

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2025
OF THE CONDITION AND AFFAIRS OF THE

Insurors Indemnity Select Insurance Company

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

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

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

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

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

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

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

Internet Website Address www.insurorsindemnity.com

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

OFFICERS

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

OTHER

Somers W. Goodman, Vice President - Surety Michael Vieregg, Vice President - Claims Rhett Dawson, Vice President - P&C & Bus Dev
Tammy Tieperman, Vice President - Accounting Audrey Teague, Assistant Secretary

DIRECTORS OR TRUSTEES

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

State of Texas SS
County of McLennan

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

[Signature of Dave E. Talbert]

Dave E. Talbert
President & CEO

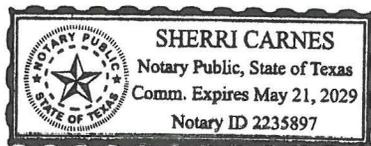
[Signature of Tammy Tieperman]

Tammy Tieperman
Secretary

[Signature of Thomas G. Chase, Jr.]
Thomas G. Chase, Jr.
Treasurer

Subscribed and sworn to before me this 26th day of February 2026
Sherrl Carnes

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



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	5,903,977		5,903,977	5,805,263
2. Stocks (Schedule D):				
2.1 Preferred stocks			0	0
2.2 Common stocks	11,332,886		11,332,886	10,106,795
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$ 5,668,762 , Schedule E - Part 1), cash equivalents (\$ 194,279 , Schedule E - Part 2) and short-term investments (\$, Schedule DA)	5,863,041		5,863,041	2,961,156
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)			0	0
9. Receivable for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL)			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	23,099,904	0	23,099,904	18,873,214
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	57,265		57,265	51,266
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	2,546,170		2,546,170	1,667,725
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	204,483		204,483	109,003
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	3,100,000		3,100,000	0
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other-than-invested assets	316,667	0	316,667	366,667
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	29,324,489	0	29,324,489	21,067,875
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	29,324,489	0	29,324,489	21,067,875
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Goodwill of purchase of Roadrunner Indemnity Company	316,667		316,667	366,667
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)	316,667	0	316,667	366,667

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	0	0
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	0	0
4. Commissions payable, contingent commissions and other similar charges	675,195	232,433
5. Other expenses (excluding taxes, licenses and fees)	31,437	14,374
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	34,719	7,705
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	107,935	237,799
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 13,520,000 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)		
10. Advance premium	581,518	48,891
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	1,544,931	830,621
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	0	0
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$0 certified) (Schedule F, Part 3, Column 78)	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	157,318	88,046
20. Derivatives	0	0
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	3,133,053	1,459,869
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	3,133,053	1,459,869
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock	2,500,000	2,500,000
31. Preferred capital stock		
32. Aggregate write-ins for other-than-special surplus funds	0	0
33. Surplus notes	0	0
34. Gross paid in and contributed surplus	17,222,422	14,122,422
35. Unassigned funds (surplus)	6,469,014	2,985,584
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	26,191,436	19,608,006
38. TOTALS (Page 2, Line 28, Col. 3)	29,324,489	21,067,875
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201. Guaranty Fund		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page	0	0
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....		
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)	0	0
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	0	0
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	(1,819,664)	(680,497)
5. Aggregate write-ins for underwriting deductions	0	0
6. Total underwriting deductions (Lines 2 through 5)	(1,819,664)	(680,497)
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	1,819,664	680,497
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	414,158	334,420
10. Net realized capital gains (losses) less capital gains tax of \$ (Exhibit of Capital Gains (Losses))		8,397
11. Net investment gain (loss) (Lines 9 + 10)	414,158	342,817
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)	0	0
13. Finance and service charges not included in premiums	19,892	92,913
14. Aggregate write-ins for miscellaneous income	0	0
15. Total other income (Lines 12 through 14)	19,892	92,913
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	2,253,714	1,116,227
17. Dividends to policyholders		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	2,253,714	1,116,227
19. Federal and foreign income taxes incurred	473,280	194,969
20. Net income (Line 18 minus Line 19)(to Line 22)	1,780,434	921,258
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	19,608,006	17,842,374
22. Net income (from Line 20)	1,780,434	921,258
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$	1,226,091	844,374
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax		
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	0	0
29. Change in surplus notes		
30. Surplus (contributed to) withdrawn from protected cells		
31. Cumulative effect of changes in accounting principles		
32. Capital changes:		
32.1 Paid in		
32.2 Transferred from surplus (stock dividend)		
32.3 Transferred to surplus		
33. Surplus adjustments:		
33.1 Paid in	3,100,000	0
33.2 Transferred to capital (stock dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)	0	0
37. Aggregate write-ins for gains and losses in surplus	476,905	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	6,583,430	1,765,632
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	26,191,436	19,608,006
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0
1401.		
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0
3701. Adjustment in Federal Income Tax Incurred	476,905	0
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	476,905	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	368,492	(389,986)
2. Net investment income	387,094	278,387
3. Miscellaneous income	19,892	92,913
4. Total (Lines 1 through 3)	775,478	(18,686)
5. Benefit and loss related payments	95,480	60,494
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	(2,306,503)	(788,301)
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	603,144	47,500
10. Total (Lines 5 through 9)	(1,607,879)	(680,307)
11. Net cash from operations (Line 4 minus Line 10)	2,383,357	661,621
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	797,475	579,821
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	797,475	579,821
13. Cost of investments acquired (long-term only exclude cash equivalents and short-term investments):		
13.1 Bonds	875,124	3,970,207
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	875,124	3,970,207
14. Net increase/(decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(77,649)	(3,390,386)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	3,100,000	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	(2,503,823)	4,969,905
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	596,177	4,969,905
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)	2,901,885	2,241,140
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	2,961,156	720,016
19.2 End of period (Line 18 plus Line 19.1)	5,863,041	2,961,156

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

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Underwriting and Investment Exhibit - Part 1 - Premiums Earned

