1 Paid in 32.2 Transferred from surplus (Stock Dividend) 32.3 Transferred from surplus (Stock Dividend) 32.3 Transferred to surplus 33.3 Transferred to surplus 33.1 Paid in 0 0 0 (13,116,203) 33.2 Transferred from capital 33.3 Transferred from capital 33.3 Transferred from capital 34. Net remittances from or (to) Home Office | | , , | | | |
| 32.1 Paid in | | | | | |
| 32.2 Transferred from surplus (Stock Dividend) 32.3 Transferred to surplus 33.3 Surplus adjustments: 33.1 Paid in | 32. | · | | | |
| 32.3 Transferred to surplus 33.5 Surplus adjustments: 33.1 Paid in | | | | | |
| 33. Surplus adjustments: | | ' ' | | | |
| 33.1 Paid in | 33. | · | | | |
| 33.2 Transferred to capital (Stock Dividend) 33.3 Transferred from capital 33.4 Net remittances from or (to) Home Office 34.5 Dividends to stockholders 35.5 Dividends to stockholders 36.5 Change in treasury stock 37.5 Aggregate write-ins for gains and losses in surplus 38.5 Change in surplus as regards policyholders (Lines 22 through 37) 1,253,663 (5,058,724) (17,510,590) 39.5 Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 19,096,037 30,294,240 17,842,374 | 00. | • • | 0 | 0 | (13.116.203) |
| 33.3 Transferred from capital 34. Net remittances from or (to) Home Office 35. Dividends to stockholders 36. Change in treasury stock 37. Aggregate write-ins for gains and losses in surplus 38. Change in surplus as regards policyholders (Lines 22 through 37). 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 50. DETAILS OF WRITE-INS 50. DETAILS OF WRITE-INS 50. Summary of remaining write-ins for Line 5 from overflow page 50. Details (Lines 0501 through 0503 plus 0598)(Line 5 above) 50. Details (Lines 1401 through 1403 plus 1498)(Line 14 above) 50. Details (Lines 1401 through 1403 plus 1498)(| | | | | |
| 34. Net remittances from or (to) Home Office | | . , | | | |
| 36. Change in treasury stock | 34. | · | | | |
| 37. Aggregate write-ins for gains and losses in surplus 0 0 416,666 38. Change in surplus as regards policyholders (Lines 22 through 37). 1,253,663 (5,058,724) (17,510,590) 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 19,096,037 30,294,240 17,842,374 DETAILS OF WRITE-INS 0501. | 35. | | | | |
| 38. Change in surplus as regards policyholders (Lines 22 through 37). 1,253,663 (5,058,724) (17,510,590) 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) 19,096,037 30,294,240 17,842,374 DETAILS OF WRITE-INS 0501. 0502. 0503. 0598. Summary of remaining write-ins for Line 5 from overflow page | 36. | Change in treasury stock | | | 0 |
| 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS 0501. 0502. 0503. 0598. Summary of remaining write-ins for Line 5 from overflow page. 0 0 0 0 0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 1401. 1402. 1403. 1498. Summary of remaining write-ins for Line 14 from overflow page. 1498. Summary of remaining write-ins for Line 14 from overflow page. 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 3701. G00DWILL ON ROADRUNNER INDEMNITY COMPANY 3703. 30, 294, 240 17, 842, 374 19, 096, 037 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 37. | Aggregate write-ins for gains and losses in surplus | | | |
| DETAILS OF WRITE-INS 0501 | 38. | Change in surplus as regards policyholders (Lines 22 through 37) | | | |
| 0501. 0502. 0503. 0503. 0503. 0503. 0503. 0503. 0509. <td< td=""><td>39.</td><td><u> </u></td><td>19,096,037</td><td>30,294,240</td><td>17,842,374</td></td<> | 39. | <u> </u> | 19,096,037 | 30,294,240 | 17,842,374 |
| 0502. 0503. 0503. 0503. 0503. 0509. <td< td=""><td></td><td></td><td></td><td></td><td></td></td<> | | | | | |
| 0503. 0598. Summary of remaining write-ins for Line 5 from overflow page 0 0 0 0 0 0 0 0 0 | | | | | |
| 0598. Summary of remaining write-ins for Line 5 from overflow page 0 0 0 0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0 0 0 1401. | | | | | |
| 0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) 0 0 0 1401 | | | | | |
| 1401. | | , , | | | |
| 1402. 1403. | 1 | , | | | |
| 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. GOODWILL ON ROADRUNNER INDEMNITY COMPANY 416,666 3702. 3703. 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0 0 | | | | | |
| 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) 0 0 0 3701. GOODWILL ON ROADRUNNER INDEMNITY COMPANY 416,666 3702. 3703. 3703. 3703. 3703. 0 | | | | | |
| 3701. GOODWILL ON ROADRUNNER INDEMNITY COMPANY | | , , , | | | _ |
| 3702 | | | | | |
| 3703 | | | | | |
| 3798. Summary of remaining write-ins for Line 37 from overflow page | | | | | |
| | | Summary of remaining write-ins for Line 37 from overflow page | | _ | 0 |
| · · · · · · · · · · · · · · · · · · · | | Totals (Lines 3701 through 3703 plus 3798)(Line 37 above) | | 0 | 416,666 |

CASH FLOW

| | | | 2 | |
|-----|--|-------------------|-----------------|-----------------------|
| | | 1 Current Year | 2 Prior Year | 3 Prior Year Ended |
| | | To Date | To Date | December 31 |
| | Cash from Operations | | | |
| 1. | Premiums collected net of reinsurance | | | |
| 2. | Net investment income | | | |
| 3. | Miscellaneous income | 8,544 | 4,282 | 5,855 |
| 4. | Total (Lines 1 to 3) | (281,843) | (41,230) | (55,524) |
| 5. | Benefit and loss related payments | | | |
| 6. | Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | 0 |
| 7. | Commissions, expenses paid and aggregate write-ins for deductions | | | |
| 8. | Dividends paid to policyholders | 0 | 0 | 0 |
| 9. | Federal and foreign income taxes paid (recovered) net of \$ tax on capital | | | |
| | gains (losses) | 0 | 0 | 0 |
| 10. | Total (Lines 5 through 9) | (898,755) | (154,884) | (221, 144) |
| 11. | Net cash from operations (Line 4 minus Line 10) | 616,912 | 113,654 | 165,620 |
| | Cash from Investments | | | |
| 12. | Proceeds from investments sold, matured or repaid: | | | |
| | 12.1 Bonds | 502.082 | 277.441 | 289.603 |
| | 12.2 Stocks | | | |
| | 12.3 Mortgage loans | | | |
| | 12.4 Real estate | | | |
| | 12.5 Other invested assets | | | |
| | 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | | | |
| | 12.7 Miscellaneous proceeds | 0 | 0 | 0 |
| | 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 502,082 | 277,441 | 27,528,228 |
| 13. | Cost of investments acquired (long-term only): | , | , | , , |
| | 13.1 Bonds | 3.723.525 | 212.548 | 212.548 |
| | 13.2 Stocks | | | |
| | 13.3 Mortgage loans | 0 | 0 | 0 |
| | 13.4 Real estate | | | |
| | 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) | 3,723,525 | 212,548 | 9,474,970 |
| 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) | (3,221,443) | 64,893 | 18,053,258 |
| | | | | |
| 16 | Cash from Financing and Miscellaneous Sources | | | |
| 16. | Cash provided (applied): | | 0 | ^ |
| | 16.1 Surplus notes, capital notes | | | 0 |
| | 16.2 Capital and paid in surplus, less treasury stock | | 0 | (13,116,203) |
| | 16.4 Net deposits on deposit-type contracts and other insurance liabilities | | 0 | 0 |
| | | | 0 | _ |
| | | 4,893,205 | 3.760 | 0 |
| 17. | 16.6 Other cash provided (applied) | 4,695,205 | 3,700 | (4,893,188) |
| .,. | plus Line 16.6) | 4,893,205 | 3,760 | (18,009,391) |
| | RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| 18. | Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17). | 2,288,674 | 182,307 | 209,487 |
| 19. | Cash, cash equivalents and short-term investments: | ,, | , | |
| | 19.1 Beginning of year | 720,016 | 510,529 | 510,529 |
| | 19.2 End of period (Line 18 plus Line 19.1) | 3,008,690 | 692,836 | 720,016 |

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

| | SSAP# | F/S Page | F/S Line # | 2024 | | 2023 |
|--|-----------------|---------------|---------------|------------------|----|------------|
| NET INCOME (1) State basis (Page 4, Line 20, Columns 1 & 3) | XXX | XXX | XXX | \$ 966,707 | \$ | 168,598 |
| (2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP: | | | | | | |
| (3) State Permitted Practices that are an increase/(decrease) from NAIC SAP: | | | | | | |
| (4) NAIC SAP (1-2-3=4) | XXX | xxx | xxx | \$ 966,707 | \$ | 168,598 |
| SURPLUS (5) State basis (Page 3, Line 37, Columns 1 & 2) | xxx | XXX | XXX | \$ 19,096,037 | \$ | 17,842,374 |
| (6) State Prescribed Practices that are an increase/(decrease | e) from NAIC SA | AP: | | | | |
| (7) State Permitted Practices that are an increase/(decrease) | from NAIC SAF | > : | | | | |
| (8) NAIC SAP (5-6-7=8) | xxx | XXX | XXX | \$ 19,096,037 | \$ | 17,842,374 |

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

Accounting Policy

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

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

In addition, the company uses the following accounting policies:

(1) Basis for Short-Term Investments

The company does not have any short-term investments at this time.