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	3,354,077			3,354,077		0
2.1 Allied lines	6,265,283			6,265,283		0
2.2 Multiple peril crop	0					0
2.3 Federal flood	0					0
2.4 Private crop	0					0
2.5 Private flood	0					0
3. Farmowners multiple peril	0					0
4. Homeowners multiple peril	10,010,197			10,010,197		0
5.1 Commercial multiple peril (non-liability portion)	6,013,450			6,013,450		0
5.2 Commercial multiple peril (liability portion)	986,061			986,061		0
6. Mortgage guaranty	0					0
8. Ocean marine	0					0
9.1 Inland marine	3,186			3,186		0
9.2 Pet insurance plans	187,272			187,272		0
10. Financial guaranty	0					0
11.1 Medical professional liability - occurrence	0					0
11.2 Medical professional liability - claims- made	0					0
12. Earthquake	0					0
13.1 Comprehensive (hospital and medical) individual	0					0
13.2 Comprehensive (hospital and medical) group	0					0
14. Credit accident and health (group and individual)	0					0
15.1 Vision only	0					0
15.2 Dental only	0					0
15.3 Disability income	0					0
15.4 Medicare supplement	0					0
15.5 Medicaid Title XIX	0					0
15.6 Medicare Title XVIII	0					0
15.7 Long-term care	0					0
15.8 Federal employees health benefits plan	0					0
15.9 Other health	0					0
16. Workers' compensation	0					0
17.1 Other liability - occurrence	14,624			14,624		0
17.2 Other liability - claims-made	0					0
17.3 Excess workers' compensation	0					0
18.1 Products liability - occurrence	876			876		0
18.2 Products liability - claims-made	0					0
19.1 Private passenger auto no-fault (personal injury protection)	0					0
19.2 Other private passenger auto liability.....	0					0
19.3 Commercial auto no-fault (personal injury protection)	0					0
19.4 Other commercial auto liability.....	0					0
21.1 Private passenger auto physical damage	0					0
21.2 Commercial auto physical damage	0					0
22. Aircraft (all perils)	0					0
23. Fidelity	0					0
24. Surety	0					0
26. Burglary and theft	0					0
27. Boiler and machinery	0					0
28. Credit	0					0
29. International	0					0
30. Warranty	0					0
31. Reinsurance - nonproportional assumed property	XXX					0
32. Reinsurance - nonproportional assumed liability	XXX					0
33. Reinsurance - nonproportional assumed financial lines	XXX					0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0
35. TOTALS	26,835,026	0	0	26,835,026	0	0
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]

If yes: 1. The amount of such installment premiums \$

2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A , Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	225,811		225,811	0	0	0	0.0	
2.1 Allied lines	1,235,193		1,235,193	0	0	0	0.0	
2.2 Multiple peril crop	0		0	0	0	0	0.0	
2.3 Federal flood	0		0	0	0	0	0.0	
2.4 Private crop	0		0	0	0	0	0.0	
2.5 Private flood	0		0	0	0	0	0.0	
3. Farmowners multiple peril	0		0	0	0	0	0.0	
4. Homeowners multiple peril	1,460,781		1,460,781	0	0	0	0.0	
5.1 Commercial multiple peril (non-liability portion)	483,549		483,549	0	0	0	0.0	
5.2 Commercial multiple peril (liability portion)	8,428		8,428	0	0	0	0.0	
6. Mortgage guaranty	0		0	0	0	0	0.0	
8. Ocean marine	0		0	0	0	0	0.0	
9.1 Inland marine	0		0	0	0	0	0.0	
9.2 Pet insurance plans	0		0	0	0	0	0.0	
10. Financial guaranty	0		0	0	0	0	0.0	
11.1 Medical professional liability - occurrence	0		0	0	0	0	0.0	
11.2 Medical professional liability - claims-made	0		0	0	0	0	0.0	
12. Earthquake	0		0	0	0	0	0.0	
13.1 Comprehensive (hospital and medical) individual	0		0	0	0	0	0.0	
13.2 Comprehensive (hospital and medical) group	0		0	0	0	0	0.0	
14. Credit accident and health (group and individual)	0		0	0	0	0	0.0	
15.1 Vision only	0		0	0	0	0	0.0	
15.2 Dental only	0		0	0	0	0	0.0	
15.3 Disability income	0		0	0	0	0	0.0	
15.4 Medicare supplement	0		0	0	0	0	0.0	
15.5 Medicaid Title XIX	0		0	0	0	0	0.0	
15.6 Medicare Title XVIII	0		0	0	0	0	0.0	
15.7 Long-term care	0		0	0	0	0	0.0	
15.8 Federal employees health benefits plan	0		0	0	0	0	0.0	
15.9 Other health	0		0	0	0	0	0.0	
16. Workers' compensation	0		0	0	0	0	0.0	
17.1 Other liability - occurrence	0		0	0	0	0	0.0	
17.2 Other liability - claims-made	0		0	0	0	0	0.0	
17.3 Excess workers' compensation	0		0	0	0	0	0.0	
18.1 Products liability - occurrence	0		0	0	0	0	0.0	
18.2 Products liability - claims-made	0		0	0	0	0	0.0	
19.1 Private passenger auto no-fault (personal injury protection)	0		0	0	0	0	0.0	
19.2 Other private passenger auto liability	0		0	0	0	0	0.0	
19.3 Commercial auto no-fault (personal injury protection)	0		0	0	0	0	0.0	
19.4 Other commercial auto liability	0		0	0	0	0	0.0	
21.1 Private passenger auto physical damage	0		0	0	0	0	0.0	
21.2 Commercial auto physical damage	0		0	0	0	0	0.0	
22. Aircraft (all perils)	0		0	0	0	0	0.0	
23. Fidelity	0		0	0	0	0	0.0	
24. Surety	0		0	0	0	0	0.0	
26. Burglary and theft	0		0	0	0	0	0.0	
27. Boiler and machinery	0		0	0	0	0	0.0	
28. Credit	0		0	0	0	0	0.0	
29. International	0		0	0	0	0	0.0	
30. Warranty	0		0	0	0	0	0.0	
31. Reinsurance - nonproportional assumed property	XXX		XXX	0	0	0	0.0	
32. Reinsurance - nonproportional assumed liability	XXX		XXX	0	0	0	0.0	
33. Reinsurance - nonproportional assumed financial lines	XXX		XXX	0	0	0	0.0	
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0.0	
35. TOTALS	3,413,762	0	3,413,762	0	0	0	0.0	
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0.0	
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0.0	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	24,177		24,177	0	142,981		142,981	0	
2.1 Allied lines	132,386		132,386	0	247,518		247,518	0	
2.2 Multiple peril crop				0				0	
2.3 Federal flood				0				0	
2.4 Private crop				0				0	
2.5 Private flood				0				0	
3. Farmowners multiple peril				0				0	
4. Homeowners multiple peril	143,930		143,930	0	579,198		579,198	0	
5.1 Commercial multiple peril (non-liability portion)	5,357		5,357	0	503,839		503,839	0	
5.2 Commercial multiple peril (liability portion)	1		1	0	85,792		85,792	0	
6. Mortgage guaranty				0				0	
8. Ocean marine				0				0	
9.1 Inland marine				0	166		166	0	
9.2 Pet insurance plans				0	4,508		4,508	0	
10. Financial guaranty				0				0	
11.1 Medical professional liability - occurrence				0				0	
11.2 Medical professional liability - claims-made				0				0	
12. Earthquake				0				0	
13.1 Comprehensive (hospital and medical) individual				0				(a) 0	
13.2 Comprehensive (hospital and medical) group				0				(a) 0	
14. Credit accident and health (group and individual)				0				0	
15.1 Vision only				0				(a) 0	
15.2 Dental only				0				(a) 0	
15.3 Disability income				0				(a) 0	
15.4 Medicare supplement				0				(a) 0	
15.5 Medicaid Title XIX				0				(a) 0	
15.6 Medicare Title XVIII				0				(a) 0	
15.7 Long-term care				0				(a) 0	
15.8 Federal employees health benefits plan				0				(a) 0	
15.9 Other health				0				(a) 0	
16. Workers' compensation				0				0	
17.1 Other liability - occurrence				0	413		413	0	
17.2 Other liability - claims-made				0				0	
17.3 Excess workers' compensation				0				0	
18.1 Products liability - occurrence				0	27		27	0	
18.2 Products liability - claims-made				0				0	
19.1 Private passenger auto no-fault (personal injury protection)				0				0	
19.2 Other private passenger auto liability				0				0	
19.3 Commercial auto no-fault (personal injury protection)				0				0	
19.4 Other commercial auto liability				0				0	
21.1 Private passenger auto physical damage				0				0	
21.2 Commercial auto physical damage				0				0	
22. Aircraft (all perils)				0				0	
23. Fidelity				0				0	
24. Surety				0				0	
26. Burglary and theft				0				0	
27. Boiler and machinery				0				0	
28. Credit				0				0	
29. International				0				0	
30. Warranty				0				0	
31. Reinsurance - nonproportional assumed property	XXX			0	XXX			0	
32. Reinsurance - nonproportional assumed liability	XXX			0	XXX			0	
33. Reinsurance - nonproportional assumed financial lines	XXX			0	XXX			0	
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	
35. TOTALS	305,851	0	305,851	0	1,564,442	0	1,564,442	0	
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	651,768			651,768
1.2 Reinsurance assumed				0
1.3 Reinsurance ceded	651,768			651,768
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	0	0	0	0
2. Commission and brokerage:				
2.1 Direct excluding contingent		6,016,551		6,016,551
2.2 Reinsurance assumed, excluding contingent				0
2.3 Reinsurance ceded, excluding contingent		9,825,573		9,825,573
2.4 Contingent - direct				0
2.5 Contingent - reinsurance assumed				0
2.6 Contingent - reinsurance ceded				0
2.7 Policy and membership fees				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) ..	0	(3,809,022)	0	(3,809,022)
3. Allowances to managers and agents		458,545	2,560	461,105
4. Advertising				0
5. Boards, bureaus and associations		51,030	6	51,036
6. Surveys and underwriting reports		87,129	486	87,615
7. Audit of assureds' records				0
8. Salary and related items:				
8.1 Salaries		772,989	4,315	777,304
8.2 Payroll taxes		41,595	232	41,827
9. Employee relations and welfare		22,782	127	22,909
10. Insurance		33,875	189	34,064
11. Directors' fees				0
12. Travel and travel items		11,921	67	11,988
13. Rent and rent items		386,860	2,159	389,019
14. Equipment				0
15. Cost or depreciation of EDP equipment and software				0
16. Printing and stationery		3,314	8	3,322
17. Postage, telephone and telegraph, exchange and express		142	1	143
18. Legal and auditing		52,061	201	52,262
19. Totals (Lines 3 to 18)	0	1,922,243	10,351	1,932,594
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$		34,468		34,468
20.2 Insurance department licenses and fees		32,647		32,647
20.3 Gross guaranty association assessments				0
20.4 All other (excluding federal and foreign income and real estate)				0
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0	67,115	0	67,115
21. Real estate expenses				0
22. Real estate taxes				0
23. Reimbursements by uninsured plans				0
24. Aggregate write-ins for miscellaneous expenses	0	0	0	0
25. Total expenses incurred	0	(1,819,664)	10,351	(a) (1,809,313)
26. Less unpaid expenses - current year	0			0
27. Add unpaid expenses - prior year	0			0
28. Amounts receivable relating to uninsured plans, prior year				0
29. Amounts receivable relating to uninsured plans, current year				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	0	(1,819,664)	10,351	(1,809,313)
DETAILS OF WRITE-INS				
2401.				
2402.				
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page	0	0	0	0
2499. Totals (Lines 2401 through 2403 plus 2498)(Line 24 above)	0	0	0	0