(2) Basis for Bonds and Amortization Schedule

Bonds not backed by other loans are stated at amortized cost using the scientific method

(3) Basis for Common Stocks

The company does not have any common stocks at this time

(4) Basis for Preferred Stocks

The company does not have any preferred stocks at this time.

(5) Basis for Mortgage Loans

The company does not have any Mortgage Loans

(6) Basis of Loan-Backed Securities and Adjustment Methodology

Loan-backed securities are stated at amortized cost

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities The company carries Roadrunner Indemnity Company on an equity basis.

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities

The company has no investment in joint ventures, partnerships or limited liability companies

(9) Accounting Policies for Derivatives

The company has no derivative instruments

(10) Anticipated Investment Income used in Premium Deficiency Calculation

The company anticipates invesment income as a factor in the premium deficiency calculation in accordance with SSAP No 53, PC Contracts - Premiums.

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss / Claim Adjustments Expenses

Unpaid losses and loss adjustment expenses includes an amount determined from individual case estimates and loss reports and an amount based on past experiences, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequated, the ultimate liability may be in excess of or less than the amount provided.

The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the

(12) Changes in Capitalization Policy and predefined thresholds from prior period

The company has not modified its capitalization policy

(13) Method Used to Estimated Pharmaceutical Rebate Receivables

The company does not have any pharmaceutical rebate receivables

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

Effective 12/31/2023, Insurors Financial Corp. (IFC) reorganized its three insurance companies and injected an additional \$3,000,000 into the group to affect an increase in surplus in Insurors Indemnity Company (Company), the resulting top-tier company.

Prior to the reorganization, Insurors Indemnity Select Insurance Company (Select) was the parent of IIC which was the parent of Roadrunner Indemnity Company (Roadrunner).

Post reorganization, Company is the parent of Select which is now the parent of Roadrunner.

To accomplish this, Select acquired all of the outstanding common stock in Roadrunner via a transfer of such stock by Company.

IFC acquired all of the outstanding

Common stock in Company through a transfer of such stock by Select. Company acquired all of the outstanding common stock in Select through a contribution of such stock by IFC.

Prior to the reorganization, Insurors Financial Corp. contributed \$3,000,000 to Select as surplus, Immediately following the reorganization, Insurors Indemnity Company contributed \$1,860,000 to Select. The transactions were obligations that were satisfied on January 31, 2024 by cash payments.

Statutory Purchase Method

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

| 1 | 2 | 3 | 4 | 5 |
|------------------------------|---------------------|----------------------------|--------------------------------|--|
| Purchased Entity | Acquisition Date | Cost of Acquired Entity | Original Amount of Goodwill | Original Amount of Admitted Goodwill |
| ROADRUNNER INDEMNITY COMPANY | 12/31/2023 | \$ 9,262,422 | \$ 500,000 | \$ 500,000 |
| Total | XXX | \$ 9,262,422 | \$ 500,000 | \$ 500,000 |

| 1 Purchased Entity | 6 Admitted Goodwill as of the Reporting Date | 7 Amortized During the Reporting Period | 8 Book Value of SCA | 9 Admitted Goodwill Col. 6/Col. 8 |
|------------------------------|---|--|---------------------------|--|
| ROADRUNNER INDEMNITY COMPANY | \$ 120,833 | \$ 12,500 | \$ 9,549,378 | 1.3% |
| Total | \$ 120,833 | \$ 12,500 | \$ 9,549,378 | XXX |

B. Statutory Merger

none

Impairment Loss

none

Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

none

NOTE 4 Discontinued Operations

The company has no discontiued operations

NOTE 5 Investments

Mortgage Loans, including Mezzanine Real Estate Loans

The company has no mortgage loans at this time

Debt Restructuring B.

The company has no debt restructuring

Reverse Mortgages

The company has no reverse mortgages

D. Loan-Backed Securities

(1) Prepayment assumptions are obtained by our portfolio manager from broker dealer survey values. These assumptions are consistent with the current interest rate and economic environment.

Bonds in an unrealized loss position are regularly reviewed for other-than-temporary declines in value. Factors considered in determining whether a decline is other-than-temporary include the length of time a bond has been in an unrealized loss position and the reasons for the decline in value. Assessments include judgments about an obligator's or guarantor's value for any collateral backing the obligations and the macro-economic and micro-economic outlooks for specific underlying collateral such as prepayment rates, default and recovery rates, existence of subordinated classes capable of absorbing losses and third party servicing abilities.

Dollar Repurchase Agreements and/or Securities Lending Transactions

The company has no repurchase agreements or securities lending transactions

Repurchase Agreements Transactions Accounted for as Secured Borrowing

The company has no repurchase agreement transactions accounted for as secured borrowing

Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing G.

The company has no reverse repurchase agreement transactions accounted for as secured borrowing

Repurchase Agreements Transactions Accounted for as a Sale

The company has no repurchase agreement transactions accounted for as a sale

Reverse Repurchase Agreements Transactions Accounted for as a Sale

The company has no reverse repurchase agreement transactions accounted for as a sale

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

- (3) The company has no plans to sale for an investment in real estate.
- (4) The company does not engage in retail land sales operations.
- (5) The company has no mortgage loan real estate

Low Income Housing tax Credits (LIHTC)

The company has no investments in low income housing tax credits

Restricted Assets

The company does not have any restricted assets

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

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

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

The company does not have any other restricted assets

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

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

Working Capital Finance Investments M.

The company has no working capital finance investments

Offsetting and Netting of Assets and Liabilities

The company has no derivative, repurchase and reverse repurchase securities

5GI Securities Ο.

The company does not have any 5GI securities

Short Sales

The company does not have any short sales

Prepayment Penalty and Acceleration Fees Q.

The company does not have any prepayment penalty or acceleration fees

Reporting Entity's Share of Cash Pool by Asset Type

The company does not have any entity share of cash pool by asset type

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

The company has no joint ventures, partnerships or limited liability companies

NOTE 7 Investment Income

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

NOTE 8 Derivative Instruments

The company has no derivative Instruments

NOTE 9 Income Taxes

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

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

 1. The company does not have any net deferred tax asset at the end of the current period
- The company does not have any unrecognized deferred tax liabilities В.
- C. Current income taxes incurred consist of the following major components:

| 1. | Current Income Tax |
|----|---|
| | (a) Federal |
| | (b) Foreign |
| | (c) Subtotal (1a+1b) |
| | (d) Federal income tax on net capital gains |
| | (e) Utilization of capital loss carry-forwards |
| | (f) Other |
| | (g) Federal and foreign income taxes incurred (1c+1d+1e+1f) |
| | |
| 2 | Deferred Tay Assets: |

(a) Ordinary:

- (1) Discounting of unpaid losses
- (2) Unearned premium reserve
- (3) Policyholder reserves
- (4) Investments
- (5) Deferred acquisition costs

| (1) As of End of | | | | (3) (Col. 1 - 2) | | |
|---------------------|----|------------|----|---------------------|--|--|
| Current Period | | 12/31/2023 | | `Change ´ | | |
| \$ 256,973 | \$ | 44,817 | \$ | 212,156 | | |
| | | | \$ | - | | |
| \$ 256,973 | \$ | 44,817 | \$ | 212,156 | | |
| | | | \$ | - | | |
| | | | \$ | - | | |
| | | | \$ | - | | |
| \$ 256,973 | \$ | 44,817 | \$ | 212,156 | | |
| | | | | | | |
| | | | | | | |
| | | | \$ | - | | |
| | | | \$ | - | | |
| | | | \$ | - | | |
| | | | \$ | - | | |
| | | | \$ | - | | |
| | | | | | | |

| (6) Policyholder dividende econyal | I | l | J | e I |
|--|----------|------|---|------|
| (6) Policyholder dividends accrual | |] | | \$ - |
| (7) Fixed assets | |] | | \$ - |
| (8) Compensation and benefits accrual | | | | \$ - |
| (9) Pension accrual | | | | \$ - |
| (10) Receivables - nonadmitted | | | | \$ - |
| (11) Net operating loss carry-forward | | | | \$ - |
| (12) Tax credit carry-forward | | | | \$ - |
| (13) Other | | | | \$ - |
| (99) Subtotal (sum of 2a1 through 2a13) | \$ | - \$ | - | \$ - |
| (b) Statutory valuation allowance adjustment | | | | \$ - |
| (c) Nonadmitted | | | | \$ - |
| (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c) | \$ | - \$ | - | \$ - |
| (e) Capital: | | | | |
| (1) Investments | | | | \$ - |
| (2) Net capital loss carry-forward | | | | \$ - |
| (3) Real estate | | | | \$ - |
| (4) Other | | | | \$ - |
| (99) Subtotal (2e1+2e2+2e3+2e4) | \$ | - \$ | - | \$ - |
| (f) Statutory valuation allowance adjustment | | | | \$ - |
| (g) Nonadmitted | | | | \$ - |
| (h) Admitted capital deferred tax assets (2e99 - 2f - 2g) | \$ | - \$ | - | \$ - |
| (i) Admitted deferred tax assets (2d + 2h) | \$ | - \$ | - | \$ - |
| | | | | |
| 3. Deferred Tax Liabilities: | | | | |
| (a) Ordinary: | | | | |
| (1) Investments | | | | \$ - |
| (2) Fixed assets | | | | \$ - |
| (3) Deferred and uncollected premium | | | | \$ - |
| (4) Policyholder reserves | | | | \$ - |
| (5) Other | | | | \$ - |
| (99) Subtotal (3a1+3a2+3a3+3a4+3a5) | \$ | - \$ | - | \$ - |
| (b) Capital: | | | | |
| (1) Investments | | | | \$ - |
| (2) Real estate | | | | \$ - |
| (3) Other | | | | \$ - |
| (99) Subtotal (3b1+3b2+3b3) | \$ | - \$ | | \$ - |
| (c) Deferred tax liabilities (3a99 + 3b99) | \$ | - \$ | | \$ - |
| 4. Net deferred tax assets/liabilities (2i - 3c) | \$ | - \$ | | \$ - |
| (2001), 1100 (21 00) | <u> </u> | | | - |