(a) Includes management fees of \$ 1,844,039 to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF NET INVESTMENT INCOME

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds	(a) 112,010	..... 121,922
1.1 Bonds exempt from U.S. tax	(a) .....	.....
1.2 Other bonds (unaffiliated)	(a) 151,966	..... 148,053
1.3 Bonds of affiliates	(a) .....	.....
2.1 Preferred stocks (unaffiliated)	(b) .....	.....
2.11 Preferred stocks of affiliates	(b) .....	.....
2.2 Common stocks (unaffiliated) .....	.....	.....
2.21 Common stocks of affiliates .....	.....	.....
3. Mortgage loans	(c) .....	.....
4. Real estate	(d) .....	.....
5. Contract loans .....	.....	.....
6. Cash, cash equivalents and short-term investments	(e) 154,534	..... 154,534
7. Derivative instruments	(f) .....	.....
8. Other invested assets .....	.....	.....
9. Aggregate write-ins for investment income .....	..... 0	..... 0
10. Total gross investment income	418,510	424,509
11. Investment expenses .....	.....	(g) 10,351
12. Investment taxes, licenses and fees, excluding federal income taxes .....	.....	(g) 0
13. Interest expense .....	.....	(h)
14. Depreciation on real estate and other invested assets .....	.....	(i)
15. Aggregate write-ins for deductions from investment income .....	.....	..... 0
16. Total deductions (Lines 11 through 15) .....	.....	..... 10,351
17. Net investment income (Line 10 minus Line 16) .....	.....	414,158
DETAILS OF WRITE-INS		
0901. ....	.....	.....
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	0	0
1501. ....	.....	.....
1502. ....	.....	.....
1503. ....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page .....	.....	0
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15, above) .....	.....	0

- (a) Includes \$21,796 accrual of discount less \$731 amortization of premium and less \$ 2,067 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$0 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	0	0	0	0	0
1.1 Bonds exempt from U.S. tax	0	0	0	0	0
1.2 Other bonds (unaffiliated)	0	0	0	0	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	0	0	0	0	0
2.21 Common stocks of affiliates	0	0	0	1,226,091	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	0	0	0	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	0	0	0	1,226,091	0
DETAILS OF WRITE-INS					
0901. ....	.....	.....	.....	.....	.....
0902. ....	.....	.....	.....	.....	.....
0903. ....	.....	.....	.....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

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

NONE

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

	SSAP #	F/S Page	F/S Line #		2025		2024
NET INCOME							
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$	1,780,434	\$	921,258
(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	\$	1,780,434	\$	921,258
SURPLUS							
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$	26,191,436	\$	19,608,006
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:							
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$	26,191,436	\$	19,608,006

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

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

C. Accounting Policy

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

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

In addition, the company uses the following accounting policies:

- (1) Basis for Short-Term Investments
The company has short-term investments that is carried at amortized cost of \$57,264.64.
- (2) Basis for Bonds and Amortization Schedule
Bonds not backed by other loans are stated at amortized cost using the effective interest 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 investment income as a factor in the premium deficiency calculation in accordance with SSAP No 53, PC Contracts - Premiums.
- (11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss / Claim Adjustments Expenses
Unpaid losses and loss adjustment expenses includes an amount determined from individual case estimates and loss reports and an amount based on past experiences, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequated, the ultimate liability may be in excess of or less than the amount provided.
The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.
- (12) Changes in Capitalization Policy and predefined thresholds from prior period
The company has not modified its capitalization policy
- (13) Method Used to Estimated Pharmaceutical Rebate Receivables
The company does not have any pharmaceutical rebate receivables

NOTES TO FINANCIAL STATEMENTS

D. 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 xx, 2024 by cash payments.

A. Statutory Purchase Method

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

1 Purchased Entity	2 Acquisition Date	3 Cost of Acquired Entity	4 Original Amount of Goodwill	5 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	\$ 316,667	\$ 50,000	\$ 11,332,886	2.8%
Total	\$ 316,667	\$ 50,000	\$ 11,332,886	XXX

B. Statutory Merger

none

C. Impairment Loss

none

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

none

NOTE 4 Discontinued Operations

The company has no discontinued operations

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The company has no mortgage loans at this time

B. Debt Restructuring

The company has no debt restructuring

C. Reverse Mortgages

C. Reverse Mortgages

The company has no reverse mortgages

D. Asset-Backed Securities

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

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

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

The company has no repurchase agreements or securities lending transactions

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

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

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

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

H. Repurchase Agreements Transactions Accounted for as a Sale

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

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

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

NOTES TO FINANCIAL STATEMENTS

- J. Real Estate
 - (1) The company does not recognize any impairment loss on real estate.
 - (2) The company has not sold any real estate investment.
 - (3) The company has no plans to sale for an investment in real estate.
 - (4) The company does not engage in retail land sales operations.
 - (5) The company has no mortgage loan real estate.

- K. Investments in Tax Credit Structures (tax credit investments)
 - (1) NONE

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

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

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

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

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

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

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

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

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

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

- B. NONE
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued	Amount
1. Gross	\$ 57,265
2. Nonadmitted	
3. Admitted	\$ 57,265

- D. The aggregate deferred interest.

	Amount
Aggregate Deferred Interest	

- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.

	Amount
Cumulative amounts of PIK interest included in the current principal balance	

NOTE 8 Derivative Instruments
 The company does not have any derivative instruments

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

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

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

NOTES TO FINANCIAL STATEMENTS

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

	(1) As of End of Current Period	(2) 12/31/2024	(3) (Col. 1 - 2) Change
1. Current Income Tax			
(a) Federal	\$ 473,280	\$ 194,969	\$ 278,311
(b) Foreign			\$ -
(c) Subtotal (1a+1b)	\$ 473,280	\$ 194,969	\$ 278,311
(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)	\$ 473,280	\$ 194,969	\$ 278,311
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses			\$ -
(2) Unearned premium reserve			\$ -
(3) Policyholder reserves			\$ -
(4) Investments			\$ -
(5) Deferred acquisition costs			\$ -
(6) Policyholder dividends accrual			\$ -
(7) Fixed assets			\$ -
(8) Compensation and benefits accrual			\$ -
(9) Pension accrual			\$ -
(10) Receivables - nonadmitted			\$ -
(11) Net operating loss carry-forward			\$ -
(12) Tax credit carry-forward			\$ -
(13) Other			\$ -
(99) Subtotal (sum of 2a1 through 2a13)	\$ -	\$ -	\$ -
(b) Statutory valuation allowance adjustment			\$ -
(c) Nonadmitted			\$ -
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ -	\$ -	\$ -
(e) Capital:			
(1) Investments			\$ -
(2) Net capital loss carry-forward			\$ -
(3) Real estate			\$ -
(4) Other			\$ -
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ -	\$ -	\$ -
(f) Statutory valuation allowance adjustment			\$ -
(g) Nonadmitted			\$ -
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ -	\$ -	\$ -
(i) Admitted deferred tax assets (2d + 2h)	\$ -	\$ -	\$ -
3. Deferred Tax Liabilities:			
(a) Ordinary:			
(1) Investments			\$ -
(2) Fixed assets			\$ -
(3) Deferred and uncollected premium			\$ -
(4) Policyholder reserves			\$ -
(5) Other			\$ -
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ -	\$ -	\$ -
(b) Capital:			
(1) Investments			\$ -
(2) Real estate			\$ -
(3) Other			\$ -
(99) Subtotal (3b1+3b2+3b3)	\$ -	\$ -	\$ -
(c) Deferred tax liabilities (3a99 + 3b99)	\$ -	\$ -	\$ -
4. Net deferred tax assets/liabilities (2i - 3c)	\$ -	\$ -	\$ -

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

- E. (1) Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits: NONE
 (2) The income tax expense for the current year and prior years that is available for recoupment in the event of future losses is: -0-
 (3) The Company's aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Service Code was -0- at December 31, 2025.

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

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

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

H. Repatriation Transition Tax (RTT)
 not applicable

I. Alternative Minimum Tax (AMT) Credit
 not applicable

NOTES TO FINANCIAL STATEMENTS

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

A. On December 31, 2025, Insurers Financial Corp. committed to contribute \$3,100,000 to the surplus of its subsidiary, Insurers Indemnity Company. The amount is reflected in the statement of the company Assets, line 23. Receivables from parent, subsidiaries and affiliates. The amount was paid to the company on February 24, 2026, pursuant to Statutory Accounting procedure SSAP No. 72.