- The provision for federal income taxes is different from that which would be obtained by applying the enacted federal income tax rate to income before taxes
- (1) Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits: NONE
 - (2) The income tax expense for the current year and prior years that is available for recoupment in the event of future losses is: -0-
 - (3) The Company's aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Service Code was -0- at September 30, 2024.
- 1.The Company's federal income tax return is consolidated with the following entities:

Insurors Financial Corp.EIN: 74-2505719 Insurors Financial Corp.EIN: 74-205719
Insurors Indemnity CompanyEIN: 74-2262949
Roadrunner Indemnity CompanyEIN: 75-1791515
ValueSure Agency, Inc.EIN: 75-2908348
Insurors Indemnity General Agency, Inc. EIN: 74-2760157

- G. Federal or Foreign Federal Income Tax Loss Contingencies: NONE
- Repatriation Transition Tax (RTT) not applicable
- Alternative Minimum Tax (AMT) Credit not applicable

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

 A. Insurors Financial Corp. owns 100% of Insurors Indemnity Company which owns 100% of Insurors Indemnity Select Insurance Company which owns 100% of Roadrunner Indemnity Company.

 Insurors Financial Corp. owns 100% of Insurors Indemnity General Agency, Inc. which owns 100% of ValueSure Agency, Inc. These entities are affiliates of the
- Transactions On December 31, 2023 Insurors Financial Corp, committed to contribute \$3,000,000 to the surplus of Insurors Indemnity Select which was set up as receivable on Company's statement. On December 31, 2023 following the reorganization described in Note 3, Insurors Indemnity Company contributed \$1,860,000 to the surplus of Insurors Indemnity Select. These transactions were considered in HCS # 1148324 Exemption filing.

 All other transactions between the affiliates in excess of the limits of Chapter 823.102 have been submitted to the TDI for review and approval or no action.
- C Transactions with related party who are not reported on Schedule Y NONE
- D.

D.Amounts due to or from Related Parties
The company does not have any amounts due related parties at this time.

E.Material Contracts with Affiliates

The company has a Managing General Agency Agreement with its affiliate, Insurors Indemnity General Agency, Inc., dba Insurors Indemnity Underwriters (IIU). Under the agreement, IIU has the authority to carry out the day-to-day operations of Insurors Indemnity and its affiliates through IIU's employees. Insurors Indemnity Company has an affiliated reinsurance agreement with Insurors Indemnity Select (IIS) and Roadrunner Indemnity Company, covering 100% of the

business written by each.

The company's federal income tax return is consolidated with Insurors Financial Corp, Insurors Indemnity Company, Roadrunner Indemnity Company, Insurors Indemnity General Agency, Inc. and ValueSure Agency, Inc. effective April 1, 2022.

- There are no guarantees or undertakings for related parties
- G. G.Nature of the Relationship

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

- There is no amount deducted from the value of an upstream intermediate entity
- I.Investments in SCA that Exceed 10% of Admitted Assets

The Company owns 100% of Roadrunner Indemnity Company. This common stock investment is recorded at its statutory equity value of \$8,825,708.

- J. The company has no investments in impaired SCA's
- There are no investments in a foreign insurance subsidiary
- There is no investment in a downstream noninsurance holding company
- The company does not have any investments in non-insurance subsidiary controlled and affiliated entities
- The company has no investments in SCA entities utilizing prescribed or permitted practices N.
- The company has no SCA Loss tracking Ο.

NOTE 11 Debt

- The company has no debt notes
- FHLB (Federal Home Loan Bank) Agreements
 - (1) The comany does not have an agreement with FHLB

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

Defined Benefit Plan

NONE

Investment Policies and Strategies В.

The company has an investment policy and strategy that they follow

- The fair value of each class of plan assets
 - The Company has no fiar value of plan assets
- Basis Used to Determine Expected Long-Term Rate of Return

The company has no expected long term rate of return

E. **Defined Contribution Plan**

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

Multiemployer Plans

the company does not participate in a multiemployer plan

Consolidated/Holding Company Plans

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

- Postemployment Benefits and Compensated Absences
 - The company has no postemployment benefits and compensated absences
- Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) The company has no defined plan for which this medicare act applies ١.

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

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

The company does not have a surplus debenture

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

The company had no quasi-reorganization

Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization The company has had no quasi-reorganization in the past ten years

NOTE 14 Liabilities, Contingencies and Assessments

Contingent Commitments

The company does not have any contingent commitments

B. Assessments

The company is not aware of any assessments which could have a material financial effect.

Gain Contingencies

The company has no gain contingencies

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits The company has no pending legal proceedings which could result in gain contingencies.

Product Warranties

The company does not have any product warranties

Joint and Several Liabilities

The company does not have any joint and several liabilities

All Other Contingencies

The company does not have any other contingencies

NOTE 15 Leases

Lessee Operating Lease:

(1) The company has no lessee operating lease.

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

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

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

Transfers of Receivables Reported as Sales The company has no transfer of receivables reported as sales

Transfer and Servicing of Financial Assets В.

The company has no transfer and servicing of financial assets to report

Wash Sales C.

The company has no wash sales to report

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

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

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

| Name and Address of Managing General Agent or Third Party Administrator | FEIN NUMBER | Exclusive Contract | Types of Business Written | Type of Authority Granted | P | otal Direct remiums Written/ oduced By |
|---|----------------|-----------------------|------------------------------|------------------------------|----|---|
| iMGA, LLC | 27-0771349 | No | Surplus Lines | Р | \$ | 4,317,563 |
| Denali Specialty Group, LLC | | No | Surplus Lines | Р | \$ | 25,171 |
| Total | XXX | XXX | XXX | XXX | \$ | 4,342,734 |

C - Claims Payment

CA - Claims Adjustment

R - Reinsurance Ceding B - Binding Authority P - Premium Collection

U - Underwriting

NOTE 20 Fair Value Measurements

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

(1) Fair Value Measurements at Reporting Date

| Description for each class of asset or liability | (Level 1) | (Level 2) | (Level | 3) | Net Asset Value (NAV) | Total |
|--|-----------------|-----------------|--------|----|--------------------------|-----------------|
| a. Assets at fair value | | | | | | |
| CASH EQUIVALENTS | \$ 153,613 | | | | | \$ 153,613 |
| BONDS | \$ 2,196,672 | \$ 3,553,334 | | | | \$ 5,750,006 |
| Total assets at fair value/NAV | \$ 2,350,285 | \$ 3,553,334 | \$ | - | \$ - | \$ 5,903,619 |

- (2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy The company has no assets or liabilities that are Level 3
- (3) Policies when Transfers Between Levels are Recognized The company has no assets / liabilities transferred between levels

- (4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement Fair values for the company's protfolio are provided by our investment custodian.
- (5) The company has no derivative assets or liabilities
- Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements 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 | Adı | nitted Assets | (Level 1) | (Level 2) | (Level 3) | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
|---------------------------------|-------------------------|-----|---------------|-----------------|-----------------|-----------|--------------------------|-------------------------------------|
| CASH EQUIVALENTS | \$ 5,750,006 | \$ | 5,630,887 | \$ 2,196,672 | \$ 3,553,334 | · | | |
| BONDS | \$ 153,613 | \$ | 153,613 | \$ 153,613 | | | | |

Not Practicable to Estimate Fair Value

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

NAV Practical Expedient Investments F The company has no NAV practical expedient investments

NOTE 21 Other Items

Unusual or Infrequent Items

The company does not have any unusual or infrequent items

Troubled Debt Restructuring: Debtors
The company has no troubled debt restructuring debtors

Other Disclosures

The company has no other disclosures

D. Business Interruption Insurance Recoveries

The company had no business interruption insurance recoveries

E. State Transferable and Non-transferable Tax Credits

The company had no state transferrable and non-transferrable tax credits this year.

F.

Subprime Mortgage Related Risk Exposure
The company had no subprime mortgage related risk exposure

Insurance-Linked Securities (ILS) Contracts

The company had no 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 company has no life insurance where the reporting entity is owner and beneficiary or has otherwise obtained rights to control the policy.

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:

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

Type II – Nonrecognized Subsequent Events: NONE

NOTE 23 Reinsurance

Unsecured Reinsurance Recoverables

The company does not have any unsecured reinsurance recoverables exceeding 3% of policyholder surplus

Reinsurance Recoverable in Dispute

The company does not have any reinsurance recovarable in dispute

Reinsurance Assumed and Ceded

(1)

| | , | Assumed I | Reinsuran | ce | Ceded R | einsuranc | е | N | et | |
|----------------|----|---------------|-----------|------------------|--------------------|-----------|------------------|------------------------|----|--------------------|
| | | mium serve | | mission quity | Premium Reserve | | mission quity | Premium Reserve | | nmission Equity |
| a. Affiliates | | | | | \$ 5,304,331 | | | \$ (5,304,331) | \$ | - |
| b. All Other | | | | | | | | \$ - | \$ | - |
| c. Total (a+b) | \$ | - | \$ | - | \$ 5,304,331 | \$ | - | \$ (5,304,331) | \$ | - |

d. Direct Unearned Premium Reserve

(2)

| | Direct | | Assu | med | Ceded | | Ne | et |
|---|--------|---|------|-----|-------|---|----|----|
| a. Contingent Commission | | | | | | | \$ | - |
| b. Sliding Scale Adjustments | | | | | | | \$ | - |
| c. Other Profit Commission Arrangements | | | | | | | \$ | - |
| d. TOTAL (a+b+c) | \$ | - | \$ | - | \$ | - | \$ | - |

(3)

Uncollectible Reinsurance

The company does not have any uncollectible reinsurance to report.

Commutation of Reinsurance Reflected in Income and Expenses.

The company has no commutatiion of reinsurance to report for the current year.

The company has no retroactive reinsurance agreements

Reinsurance Accounted for as a Deposit

The company does not have any reinsurance agreement determined to be of a deposit type nature

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

The company has no transfer of property and casualty run off agreements

Certified Reinsurer Rating Downgraded or Status Subject to Revocation

The company has no certified reinsurer rating downgrades or status subject to revocation

Reinsurance Agreements Qualifying for Reinsurer Aggregation
The company has no reinsurance agreements qualifying for reinsuer aggregation

Reinsurance Credit

the company does not have any reinsurance contracts subject to A-791 that limits the reinsurer's assumption of significant risks identified as A-791

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

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

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

B. Information about Significant Changes in Methodologies and Assumptions

NOTE 26 Intercompany Pooling Arrangements

The company had no pooling arrangements

NOTE 27 Structured Settlements

The company has no structured settlements

NOTE 28 Health Care Receivables

The company does not write Health insurance

NOTE 29 Participating Policies

The company does not issue participating policies

NOTE 30 Premium Deficiency Reserves

The company is not required to have a premium deficiency at this time.

NOTE 31 High Deductibles

The company has no reserve credit recored for high deductibles on unpaid claims

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

The company does not discount liabilities for unpaid losses or unpaid loss adjustment expenses

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

NOTE 34 Subscriber Savings Accounts

The company is not a reciprocol insurance company and does not have subscriber savings accounts

NOTE 35 Multiple Peril Crop Insurance

The company does not write Crop Insurance

NOTE 36 Financial Guaranty Insurance

The company does not sell Financial Guaranty Insurance

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

| 1.1 | Did the reporting entity experience any material transactions requiring the Domicile, as required by the Model Act? | | | | | Yes [|] No [X |] |
|-----|--|------------------------------------|---|-----------------------|---------------------|-----------------|----------|-----|
| 1.2 | If yes, has the report been filed with the domiciliary state? | | | | | Yes [|] No [|] |
| 2.1 | Has any change been made during the year of this statement in the char 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 Syste is an insurer? | | | | | h Yes [X |] No [|] |
| 3.2 | Have there been any substantial changes in the organizational chart sind | ce the prior qu | arter end? | | | Yes [|] No [|] |
| 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 gra | oup? | | | | Yes [|] No [X |] |
| 3.5 | If the response to 3.4 is yes, provide the CIK (Central Index Key) code is | ssued by the S | EC for the entity/group. | | | | | |
| 4.1 | Has the reporting entity been a party to a merger or consolidation during | the period cov | vered by this statement | ? | | Yes [|] No [X |] |
| 4.2 | If yes, provide the name of the entity, NAIC Company Code, and state of ceased to exist as a result of the merger or consolidation. | of domicile (use | two letter state abbrev | iation) for any entit | y that has | | | |
| | 1 Name of Entity | | 2 NAIC Company Code | 3 State of Domicil | e | | | |
| 5. | If the reporting entity is subject to a management agreement, including the in-fact, or similar agreement, have there been any significant changes really yes, attach an explanation. | third-party adm egarding the te | inistrator(s), managing rms of the agreement c | general agent(s), a | uttorney- ed? Ye | es [] No [| X] N/A | [] |
| 6.1 | State as of what date the latest financial examination of the reporting en | ntity was made | or is being made | | | <u>12/</u> : | 31/2022 | |
| 6.2 | State the as of date that the latest financial examination report became a date should be the date of the examined balance sheet and not the date | | | | | | 31/2022 | |
| 6.3 | State as of what date the latest financial examination report became avaithe reporting entity. This is the release date or completion date of the ex date). | kamination repo | ort and not the date of t | he examination (ba | alance sheet | t | 31/2024 | |
| 6.4 | By what department or departments? TEXAS DEPARTMENT OF INSURANCE | | | | | | | |
| 6.5 | Have all financial statement adjustments within the latest financial exam statement filed with Departments? | | | | | es [X] No [|] N/A | [] |
| 6.6 | Have all of the recommendations within the latest financial examination | report been co | mplied with? | | Ye | es [X] No [|] N/A | [|
| 7.1 | Has this reporting entity had any Certificates of Authority, licenses or reg revoked by any governmental entity during the reporting period? | | | | | |] No [X |] |
| 7.2 | If yes, give full information: | | | | | | | |
| 8.1 | Is the company a subsidiary of a bank holding company regulated by the | e Federal Rese | erve Board? | | | Yes [|] No [X |] |
| 8.2 | If response to 8.1 is yes, please identify the name of the bank holding co | | | | | | | |
| 8.3 | Is the company affiliated with one or more banks, thrifts or securities firm | | | | | |] No [X |] |
| 8.4 | If response to 8.3 is yes, please provide below the names and location (cregulatory services agency [i.e. the Federal Reserve Board (FRB), the O Insurance Corporation (FDIC) and the Securities Exchange Commission | Office of the Co | mptroller of the Curren | cy (OCC), the Fede | eral Deposit | | | |
| | 1 Affiliate Name | Lo | 2 ocation (City, State) | 3 FRB | 4 OCC F | 5 6 FDIC SEC | | |
| | | | | | | |] | |

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? | conal and professional | Yes [| X] No [] |
|--------------|--|---------------------------------|---------|----------------------------------|
| | (c) Compliance with applicable governmental laws, rules and regulations; | ing entity, | | |
| | (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 9.21 | Has the code of ethics for senior managers been amended? | | . Yes [|] No [X] |
| | | | | |
| 9.3 | Have any provisions of the code of ethics been waived for any of the specified officers? | | Yes [|] No [X] |
| 9.31 | If the response to 9.3 is Yes, provide the nature of any waiver(s). | | | |
| | FINANCIAL | | | |
| 10.1 | Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? | | 1 20V | 1 No [Y 1 |
| 10.2 | If yes, indicate any amounts receivable from parent included in the Page 2 amount: | | | |
| | | | | |
| | INVESTMENT | | | |
| | Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or oth use by another person? (Exclude securities under securities lending agreements.) | | Yes [|] No [X] |
| | | | | |
| 12. | Amount of real estate and mortgages held in other invested assets in Schedule BA: | | | |
| 13. | Amount of real estate and mortgages held in short-term investments: Does the reporting entity have any investments in parent, subsidiaries and affiliates? | | | |
| 14.1 14.2 | If yes, please complete the following: | | res [| X] No [] |
| | | 1 | | 2 |
| | | Prior Year-End Book/Adjusted | | Current Quarter Book/Adjusted |
| | | Carrying Value | | Carrying Value |
| | Bonds | | \$ | |
| 14.22 | Preferred Stock | 30 | \$ | |
| | Common Stock | | \$ | 9,549,378 |
| 14.24 | Short-Term Investments | 30 | | |
| | Mortgage Loans on Real Estate | | | |
| | All Other | | | |
| | Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | | | 9,549,378 |
| 15.1 | Has the reporting entity entered into any hedging transactions reported on Schedule DB? | | - |] 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. | | | [] N/A [X] |
| 16. | For the reporting entity's security lending program, state the amount of the following as of the current statement date | | | |
| | 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, Pa | | | |
| | 16.3 Total payable for securities lending reported on the liability page | | \$ | 0 |