On December 31, 2025, Insurers Indemnity Company committed to contribute \$3,100,000 to the surplus of its subsidiary, Insurers Indemnity Select Insurance Company which payable is reflected in its Annual Statement at Liabilities, Surplus and other Funds line 19 Payable to parent, subsidiaries and affiliates. The transaction was approved by official action letter dated February 9, 2026, reference HCS #1195859.

That amount is reflected in the statement of Insurers Indemnity Select Insurance Company at Assets, line 23 Receivables from parent, subsidiaries and affiliates, and in its Liabilities, Surplus and other Funds line 34 Gross paid in and contributed surplus. That amount was paid to the company on February 24, 2026 pursuant to Statutory Accounting procedure SSAP No. 72.

Insurers Financial Corp. owns 100% of Insurers Indemnity Company which owns 100% of Insurers Indemnity Select Insurance Company which owns 100% of Roadrunner Indemnity Company.
Insurers Financial Corp. owns 100% of Insurers Indemnity General Agency, Inc. which owns 100% of ValueSure Agency, Inc. These entities are affiliates of the companies.

B. Transactions On December 31, 2023 Insurers Financial Corp, committed to contribute \$3,000,000 to the surplus of Insurers Indemnity Select which was set up as a receivable on Company's statement. On December 31, 2023 following the reorganization described in Note 3, Insurers Indemnity Company contributed \$1,860,000 to the surplus of Insurers Indemnity Select. These transactions were considered in HCS # 1148324 Exemption filing.
All other transactions between the affiliates in excess of the limits of Chapter 823.102 have been submitted to the TDI for review and approval or no action.

C. Transactions with related party who are not reported on Schedule Y
NONE

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

E. E.Material Contracts with Affiliates

The company has a Managing General Agency Agreement with its affiliate, Insurers Indemnity General Agency, Inc., dba Insurers Indemnity Underwriters (IIU). Under the agreement, IIU has the authority to carry out the day-to-day operations of Insurers Indemnity and its affiliates through IIU's employees.
Insurers Indemnity Company has an affiliated reinsurance agreement with Insurers 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 Insurers Financial Corp, Insurers Indemnity Company, Roadrunner Indemnity Company, Insurers Indemnity General Agency, Inc. and ValueSure Agency, Inc. effective April 1, 2022.

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

G. G.Nature of the Relationship

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

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

I. I.Investments in SCA that Exceed 10% of Admitted Assets
The Company owns 100% of Roadrunner Indemnity Company. This common stock investment is recorded at its statutory equity value of \$9,262,422.

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

K. There are no investments in a foreign insurance subsidiary

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

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

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

O. The company has no SCA Loss tracking

NOTE 11 Debt

A. The company has no debt notes.

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

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

A. Defined Benefit Plan
NONE

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

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

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

E. Defined Contribution Plan
The company with other affiliated companies in the parent company, Insurers 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 Insurers Indemnity General Agency, Inc.

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

NOTES TO FINANCIAL STATEMENTS

- G. Consolidated/Holding Company Plans
The company with other affiliated companies in the parent company, Insurors Financial Corp, participate in a defined contribution 401(k) plan. Employees are eligible to participate in the plan once they have been employed for one year and reach the age of 21. This is part of the MGA agreement with Insurors Indemnity General Agency, Inc.
- H. Postemployment Benefits and Compensated Absences
The company has no postemployment benefits and compensated absences
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
The company has no defined plan for which this medicare act applies

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

- A. The company has 5,000,000 shares authorized and 2,500,000 shares issued and outstanding. All shares are class A shares at \$1 par.
- B. The company has no preferred stock
- C. Under the Insurance Holding Company system Regulatory Act, Article 21.49.1, Section 4 without prior approval of its domiciliary commissioner, dividend distributions to shareholders are limited by the laws of the company's state of incorporation, Texas, to the greater of 10% of surplus or the prior year's earnings.
- D. No dividends were paid during the reporting year
- E. There are no restrictions placed on the portion of company profits that may be paid as ordinary dividends to stockholders.
- F. There were no restrictions placed on the company's surplus
- G. There are no advances to surplus unpaid
- H. There is no stock held by the company for special purposes
- I. There are no changes in the balance of special surplus funds
The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is
- J. \$2,063,523.
- K. The Company issued the following surplus debentures or similar obligations:
The company does not have a surplus debenture
- L. The impact of any restatement due to prior quasi-reorganizations is as follows:
The company had no quasi-reorganization
- M. Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization
The company has had no quasi-reorganization in the past ten years

NOTE 14 Liabilities, Contingencies and Assessments

- A. Contingent Commitments

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

NOTE 15 Leases

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

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

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

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

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

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

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

NOTES TO FINANCIAL STATEMENTS

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

Name and Address of Managing General Agent or Third Party Administrator	FEIN NUMBER	Exclusive Contract	Types of Business Written	Type of Authority Granted	Total Direct Premiums Written/Produced By
Denali Specialty Group, LLC	83-1728798	No	Surplus Lines	P	\$ (2,727)
iMGA, LLC	27-0771349	No	Surplus Lines	P	\$ 8,900,999
Germania General Agency, Inc.	74-2219236	No	Surplus Lines	P	\$ 1,429,272
Atlas General Agency	75-2833219	No	Surplus Lines	P	\$ 7,419,711
Heritage Specialty Insurance Agency	27-2259975	No	Surplus Lines	P	\$ 228,489
Total	XXX	XXX	XXX	XXX	\$ 17,975,744

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

NOTE 20 Fair Value Measurements

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

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Cash Equivalents	\$ 194,279				\$ 194,279
Bonds ICO	\$ 3,325,007	\$ 740,473			\$ 4,065,480
Bonds ABS		\$ 1,944,864			\$ 1,944,864
Total assets at fair value/NAV	\$ 3,519,286	\$ 2,685,337	\$ -	\$ -	\$ 6,204,623

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

(3) Policies when Transfers Between Levels are Recognized
 The company has no assets / liabilities transferred between levels

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement
 Fair values for the company's portfolio are provided by our investment custodian.