GENERAL INTERROGATORIES

| 17. 17.1 | offices, vaults or safety custodial agreement w Outsourcing of Critical | y deposit boxes, w rith a qualified bar Functions, Custo | Special Deposits, real estate, movere all stocks, bonds and other sik or trust company in accordance dial or Safekeeping Agreements requirements of the NAIC Finance | securities, owno ce with Section of the NAIC Fi | ed throughout 1, III - Genera nancial Condi | the current year al Examination Cotion Examiners H | held pursuant to a onsiderations, F. andbook? | Yes | [X] No [|] |
|--------------|---|--|---|---|--|---|---|-----|---|-----|
| | | 1 | adian(a) | | | 2 Custodian Addr | | | | |
| | US BANK | Name of Cust | odian(s) | . BIRMINGHAM, | AL | Custodian Addr | | | | |
| 17.2 | For all agreements that location and a comple | | rith the requirements of the NAIC | Financial Con | dition Examin | ers Handbook, pi | rovide the name, | | | |
| | 1 | te explanation. | 2 | | | 3 | | | | |
| | Name(| s) | Location(s) | | | Complete Expla | nation(s) | | | |
| 17.3 17.4 | Have there been any of lf yes, give full information | | name changes, in the custodian to: | ı(s) identified ir | 17.1 during t | he current quarte | r? | Yes | [] No [| Х] |
| | 1 Old Custo | odian | 2 New Custodian | Date | 3 of Change | | 4 Reason | | | |
| 17.5 | make investment deci | sions on behalf of | vestment advisors, investment m the reporting entity. For assets the tment accounts"; "handle secur | nat are manage rities"] | ed internally b | | | | | |
| | NEW ENGLAND ASSET MA | Name of Firm NAGEMENT, INC | or Individual | 2 Affilia U | ition | | | | | |
| | | | d in the table for Question 17.5, o | | | | | Yes | [X] No [|] |
| | | | d with the reporting entity (i.e. des t aggregate to more than 50% of | | | | | Yes | [X] No [|] |
| 17.6 | For those firms or inditable below. | viduals listed in th | e table for 17.5 with an affiliation | code of "A" (at | filiated) or "U | " (unaffiliated), pr | ovide the information for t | he | | |
| | 1 Central Registration | | 2 | | | 3 | 4 | | 5 Investment Managemen Agreement | ıt |
| | Depository Number | | Name of Firm or Individual | | Legal Entity | y Identifier (LEI) | Registered With | | (IMA) Filed | |
| | | NEW ENGLAND ASSE | T MANAGEMENT, INC | | KURB5EPS4GQF | F2TFC130 | U.S. SECURITIES AND EXC | | N0 | |
| 18.1 18.2 | Have all the filing requ If no, list exceptions: | irements of the Pi | urposes and Procedures Manual | of the NAIC In | estment Ana | llysis Office been | followed? | Yes | [X] No [|] |
| 19. | a. Documentation security is not a b. Issuer or obligo c. The insurer has | necessary to perr available. r is current on all an actual expecta | eporting entity is certifying the follomit a full credit analysis of the sec contracted interest and principal pation of ultimate payment of all co 5GI securities? | curity does not payments. | exist or an NA | AIC CRP credit ra | ting for an FE or PL | Yes | [] No [| Х] |
| 20. | a. The security was b. The reporting er c. The NAIC Designon a current privid. The reporting er | s purchased prior ntity is holding cap nation was derive rate letter rating hour ntity is not permitte | reporting entity is certifying the foto January 1, 2018. ital commensurate with the NAIC d from the credit rating assigned eld by the insurer and available for the share this credit rating of the DI Characterists. | C Designation r by an NAIC Cl or examination e PL security w | eported for the RP in its legal by state insur ith the SVO. | e security. capacity as a NF ance regulators. | SRO which is shown | v | | V 1 |
| 21. | By assigning FE to a S FE fund: a. The shares were b. The reporting er | Schedule BA non- e purchased prior ntity is holding cap | PLGI securities? registered private fund, the report to January 1, 2019. ital commensurate with the NAIC ting(s) with annual surveillance a | ting entity is ce | rtifying the fol | lowing elements e security. | of each self-designated | Yes | [] No [| Х] |
| | January 1, 2019 d. The fund only or e. The current repo in its legal capac f. The public credit | predominantly ho orted NAIC Desigr city as an NRSRO rating(s) with ann | olds bonds in its portfolio. nation was derived from the public ual surveillance assigned by an N | c credit rating(s | s) with annual not lapsed. | surveillance assi | gned by an NAIC CRP | | | |
| | Has the reporting entit | y assigned FE to | Schedule BA non-registered priva | ate funds that o | complied with | the above criteria | 1? | Yes | [] No [| Χ] |

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

| 1. | If the reporting | | per of a pooling | arrangement, di | d the agreemen | t or the reportir | ng entity's partic | ipation change? | | Yes [] No [|] N/A [X] |
|------|---|-------------------------------------|--------------------|--------------------|--------------------|--------------------|--------------------|-----------------|--------------------|---------------|-------------|
| 2. | part, from any If yes, attach a | loss that may oc an explanation. | cur on the risk, | or portion thereo | of, reinsured? | | | | | Yes [] I | No [X] |
| 3.1 | Have any of th | e reporting entity | /'s primary reins | urance contracts | s been canceled | 1? | | | | Yes [] | No [X] |
| 3.2 | | | | | | | | | | | |
| 4.1 | (see Annual S interest greate | tatement Instruct | tions pertaining | to disclosure of | discounting for o | definition of " ta | bular reserves" |) discounted at | a rate of | Yes [] I | No [X] |
| | | | | | | | | | | EN DURING PER | |
| Line | · | Maximum | Discount | Unpaid | Unpaid | | | Unpaid | 9 Unpaid LAE | 10 IBNR | 11 TOTAL |
| | | | TOTAL | 0 | 0 | 0 | 0 | 0 | | 0 0 | (|
| 5. | | | | | | | | | | | |
| | 5.2 A&H cost of | containment per | cent | | | | | | | | |
| | 5.3 A&H exper | nse percent excl | uding cost conta | ainment expense | es | | | | | | |
| 6.1 | Do you act as | a custodian for h | nealth savings a | ccounts? | | | | | | Yes [] | No [X] |
| 6.2 | If yes, please p | provide the amou | unt of custodial t | funds held as of | the reporting da | te | | | \$ | | |
| 6.3 | Do you act as | an administrator | for health savin | igs accounts? | | | | | | Yes [] | No [X] |
| 6.4 | part, from any loss that may occur on the risk, or portion thereof, reinsured? If yes, attach an explanation. 1 Have any of the reporting entity's primary reinsurance contracts been canceled? 2 If yes, give full and complete information thereto. 1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted interest greater than zero? 2 If yes, complete the following schedule: 1 TOTAL DISCOUNT 1 2 3 4 5 6 7 8 Unpaid Interest Rate Losses LAE IBNR TOTAL Losses Interest Rate Losses LAE IBNR TOTAL Losses 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 1 Do you act as a custodian for health savings accounts? 2 If yes, please provide the amount of custodial funds held as of the reporting date 4 If yes, please provide the balance of the funds administered as of the reporting date 5 Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? 5 Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? | | | \$ | | | | | | | |
| 7. | Is the reporting | g entity licensed | or chartered, re | gistered, qualifie | d, eligible or wri | ting business ir | n at least two st | ates? | | Yes [X] I | No [] |
| 7.1 | | reporting entity | | | | | | | | Yes [] | No [] |

SCHEDULE F - CEDED REINSURANCE

| 1 | 2 | 3 | 4 | 5 | 6 | 7 Effective |
|----------------------|--------------|-------------------|-----------------------------|---------------------|--|---|
| NAIC Company Code | ID Number | Name of Reinsurer | Domiciliary Jurisdiction | Type of Reinsurer | Certified Reinsurer Rating (1 through 6) | Date of Certified Reinsure Rating |
| Joinpany Jour | | | - Carroanonon | 1,750 01.10.1104.01 | (: uoug.: o/ | . totaling |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | L | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | Ţ | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | ļ | | | |
| | | | | | | |

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

| | | 1 | Direct Premi | | by States and Terri Direct Losses Paid (| | Direct Loss | ses Unpaid |
|------------|---|------------------|-------------------|-----------------|---|-----------------|-------------------|---|
| | States ata | Active Status | 2 Current Year | 3 Prior Year | 4 Current Year | 5 Prior Year | 6 Current Year | 7 Prior Year |
| | States, etc. | (a) N | To Date | To Date | To Date | To Date | To Date | To Date |
| 1. | AlabamaAL | | | | | | ••••• | |
| 2. | Alaska AK | | | | | | | |
| 3. | ArizonaAZ | | | | | | | |
| 4. | Arkansas AR California CA | | | | | | | |
| 5. | | | | | | | | |
| 6. | Colorado CO | | | | | | | |
| 7. | Connecticut CT | | | | | | | |
| 8. | Delaware DE | | | | | | | |
| 9. | District of Columbia DC | N | | | | | | |
| 10. | FloridaFL | N | | | | | | |
| 11. | Georgia GA | N | | | | | | |
| 12. | Hawaii HI | N | | | | | | |
| 13. | IdahoID | N | | | | | | |
| 14. | IllinoisIL | N | | | | | | • |
| 15. | IndianaIN | N | | | | | | |
| 16. | lowaIA | N | | | | | | |
| 17. | Kansas KS | E | | 6,337 | | 0 | | (|
| 18. | Kentucky KY | N | | | | | | |
| 19. | LouisianaLA | N | | | | | | |
| 20. | Maine ME | N | | | | | | |
| 21. | Maryland MD | N | | | | | | |
| 22. | Massachusetts MA | N | | | | | | |
| 23. | MichiganMI | N | | | | | | |
| 24. | Minnesota MN | N | | | | | | |
| 25. | MississippiMS | N | | | | | | |
| 26. | MissouriMO | E | | | | | | |
| 27. | Montana MT | N | | | | | ••••• | • |
| | NebraskaNE | | | | | | | |
| 28. | | | | | | | | |
| 29. | NevadaNV | | | | | | ••••• | • |
| 30. | New Hampshire NH | N | | | | | | |
| 31. | New Jersey NJ | N | | | | | | |
| 32. | New MexicoNM | N | | | | | | |
| 33. | New York NY | N | | | | | | |
| 34. | North CarolinaNC | N | | | | | | |
| 35. | North DakotaND | N | | | | | | |
| 36. | Ohio OH | N | | | | | | |
| 37. | Oklahoma OK | N | | | | | | |
| 38. | Oregon OR | N | | | | | | |
| 39. | PennsylvaniaPA | N | | | | | | |
| 40. | Rhode IslandRI | N | | | | | | |
| 41. | South Carolina SC | N | | | | | | |
| 42. | South DakotaSD | N | | | | | | |
| 43. | Tennessee TN | N | | | | | | |
| | Texas TX | _ | 5,304,331 | 1,943,453 | 1,050,172 | 670,382 | 000 450 | 158 , 129 |
| 44. 45. | Utah UT | | 0,004,001 | | 1,000,172 | 010,302 | , | 100, 12 |
| | | N N | | | | | | |
| 46. | VermontVT | | | | | | | |
| 47. | VirginiaVA | N | | | | | | |
| 48. | WashingtonWA | N | | | | | | |
| 49. | West VirginiaWV | N | | | | | | |
| 50. | Wisconsin WI | N | | | | | | |
| 51. | WyomingWY | N | | | | | | |
| 52. | American Samoa AS | N | | | | | | |
| 53. | Guam GU | N | | | | | | |
| 54. | Puerto RicoPR | N | | | | | | |
| 55. | U.S. Virgin Islands VI | N | | | | | | |
| 56. | Northern Mariana IslandsMP | N | | | | | | |
| 57. | Canada CAN | N | | | | | | |
| 58. | Aggregate Other Alien OT | XXX | 0 | 0 | 0 | 0 | 0 | |
| 59. | Totals | XXX | 5,304,331 | 1,949,790 | 1,050,172 | 670,382 | 362,158 | 158,12 |
| 0004 | DETAILS OF WRITE-INS | VVV | | | | | | |
| 8001. | | | | | | | | |
| | | XXX | | | | | | |
| | Summary of remaining write-ins for Line 58 from | XXX | _ | | | _ | | |
| 8999. | overflow page Totals (Lines 58001 through 58003 plus 58998)(Line 58 | XXX | 0 | 0 | 0 | 0 | 0 | |
| \ A =4! | above) e Status Counts: | XXX | 0 | 0 | 0 | 0 | 0 | |



Chase Family Ltd.

Thomas Chase and Helen Chase, General Partners (74-2692540)

82.148%

Insurors Financial Corp.

(74-2505719)

9.951% GHC Risk Holdings, LLC 6.176% Mary Lacy Chase Trust 1.725% All Others

100%

Insurors Indemnity Company

(Stock Insurance Company) (74-2262949) NAIC 43273

100%

Insurors Indemnity Select Insurance Company

(Domestic Surplus Lines Insurer)
(Formerly Insurors Indemnity Lloyds)
(76-0702699)
NAIC 11496

100%

Roadrunner Indemnity Company

(Formerly Colonial Lloyds) (75-1791515) NAIC 40673

Effective: 8/14/2024

Insurors Indemnity General Agency, Inc

DBA's

Insurors Indemnity Underwriters
Roadrunner Premium Finance
(74-2760157)

100%

100%

ValueSure Agency, Inc.

(Formerly Dubose & Associates Insurance Agency, Inc.) (75-2908348)

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|--------|------------------------------|---------|------------|---------|------|--------------------|---|---------|-----------|---|-------------------|---------|---------------------------|----------|----|
| | | | | | | | | | | | Type | If | | | 1 |
| | | | | | | | | | | | of Control | Control | | | 1 |
| | | | | | | | | | | | (Ownership, | is | | Is an | 1 |
| | | | | | | Name of Securities | | | Relation- | | Board, | Owner- | | SCA | 1 |
| | | | | | | Exchange | | Domi- | ship | | Management, | ship | | Filina | 1 |
| | | NAIC | | | | | Names of | - | | | | Provide | | Re- | 1 |
| 0 | | _ | ın. | Fadanal | | if Publicly Traded | | ciliary | | Disastly Castrallad by | Attorney-in-Fact, | | Lille and a Constantilian | | 1 |
| Group | O a a Nama | Company | ID | Federal | 0114 | (U.S. or | Parent, Subsidiaries | Loca- | Reporting | Directly Controlled by | Influence, | Percen- | Ultimate Controlling | quired? | |
| Code | Group Name | Code | Number | RSSD | CIK | International) | Or Affiliates | tion | Entity | (Name of Entity/Person) | Other) | tage | Entity(ies)/Person(s) | (Yes/No) | |
| | | | | | | | | | | INSURORS INDEMNITY SELECT INSURANCE COMPANY | | | | | 1 |
| . 3279 | INSURORS INDEMNITY COMPANIES | 40673 | 75-1791515 | | | | ROADRUNNER INDEMNITY COMPANY | USA | RE | | OWNERSHIP | | CHASE FAMILY, LTD | NO | 0 |
| . 3279 | INSURORS INDEMNITY COMPANIES | 11496 | 76-0702699 | | | | INSURORS INDEMNITY SELECT INSURANCE COMPANY | USA | UDP | INSURORS INDEMNITY COMPANY | OWNERSHIP | 100.000 | CHASE FAMILY, LTD | NO | 0 |
| . 3279 | INSURORS INDEMNITY COMPANIES | 43273 | 74-2262949 | | | | INSURORS INDEMNITY COMPANY | USA | UDP | INSURORS FINANCIAL CORP | OWNERSHIP | | CHASE FAMILY, LTD | NO | 0 |
| . 0000 | 0000 | 00000 | 75-2908348 | | | | VALUESURE AGENCY, INC | USA | NIA | INSURORS INDEMNITY GENERAL AGENCY, INC | OWNERSHIP | | CHASE FAMILY, LTD | NO | 0 |
| . 0000 | 0000 | 00000 | 74-2760157 | | | | INSURORS INDEMNITY GENERAL AGENCY, INC | USA | NIA | INSURORS FINANCIAL CORP | OWNERSHIP | 100.000 | CHASE FAMILY, LTD | NO | 0 |
| . 0000 | 0000 | 00000 | 74-2505719 | | | | INSURORS FINANCIAL CORP | USA | UIP | CHASE FAMILY, LTD | OWNERSHIP | 100.000 | CHASE FAMILY, LTD | NO | 0 |
| | | | | | | | | | | | | | | | ' |
| | | | | | | | | | | | | | | | İ' |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | 1 |

| Aster | sk | 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 | 640 , 138 | 29,207 | 4.6 | 5.7 |
| 2.1 | Allied Lines | 972,399 | 485,897 | 50.0 | 35.4 |
| 2.2 | Multiple peril crop | | | 0.0 | 0.0 |
| 2.3 | Federal flood | | | 0.0 | 0.0 |
| 2.4 | Private crop | | | 0.0 | 0.0 |
| 2.5 | Private flood | | | | 0.0 |
| 3. | Farmowners multiple peril | | | | 0.0 |
| 4. | Homeowners multiple peril | | 691,084 | | 57.6 |
| 5.1 | Commercial multiple peril (non-liability portion) | | 101,916 | 24.7 | 17.0 |
| 5.2 | Commercial multiple peril (liability portion) | | 14,596 | 15.7 | 23.9 |
| 6. | Mortgage guaranty | | | | 0.0 |
| 8. | Ocean marine | | | | 0.0 |
| 9.1 | Inland marine | | | | |
| 9.2 | Pet insurance | , , , , , , , , , , , , , , , , , , , | ` ' | | |
| 10. | Financial guaranty | | | | 0.0 |
| 11.1 | Medical professional liability - occurrence | | | | 0.0 |
| 11.2 | Medical professional liability - claims-made | | | | 0.0 |
| | Earthquake | | | | |
| 12. | • | | | | |
| 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 |
| 15.1 | Vision only | | | | 0.0 |
| 15.2 | Dental only | | | | 0.0 |
| 15.3 | Disability income | | | | 0.0 |
| 15.4 | Medicare supplement | | | | 0.0 |
| 15.5 | Medicaid Title XIX | | | | 0.0 |
| 15.6 | Medicare Title XVIII | | | 0.0 | 0.0 |
| 15.7 | Long-term care | | | 0.0 | 0.0 |
| 15.8 | Federal employees health benefits plan | | | 0.0 | 0.0 |
| 15.9 | Other health | | | 0.0 | 0.0 |
| 16. | Workers' compensation | | | 0.0 | 0.0 |
| 17.1 | Other liability - occurrence | 925 | 123 | 13.3 | 15.0 |
| 17.2 | Other liability - claims-made | | | 0.0 | 0.0 |
| 17.3 | Excess workers' compensation | | | 0.0 | 0.0 |
| 18.1 | Products liability - occurrence | 638 | | | 27.9 |
| 18.2 | Products liability - claims-made | | | 0.0 | 0.0 |
| 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 | | | | |
| | Burglary and theft | | | | |
| 26. | | | | | |
| 27. | Boiler and machinery | | | | |
| 28. | Credit | | | | |
| 29. | International | | | | |
| 30. | Warranty | | | | |
| 31. | Reinsurance - Nonproportional Assumed Property | | | | |
| 32. | Reinsurance - Nonproportional Assumed Liability | | | | |
| 33. | Reinsurance - Nonproportional Assumed Financial Lines | | | | XXX |
| 34. | Aggregate write-ins for other lines of business | 0 | 0 | 0.0 | 0.0 |
| 35. | Totals | 3,913,112 | 1,322,176 | 33.8 | 37.5 |
| | DETAILS OF WRITE-INS | | | | |
| 3401. | | | | | |
| 3402. | | | | | |
| 3403. | | | | | |
| 3498. | Summary of remaining write-ins for Line 34 from overflow page | | | | |
| 3499. | Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) | 0 | 0 | 0.0 | 0.0 |