(5) The company has no derivative assets or liabilities

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

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds ICO	\$ 4,065,479	\$ 3,985,692	\$ 3,325,007	\$ 740,473			
Bonds ABS	\$ 1,944,864	\$ 1,918,285		\$ 1,944,864			
Cash Equivalents	\$ 194,279	\$ 194,279	\$ 194,279				

D. Not Practicable to Estimate Fair Value
 The company has no assets or liabilities that are not practicable to estimate at fair value

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

NOTE 21 Other Items

- A. Unusual or Infrequent Items
 The company does not have any unusual or infrequent items.
- B. Troubled Debt Restructuring: Debtors
 The company has no troubled debt restructuring debtors.
- C. Other Disclosures
 The company has no other disclosures.
- D. Business Interruption Insurance Recoveries
 The company had no business interruption insurance recoveries.
- E. State Transferable and Non-transferable Tax Credits
 The company had no state transferrable and non-transferrable tax credits this year
- F. Subprime Mortgage Related Risk Exposure
 (1) The company had no subprime mortgage related risk exposure.
- G. Insurance-Linked Securities (ILS) Contracts
 The company had no insurance linked securities ILS contracts

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

NOTES TO FINANCIAL STATEMENTS

H. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

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

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:

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

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

Type II – Nonrecognized Subsequent Events:

NONE

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables

NONE

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

The company had no retrospectively rated contracts and contracts subject to redetermination

NOTE 25 Changes in Incurred Losses and Loss Adjustment Expenses

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

NOTE 26 Intercompany Pooling Arrangements

The company has 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 reciprocal 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 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State Regulating? Texas
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2022
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2022
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/31/2024
- 3.4 By what department or departments?
TEXAS DEPARTMENT OF INSURANCE
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [X] No [] N/A []
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes [] No [X]
4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes [] No [X]
4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 6.2 If yes, give full information
.....
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
7.21 State the percentage of foreign control %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

- 8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If the response to 8.1 is yes, please identify the name of the DIHC.
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

- 8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? Yes [] No [X]
- 8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []
- 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Jaynes, Reitmeier, Boyd, & Therrell, PC 5400 Bosque Blvd Suite 500 Waco, TX 76710
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:
.....
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
.....
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
- 10.6 If the response to 10.5 is no or n/a, please explain.
.....
- 11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Pat Whatley of the Burkhalter Group 1701 N Collins Richardson, Texas Independent Consultant
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
 - 12.11 Name of real estate holding company ...
 - 12.12 Number of parcels involved
 - 12.13 Total book/adjusted carrying value \$
- 12.2 If yes, provide explanation
.....
- 13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
.....
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No [X]
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No [X]
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [X] N/A []
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
 - a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - c. Compliance with applicable governmental laws, rules and regulations;
 - d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:
.....
- 14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
.....
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
.....

GENERAL INTERROGATORIES

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

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

BOARD OF DIRECTORS

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

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers.....\$
 - 20.12 To stockholders not officers.....\$
 - 20.13 Trustees, supreme or grand (Fraternal Only)\$
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers.....\$
 - 20.22 To stockholders not officers.....\$
 - 20.23 Trustees, supreme or grand (Fraternal Only)\$
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others.....\$
 - 21.22 Borrowed from others.....\$
 - 21.23 Leased from others\$
 - 21.24 Other\$
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$
 - 22.22 Amount paid as expenses\$
 - 22.23 Other amounts paid\$
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$3,100,000
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

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

INVESTMENT

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

GENERAL INTERROGATORIES

- 25.02 If no, give full and complete information, relating thereto
.....
- 25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
.....
- 25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$
- 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$
- 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]
- 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]
- 25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]
- 25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:
- 25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0
- 25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0
- 25.093 Total payable for securities lending reported on the liability page \$ 0

- 26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [] No [X]
- 26.2 If yes, state the amount thereof at December 31 of the current year:
- 26.21 Subject to repurchase agreements \$
- 26.22 Subject to reverse repurchase agreements \$
- 26.23 Subject to dollar repurchase agreements \$
- 26.24 Subject to reverse dollar repurchase agreements \$
- 26.25 Placed under option agreements \$
- 26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$
- 26.27 FHLB Capital Stock \$
- 26.28 On deposit with states \$
- 26.29 On deposit with other regulatory bodies \$
- 26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$
- 26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$
- 26.32 Other \$

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

- 27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]
- 27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.

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

- 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [] No [X]
- 27.4 If the response to 27.3 is YES, does the reporting entity utilize:
- 27.41 Special accounting provision of SSAP No. 108 Yes [] No [X]
- 27.42 Permitted accounting practice Yes [] No [X]
- 27.43 Other accounting guidance Yes [] No [X]
- 27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [] No [X]
- The reporting entity has obtained explicit approval from the domiciliary state.
 - Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
 - Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
 - Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

- 28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]
- 28.2 If yes, state the amount thereof at December 31 of the current year. \$

29. Excluding items in Schedule E, Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

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

1 Name of Custodian(s)	2 Custodian's Address
US BANK	2204 LAKESHORE DR., STE 302 BIRMINGHAM, AL 3520

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
GENERAL INTERROGATORIES

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

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

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

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

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

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

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

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

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

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

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

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

30.2 If yes, complete the following schedule:

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

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

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

GENERAL INTERROGATORIES

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

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Issuer Credit Obligations	3,985,692	4,065,479	79,787
31.2 Asset-Backed Securities	1,918,286	1,944,864	26,578
31.3 Preferred stocks	0	0	0
31.4 Totals	5,903,978	6,010,343	106,365

31.5 Describe the sources or methods utilized in determining the fair values:

Fair Values are based on end of period provided by independent pricing services such as LSEG, S&P, Bloomberg, PricingDirect, or Solve

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

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

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

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

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

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:

- a. The security was either:
 - i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
 - ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
- b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
- c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
- d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? Yes [] No [X]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [X] No [] N/A []

GENERAL INTERROGATORIES

38.1 Does the reporting entity directly hold cryptocurrencies? Yes [] No [X]

38.2 If the response to 38.1 is yes, on what schedule are they reported?

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes [] No [X]

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly Yes [] No [X]

39.22 Immediately converted to U.S. dollars Yes [] No [X]

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

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

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 17,428

40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
AM BEST	17,428

41.1 Amount of payments for legal expenses, if any? \$

41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid

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

42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1 Name	2 Amount Paid

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]

1.2 If yes, indicate premium earned on U. S. business only. \$ _____

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$ _____
 1.31 Reason for excluding

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

1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$ _____ 0

1.6 Individual policies:

	Most current three years:	
1.61 Total premium earned	\$	0
1.62 Total incurred claims	\$	0
1.63 Number of covered lives		0
All years prior to most current three years:		
1.64 Total premium earned	\$	0
1.65 Total incurred claims	\$	0
1.66 Number of covered lives		0

1.7 Group policies:

	Most current three years:	
1.71 Total premium earned	\$	0
1.72 Total incurred claims	\$	0
1.73 Number of covered lives		0
All years prior to most current three years:		
1.74 Total premium earned	\$	0
1.75 Total incurred claims	\$	0
1.76 Number of covered lives		0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator		
2.2 Premium Denominator		
2.3 Premium Ratio (2.1/2.2)	0.000	0.000
2.4 Reserve Numerator		
2.5 Reserve Denominator	0	0
2.6 Reserve Ratio (2.4/2.5)	0.000	0.000