PART 2 - DIRECT PREMIUMS WRITTEN

| | Line of Business | 1 Current Quarter | 2 Current Year to Date | 3 Prior Year Year to Date |
|------------|---|-------------------|------------------------------|---------------------------------|
| 1. | Fire | 359,456 | 873,410 | 349,303 |
| 2.1 | Allied Lines | 500,412 | 1,228,566 | 536 , 196 |
| 2.2 | Multiple peril crop | 0 | | |
| 2.3 | Federal flood | 0 | | |
| 2.4 | Private crop | 0 | | |
| 2.5 | Private flood | | | |
| 3. | Farmowners multiple peril | | | |
| 4. | Homeowners multiple peril | | 2,402,543 | 869,420 |
| 5.1 | Commercial multiple peril (non-liability portion) | | | 128,324 |
| 5.2 | Commercial multiple peril (liability portion) | | · · | |
| 6. | Mortgage guaranty | | | |
| 8. | Ocean marine | | | |
| | Inland marine | | | |
| 9.1 | | | | |
| 9.2 | Pet insurance | | | |
| 10. | Financial guaranty | | | |
| 11.1 | Medical professional liability - occurrence | | | |
| 11.2 | Medical professional liability - claims-made | | | |
| 12. | Earthquake | | | |
| 13.1 | Comprehensive (hospital and medical) individual | | | |
| 13.2 | Comprehensive (hospital and medical) group | | | |
| 14. | Credit accident and health | 0 | | |
| 15.1 | Vision only | 0 | | |
| 15.2 | Dental only | 0 | | |
| 15.3 | Disability income | 0 | | |
| 15.4 | Medicare supplement | 0 | | |
| 15.5 | Medicaid Title XIX | | | |
| 15.6 | Medicare Title XVIII | | | |
| 15.7 | Long-term care | | | |
| 15.8 | Federal employees health benefits plan | | | |
| 15.9 | Other health | | | |
| | Workers' compensation | | | |
| 16. | · | | | 4 000 |
| 17.1 | Other liability - occurrence | | | 1,338 |
| 17.2 | Other liability - claims-made | | | |
| 17.3 | Excess workers' compensation | | | |
| 18.1 | Products liability - occurrence | 0 | | 476 |
| 18.2 | Products liability - claims-made | | | |
| 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 | | |
| 21.1 | Private passenger auto physical damage | 0 | | |
| 21.2 | Commercial auto physical damage | 0 | | |
| 22. | Aircraft (all perils) | | | |
| 23. | Fidelity | | | |
| 24. | Surety | | | |
| 26. | Burglary and theft | | | |
| 20. 27. | Boiler and machinery | | | |
| | • | | | |
| 28. | Credit | | | |
| 29. | International | | | |
| 30. | Warranty | | | |
| 31. | Reinsurance - Nonproportional Assumed Property | | | |
| 32. | Reinsurance - Nonproportional Assumed Liability | | | |
| 33. | Reinsurance - Nonproportional Assumed Financial Lines | | | XXX |
| 34. | Aggregate write-ins for other lines of business | 0 | 0 | 0 |
| 35. | Totals | 2,230,026 | 5,304,331 | 1,895,235 |
| | DETAILS OF WRITE-INS | T | T | |
| 3401. | | | | |
| 3402. | | | | |
| 3403. | | | | |
| 3498. | Summary of remaining write-ins for Line 34 from overflow page | | 0 | (|
| 3499. | Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) | 0 | 0 | (|

PART 3 (\$000 OMITTED) LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|---------------------------|------------------|--------------|---------------|---------------------------------------|----------------------------------|---------------------------------------|-------------------------------|----------------------------------|----------------|-----------------|----------------------------|----------------------|-------------------------------|
| | | | | | | | | | | | Prior Year-End | Prior Year-End | |
| | | | | | | | 000. | Q.S. Date Known | | | Known Case Loss | IBNR Loss and | Prior Year-End |
| | | | Total Prior | 2024 Loss and | 2024 Loss and LAE Payments on | | Q.S. Date Known Case Loss and | Case Loss and LAE Reserves on | | | and LAE Reserves Developed | LAE Reserves | Total Loss and LAE Reserve |
| | | Prior Year- | Year-End Loss | LAE Payments on | Claims | Total 2024 Loss | LAE Reserves on | | | Total Q.S. Loss | (Savings)/ | Developed (Savings)/ | Developed |
| Years in Which | Prior Year-End | End IBNR | and LAE | Claims Reported | Unreported | and LAE | Claims Reported | | Q.S. Date IBNR | and LAE | Deficiency | Deficiency | (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) |
| 1. 2021 + Prior | | | | | | | | | | | | | |
| 2. 2022 | | | | | | | | | | | | | |
| | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| 3. Subtotals 2022 + Prior | | | | | | | | | | | | | |
| 4. 2023 | | | | | | | | | | | | | |
| 5. Subtotals 2023 + Prior | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | | | | | | |
| | | XXX | | XXX | | |)//// | | | | XXX | XXX | 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.

| | _ | 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 |
| 5. | AUGUST FILING 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. | | |
| 1. | Bar Codes: 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] | |

NONE

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 |
|-----|---|--------------|------------------|
| | | 1 | 2 |
| | | | 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/rectated investment executed attreest the second attreest the | | |
| 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

| | 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 | 11,650,807 | 34,673,087 |
| 2. | Cost of bonds and stocks acquired | | |
| 3. | Accrual of discount | 12,907 | 10,800 |
| 4. | Unrealized valuation increase/(decrease) | 286,955 | (4,979,651) |
| 5. | Total gain (loss) on disposals | | |
| 6. | Deduct consideration for bonds and stocks disposed of | 502,082 | 27,528,228 |
| 7. | Deduct amortization of premium | 244 | 171 |
| 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 | 0 | |
| 11. | Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) | 15, 180, 265 | 11,650,807 |
| 12. | Deduct total nonadmitted amounts | | |
| 13. | Statement value at end of current period (Line 11 minus Line 12) | 15, 180, 265 | 11,650,807 |

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

| | 1 | r all Bonds and Prefe | 3 | 1 | 5 | 6 | 7 | 8 |
|------------------|--------------------|-----------------------|-----------------|----------------------|----------------|----------------|----------------|----------------|
| | Book/Adjusted | _ | 3 | 7 | Book/Adjusted | Book/Adjusted | Book/Adjusted | Book/Adjusted |
| | Carrying Value | Acquisitions | Dispositions | Non-Trading Activity | Carrying Value | Carrying Value | Carrying Value | Carrying Value |
| | Beginning | During | During | During | End of | End of | End of | December 31 |
| NAIC Designation | of Current Quarter | Current Quarter | Current Quarter | Current Quarter | First Quarter | Second Quarter | Third Quarter | Prior Year |
| BONDS | | | | | | | | |
| 1. NAIC 1 (a) | | | - , | , - | -, , - | 5,672,225 | | 2,388,384 |
| 2. NAIC 2 (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 3. NAIC 3 (a) | | | | | | 0 | | |
| 4. NAIC 4 (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 5. NAIC 5 (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 6. NAIC 6 (a) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 7. Total Bonds | 5,672,225 | 0 | 45,951 | 4,613 | 5,600,085 | 5,672,225 | 5,630,887 | 2,388,384 |
| | | | | | | | | |
| PREFERRED STOCK | | | | | | | | |
| 8. NAIC 1 | | | | | | 0 | | 0 |
| 8. NAIC 1 | 0 | 0 | 0 | 0 | 0 | | 0 | 0 |
| 8. NAIC 1 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8. NAIC 1 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8. NAIC 1 | | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 8. NAIC 1 | | 0 | 0 | 0 0 0 | 0 | 0 | 0 | 0 |
| 8. NAIC 1 | | 000 | 0 | | 0 | 0 | 0 | 0 |

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

SCHEDULE DA - PART 1

| | Short-re | erm investments | | | |
|------------------|--------------|-----------------|-------------|-------------------------|-----------------------------------|
| | 1 Bo Adju | 2 | 3 | 4 Interest Collected | 5 Paid for Accrued Interest |
| | Caning ue | P | Actual Cost | Year-to-Date | Year-to-Date |
| 770999999 Totals | | ** | | | |
| | | | | | |

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 | 199,285 |
| 2. | Cost of short-term investments acquired | | |
| 3. | Accrual of discount | 0 | 715 |
| 4. | Unrealized valuation increase/(decrease) | 0 | 0 |
| 5. | Total gain (loss) on disposals | | |
| 6. | Deduct consideration received on disposals | 0 | 200,000 |
| 7. | Deduct amortization of premium | | |
| 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) | 0 | 0 |
| 11. | Deduct total nonadmitted amounts | 0 | 0 |
| 12. | Statement value at end of current period (Line 10 minus Line 11) | 0 | 0 |

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards 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)

| | (Oddii Equivalento) | 1 | 2 |
|-----|---|--------------|---------------------------------|
| | | Year To Date | Prior Year Ended December 31 |
| 1. | Book/adjusted carrying value, December 31 of prior year | 222,469 | 50,311 |
| 2. | Cost of cash equivalents acquired | 1,042,604 | 2,097,475 |
| 3. | Accrual of discount | | |
| 4. | Unrealized valuation increase/(decrease) | 0 | 0 |
| 5. | Total gain (loss) on disposals | | |
| 6. | Deduct consideration received on disposals | 1,111,460 | 1,925,317 |
| 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) | 153,613 | 222,469 |
| 11. | Deduct total nonadmitted amounts | 0 | 0 |
| 12. | Statement value at end of current period (Line 10 minus Line 11) | 153,613 | 222,469 |

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

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

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

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

NONE

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

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

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired **NONE**

SCHEDULE D - PART 4

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

| | | | | | SHOW All LO | ng-renn bo | onds and Sto | ck Solu, Rec | peemed or c | | | | | | | • | | | | | |
|-------------|---------------------------------------|---------|----------------|--------------|-------------|------------|--------------|--------------|-------------|------------|------------|-------------|-------------|-----------|----------|----------|-----------|------------|-----------|----------------|----------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | | ange In Bo | ok/Adjusted | Carrying Va | | 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 | Year's | Temporary | Carrying | Book | Carrying | | Realized | | Dividends | Con- | SVO |
| CUSIP | | | | | Number of | | | | Adjusted | Valuation | (Amor- | Impairment | | /Adjusted | Value at | Gain | Gain | Total Gain | Received | tractual | Admini- |
| Ident- | | | Disposal | Name | Shares of | Consid- | | Actual | Carrying | Increase/ | tization)/ | Recog- | (11 + 12 - | Carrying | Disposal | | (Loss) on | (Loss) on | During | Maturity | strative |
| ification | Description | eign | Date | of Purchaser | Stock | eration | Par Value | Cost | Value | (Decrease) | Accretion | nized | 13) | Value | Date | Disposal | Disposal | Disposal | Year | Date | Symbol |
| | VERNMENT NATIONAL MORTGAGE A 05-56 JA | | . 09/01/2024 . | MBS PAYDOWN | | 404 | 404 | 451 | 407 | 0 | (4) | 0 | (4) | 0 | 404 | 0 | 0 | 0 | 13 | . 05/17/2035 . | . 1.A FE |
| | Subtotal - Bonds - U.S. Governmer | nts | | | | 404 | 404 | 451 | 407 | 0 | (4) | 0 | (4) | 0 | 404 | 0 | 0 | 0 | 13 | XXX | XXX |
| | BS - P00L SD4823 | | | MBS PAYDOWN | | 27,088 | 27,088 | 26,292 | 0 | 0 | 23 | 0 | 23 | 0 | 27,088 | 0 | 0 | 0 | 677 | . 12/01/2053 . | . 1.A FE |
| | BS - P00L BT8164 | | | MBS PAYDOWN | | 3,282 | 3,282 | 3,126 | 3,275 | 0 | 7 | 0 | 7 | 0 | 3,282 | 0 | 0 | 0 | 76 | . 06/01/2052 | . 1.A FE |
| | BS - POOL CB4373 | | | MBS PAYDOWN | | 10,413 | 10,413 | 10,255 | 10,405 | 0 | 8 | 0 | 8 | 0 | 10,413 | 0 | 0 | 0 | 278 | . 08/01/2052 | . 1.A FE |
| | Subtotal - Bonds - U.S. Special Re | venue | | | | 40,783 | 40,783 | 39,673 | 13,680 | 0 | 38 | 0 | 38 | 0 | 40,783 | 0 | 0 | 0 | 1,031 | XXX | XXX |
| | RLD OMNI AUTO RECEIVABLES TR 22-D A3 | | . 09/15/2024 . | | | 4,764 | 4,764 | 4,763 | 4,753 | 0 | 10 | 0 | 10 | 0 | 4,764 | 0 | 0 | 0 | 200 | | . 1.A FE |
| | Subtotal - Bonds - Industrial and M | iscella | aneous (Una | affiliated) | | 4,764 | 4,764 | 4,763 | 4,753 | 0 | 10 | 0 | 10 | 0 | 4,764 | 0 | 0 | 0 | 200 | XXX | XXX |
| | Total - Bonds - Part 4 | | | | | 45,951 | 45,951 | 44,887 | 18,840 | 0 | 44 | U | 44 | 0 | 45,951 | 0 | 0 | 0 | 1,244 | XXX | XXX |
| 2509999998. | Total - Bonds - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| | Total - Bonds | | | | | 45,951 | 45,951 | 44,887 | 18,840 | 0 | 44 | 0 | 44 | 0 | 45,951 | 0 | 0 | 0 | 1,244 | XXX | XXX |
| 4509999997. | Total - Preferred Stocks - Part 4 | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 4509999998. | Total - Preferred Stocks - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 4509999999. | Total - Preferred Stocks | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 5989999997. | Total - Common Stocks - Part 4 | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 5989999998. | Total - Common Stocks - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 5989999999. | Total - Common Stocks | | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| 5999999999. | Total - Preferred and Common Sto | cks | | | | 0 | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX | XXX |
| | | | | | | | | | | | | | | | | | | | | | |
| [| | | | | | | | | | | | . | | | | | | | | | |
| | | | | | | | | | | | | . | | | | | | | | | |
| 6009999999 | - Totals | | | | | 45,951 | XXX | 44,887 | 18,840 | 0 | 44 | 0 | 44 | 0 | 45,951 | 0 | 0 | 0 | 1,244 | 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 **N O N E**

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 | / Balances |
|-----------|------------|------------|
|-----------|------------|------------|

| 1 | 2 | 3 | 4 | 5 | Book Ba | lance at End of Ea | ch Month | 9 |
|---|------|----------|-------------------|----------------|-------------|--------------------|-------------|-------|
| · | _ | Ŭ | • | | | uring Current Quar | | |
| | | | Amount of | Amount of | 6 | 7 | 8 | 1 |
| | | | Interest Received | | | | | |
| D " | | Rate of | | at Current | | | | * |
| 7 | Code | Interest | Quarter | Statement Date | First Month | Second Month | Third Month | * |
| Central National Bank | | | | _ | | | | |
| Operating Waco, TX | | 3.560 | 4,707 | 0 | 591,578 | 461,282 | 478,209 | XXX. |
| Central National Bank Atlas | | | | | | | | |
| Operating Waco, TX | | 0.300 | 80 | 0 | 1,002 | 132,911 | 128,825 | XXX. |
| Central National Bank iMGA | | | | | | | | |
| Premium Waco, TX | | 0.500 | 754 | 0 | 688 , 150 | 792,553 | 809,637 | XXX. |
| Central National Bank iMGA | | | | | | | | |
| Claims Waco, TX | | | 0 | 0 | (232,994) | 792,553 | (139,220) | XXX. |
| Central National Bank iMGA | | | | | | | | |
| Refunds Waco, TX | | | 0 | 0 | (22,857) | (14,008) | (16,872) | XXX. |
| Central National Bank Denali | | | | | | | | |
| Claims Waco, TX | | | 0 | 0 | 50,000 | 50,000 | 50,000 | XXX. |
| Central National Bank MMA Waco, TX | | 4.350 | 17,116 | 0 | 1,533,220 | 1,539,080 | 1,544,498 | XXX. |
| 0199998. Deposits in 0 depositories that do not | | | | | | | | |
| exceed the allowable limit in any one depository (See | | | | | | | | |
| instructions) - Open Depositories | XXX | | 0 | 0 | 0 | 0 | 0 | XXX |
| 0199999. Totals - Open Depositories | XXX | XXX | 22,657 | 0 | 2,608,099 | 3,754,371 | 2,855,077 | XXX |
| 0299998. Deposits in 0 depositories that do not | | | | | | | | |
| exceed the allowable limit in any one depository (See | 1001 | 1004 | • | _ | _ | • | | ,,,,, |
| instructions) - Suspended Depositories | XXX | XXX | 0 | 0 | 0 | 0 | 0 | ,,,, |
| 0299999. Totals - Suspended Depositories | XXX | XXX | 0 | 0 | 0 | 0 | 0 | XXX |
| 0399999. Total Cash on Deposit | XXX | XXX | 22,657 | 0 | 2,608,099 | 3,754,371 | 2,855,077 | XXX |
| 0499999. Cash in Company's Office | XXX | XXX | XXX | XXX | 0 | 0 | 0 | XXX |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | • | | | | |
| | | | 00.057 | ^ | 0.000.000 | 0.754.074 | 0.000.077 | |
| 0599999. Total - Cash | XXX | XXX | 22,657 | 0 | 2,608,099 | 3,754,371 | 2,855,077 | XXX |

SCHEDULE E - PART 2 - CASH EQUIVALENTS

| Show Investments | \bigcap | End of (| Curront Owart | or |
|------------------|-----------|----------|---------------|----|
| | | | | |

| | | Snow investments Ov | viica Elia di Galicii | | | | | |
|----------------|--|---------------------|-----------------------|------------------|---------------|----------------|--------------------|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| | | | | | | Book/Adjusted | Amount of Interest | Amount Received |
| CUSIP | Description | Code | Data Associated | Data of latered | Maturity Date | | | |
| | | Code | Date Acquired | Rate of Interest | Maturity Date | Carrying Value | Due and Accrued | During Year |
| 0109999999. T | Fotal - U.S. Government Bonds | | | | | 0 | 0 | 0 |
| 0309999999 T | Fotal - All Other Government Bonds | | | | | 0 | 0 | |
| | Total - U.S. States, Territories and Possessions Bonds | | | | | 0 | ů | |
| | | | | | | * | U | |
| | Total - U.S. Political Subdivisions Bonds | | | | | 0 | 0 | 0 |
| | Total - U.S. Special Revenues Bonds | | | | | 0 | 0 | 0 |
| 1109999999. T | Total - Industrial and Miscellaneous (Unaffiliated) Bonds | | | | | 0 | 0 | 0 |
| 1309999999 T | Fotal - Hybrid Securities | | | | | 0 | 0 | 0 |
| | Total - Parent, Subsidiaries and Affiliates Bonds | | | | | 0 | 0 | |
| | | | | | | · · | v | |
| | Subtotal - Unaffiliated Bank Loans | | | | | 0 | 0 | 0 |
| | Fotal - Issuer Obligations | | | | | 0 | 0 | 0 |
| 2429999999. T | Total - Residential Mortgage-Backed Securities | | | | | 0 | 0 | 0 |
| 2439999999 T | Total - Commercial Mortgage-Backed Securities | | | | | 0 | 0 | |
| | Total - Other Loan-Backed and Structured Securities | | | | | 0 | 0 | - 0 |
| | | | | | | • | U | <u>U</u> |
| | Total - SVO Identified Funds | | | | | 0 | 0 | 0 |
| | Total - Affiliated Bank Loans | | | | | 0 | 0 | 0 |
| 24799999999. T | Total - Unaffiliated Bank Loans | | | | | 0 | 0 | 0 |
| 2509999999. T | Fotal Bonds | | | | | 0 | 0 | 0 |
| | FIRST AMER TREASURY OBLIG-Z | | 09/24/2024 | 0.000 | | | 0 | |
| | | | 09/24/2024 | J | | · | U | . <u></u> |
| | | | | | | | | |
| 8209999999. | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| 82099999999. S | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | 0 | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | 0 |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO | | | | | 153,613 | | |
| | Total Cash Equivalents | | | | | 153,613 | | |