3.1 Did the reporting entity issue participating policies during the calendar year? Yes [] No [X]

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

3.21 Participating policies	\$	
3.22 Non-participating policies	\$	

4. For mutual reporting Entities and Reciprocal Exchanges only:

4.1 Does the reporting entity issue assessable policies? Yes [] No [X]

4.2 Does the reporting entity issue non-assessable policies? Yes [] No [X]

4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? % _____

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

5. For Reciprocal Exchanges Only:

5.1 Does the Exchange appoint local agents? Yes [] No [X]

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation.....	Yes []	No []	N/A [X]
5.22 As a direct expense of the exchange.....	Yes []	No []	N/A [X]

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

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [X]

5.5 If yes, give full information

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
 THE COMPANY DOES NOT WRITE WORKER'S COMPENSATION INSURANCE Yes [X] No []
- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
 THE COMPANY HAS A REINSURANCE AGREEMENT THAT CEDES 100% OF LOSSES TO INSURORS INDEMNITY COMPANY Yes [] No []
- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
 THE COMPANY HAS A 100% CEDED REINSURANCE TO IIC AND IIC HAS PURCHASED CATASTROPHE EXCESS OF LOSS REINSURANCE ON ALL PROPERTY BUSINESS Yes [] No []
- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [X] No []
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss
 Yes [] No []
- 7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)? Yes [] No [X]
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions.
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [] No [X]
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [] No [X]
- 8.2 If yes, give full information

- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
 (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
 (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
 (c) Aggregate stop loss reinsurance coverage;
 (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
 (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
 (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [] No [X]
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
 (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
 (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [] No [X]
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
 (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
 (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
 (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62 - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
 (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
 (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [] No [X]
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
 (a) The entity does not utilize reinsurance; or, Yes [] No [X]
 (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [X] No []
 (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes [] No [X]
10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [] No [] N/A [X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? Yes [] No [X]
- 11.2 If yes, give full information
.....
- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
- 12.11 Unpaid losses \$
- 12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$
- 12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral and other funds. \$ _____
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [] N/A [X]
- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
- 12.41 From %
- 12.42 To..... %
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [] No [X]
- 12.6 If yes, state the amount thereof at December 31 of the current year:
- 12.61 Letters of Credit \$
- 12.62 Collateral and other funds..... \$
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ _____
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [] No [X]
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
.....
- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [] No [X]
- 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No [X]
- 14.5 If the answer to 14.4 is no, please explain:
.....
- 15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]
- 15.2 If yes, give full information
.....
- 16.1 Does the reporting entity write any warranty business? Yes [] No [X]
If yes, disclose the following information for each of the following types of warranty coverage:

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

* Disclose type of coverage:
.....

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

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

- 17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance \$
- 17.12 Unfunded portion of Interrogatory 17.11 \$
- 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11..... \$
- 17.14 Case reserves portion of Interrogatory 17.11 \$
- 17.15 Incurred but not reported portion of Interrogatory 17.11 \$
- 17.16 Unearned premium portion of Interrogatory 17.11 \$
- 17.17 Contingent commission portion of Interrogatory 17.11 \$

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 18.1 Do you act as a custodian for health savings accounts? Yes [] No [X]
- 18.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$
- 18.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
- 18.4 If yes, please provide the balance of funds administered as of the reporting date. \$
19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []
- 19.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

FIVE-YEAR HISTORICAL DATA

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

	1 2025	2 2024	3 2023	4 2022	5 2021
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. Liability lines (Lines 11, 16, 17, 18 & 19)	15,500	2,513	3,434	0	0
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	9,809,818	3,307,320	1,309,285	1,040,737	246,237
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	17,009,708	5,052,572	1,510,777	882,823	1,015,342
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
6. Total (Line 35)	26,835,026	8,362,405	2,823,496	1,923,560	1,261,579
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11, 16, 17, 18 & 19)	0	0	0	0	0
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
12. Total (Line 35)	0	0	0	0	0
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	1,819,664	680,497	105,442	160,309	270,562
14. Net investment gain (loss) (Line 11)	414,158	342,817	102,118	51,506	62,186
15. Total other income (Line 15)	19,892	92,913	5,855	5,173	3,512
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	473,280	194,969	44,817	45,513	70,613
18. Net income (Line 20)	1,780,434	921,258	168,598	171,475	265,647
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	29,324,489	21,067,875	18,342,592	35,574,159	36,051,457
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	2,546,170	1,667,725	633,264	359,444	293,037
20.2 Deferred and not yet due (Line 15.2)	0	0	0	0	0
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26)	3,133,053	1,459,869	500,218	221,195	345,142
22. Losses (Page 3, Line 1)	0	0	0	0	0
23. Loss adjustment expenses (Page 3, Line 3)	0	0	0	0	0
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)	2,500,000	2,500,000	2,500,000	2,500,000	2,500,000
26. Surplus as regards policyholders (Page 3, Line 37)	26,191,436	19,608,006	17,842,374	35,352,964	35,706,315
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	2,383,357	661,621	165,620	(80,193)	292,158
Risk-Based Capital Analysis					
28. Total adjusted capital	26,191,436	19,608,006	17,842,374	35,352,964	35,706,315
29. Authorized control level risk-based capital	1,316,639	1,172,836	1,082,776	3,733,481	3,793,929
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	25.6	30.8	19.3	7.0	5.5
31. Stocks (Lines 2.1 & 2.2)	49.1	53.6	74.9	91.6	91.6
32. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 & 4.3)	0.0	0.0	0.0	0.0	0.0
34. Cash, cash equivalents and short-term investments (Line 5)	25.4	15.7	5.8	1.5	2.9
35. Contract loans (Line 6)	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7)	0.0	0.0	0.0	0.0	0.0
37. Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.0
38. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
39. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0	0.0	0.0
40. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 9 + 15, Col. 1)	0				0
43. Affiliated preferred stocks (Schedule D, Summary, Line 22, Col. 1)					0
44. Affiliated common stocks (Schedule D, Summary, Line 28, Col. 1)	11,332,886	10,106,795	9,262,422	32,218,276	32,741,378
45. Affiliated mortgage loans on real estate					
46. All other affiliated					
47. Total of above Lines 42 to 46	11,332,886	10,106,795	9,262,422	32,218,276	32,741,378
48. Total Investment in Parent included in Lines 42 to 46 above					
49. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 47 above divided by Page 3, Col. 1, Line 37 x 100.0)	43.3	51.5	51.9	91.1	91.7

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2025	2 2024	3 2023	4 2022	5 2021
Capital and Surplus Accounts (Page 4)					
50. Net unrealized capital gains (losses) (Line 24)	1,226,091	844,374	(4,979,651)	(524,826)	5,500,543
51. Dividends to stockholders (Line 35)					
52. Change in surplus as regards policyholders for the year (Line 38)	6,583,430	1,765,632	(17,510,590)	(353,351)	33,004,815
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
53. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	0	0	0	0	0
54. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,461,004	481,446	274,295	98,487	0
55. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	1,952,758	833,776	500,818	85,482	16,198
56. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
57. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
58. Total (Line 35)	3,413,762	1,315,222	775,113	183,969	16,198
Net Losses Paid (Page 9, Part 2, Col. 4)					
59. Liability lines (Lines 11, 16, 17, 18 & 19)	0	0	0	0	0
60. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
61. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
62. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
63. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
64. Total (Line 35)	0	0	0	0	0
Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
65. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
66. Losses incurred (Line 2)	0.0	0.0	0.0	0.0	0.0
67. Loss expenses incurred (Line 3)	0.0	0.0	0.0	0.0	0.0
68. Other underwriting expenses incurred (Line 4)	0.0	0.0	0.0	0.0	0.0
69. Net underwriting gain (loss) (Line 8)	0.0	0.0	0.0	0.0	0.0
Other Percentages					
70. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	0.0	0.0	0.0	0.0	0.0
71. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	0.0	0.0	0.0	0.0	0.0
72. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	0.0	0.0	0.0	0.0	0.0
One Year Loss Development (\$000 omitted)					
73. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)	0	0	0	0	0
74. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 73 above divided by Page 4, Line 21, Col. 1 x 100.0).....	0.0	0.0	0.0	0.0	0.0
Two Year Loss Development (\$000 omitted)					
75. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	0	0	0	0	0
76. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 75 above divided by Page 4, Line 21, Col. 2 x 100.0)	0.0	0.0	0.0	0.0	0.0

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



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2025

NAIC Company Code 11496

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$

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

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279

BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2025

NAIC Company Code 11496

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$

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

19 KS



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2025

NAIC Company Code 11496

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Federal flood, etc., ending with a Total (a) row.

(a) Finance and service charges not included in Lines 1 to 35 \$

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

19 MO



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2025

NAIC Company Code 11496

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability portion), Commercial multiple peril (liability portion), Mortgage guaranty, Ocean marine, Inland marine, Pet insurance plans, Financial guaranty, Medical professional liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (group and Individual), Vision only (b), Dental only (b), Disability income (b), Medicare supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-term care (b), Federal employees health benefits plan (b), Other health (b), Workers' compensation, Other liability - occurrence, Other liability - claims-Made, Excess workers' compensation, Products liability - occurrence, Products liability - claims-made, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate write-ins for other lines of business, Total (a), 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).

(a) Finance and service charges not included in Lines 1 to 35 \$

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

19 NM



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2025

NAIC Company Code 11496

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability portion), Commercial multiple peril (liability portion), Mortgage guaranty, Ocean marine, Inland marine, Pet insurance plans, Financial guaranty, Medical professional liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (group and Individual), Vision only (b), Dental only (b), Disability income (b), Medicare supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-term care (b), Federal employees health benefits plan (b), Other health (b), Workers' compensation, Other liability - occurrence, Other liability - claims-Made, Excess workers' compensation, Products liability - occurrence, Products liability - claims-made, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate write-ins for other lines of business, Total (a), DETAILS OF WRITE-INS, 3401, 3402, 3403, 3498, 3499.

(a) Finance and service charges not included in Lines 1 to 35 \$

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

19.TX



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3279

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2025

NAIC Company Code 11496

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied lines, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability portion), Commercial multiple peril (liability portion), Mortgage guaranty, Ocean marine, Inland marine, Pet insurance plans, Financial guaranty, Medical professional liability, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (group and Individual), Vision only (b), Dental only (b), Disability income (b), Medicare supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-term care (b), Federal employees health benefits plan (b), Other health (b), Workers' compensation, Other liability - occurrence, Other liability - claims-Made, Excess workers' compensation, Products liability - occurrence, Products liability - claims-made, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Commercial auto no-fault (personal injury protection), Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate write-ins for other lines of business, Total (a), DETAILS OF WRITE-INS, 3401, 3402, 3403, 3498, 3499.

(a) Finance and service charges not included in Lines 1 to 35 \$ 0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

19 GT

Schedule F - Part 1 - Assumed Reinsurance

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
74-2262949	.43273	INSURORS INDEMNITY COMPANY	TX		26,556	183	21	296	14	1,557	156	13,408	0	15,635	0	1,455	0	14,180	0	
0399999. Total authorized - affiliates - U.S. non-pool - other					26,556	183	21	296	14	1,557	156	13,408	0	15,635	0	1,455	0	14,180	0	
0499999. Total authorized - affiliates - U.S. non-pool					26,556	183	21	296	14	1,557	156	13,408	0	15,635	0	1,455	0	14,180	0	
0799999. Total authorized - affiliates - other (non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999. Total authorized - affiliates					26,556	183	21	296	14	1,557	156	13,408	0	15,635	0	1,455	0	14,180	0	
05-0316605	.21482	FACTORY MUTAL INSURANCE CO	RI		279	0	0	10	1	7	0	112	0	130	0	90	0	40	0	
0999999. Total authorized - other U.S. unaffiliated insurers					279	0	0	10	1	7	0	112	0	130	0	90	0	40	0	
1499999. Total authorized excluding Protected Cells (Sum of 0899999, 1099999, 1199999 and 1299999)					26,835	183	21	306	15	1,564	156	13,520	0	15,765	0	1,545	0	14,220	0	
1899999. Total unauthorized - affiliates - U.S. non-pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2199999. Total unauthorized - affiliates - other (non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2299999. Total unauthorized - affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2899999. Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3299999. Total certified - affiliates - U.S. non-pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3599999. Total certified - affiliates - other (non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3699999. Total certified - affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4299999. Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4699999. Total reciprocal jurisdiction - affiliates - U.S. non-pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4999999. Total reciprocal jurisdiction - affiliates - other (non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5099999. Total reciprocal jurisdiction - affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5699999. Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5799999. Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					26,835	183	21	306	15	1,564	156	13,520	0	15,765	0	1,545	0	14,220	0	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9999999 Totals					26,835	183	21	306	15	1,564	156	13,520	0	15,765	0	1,545	0	14,220	0	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
74-2262949	INSURORS INDEMNITY COMPANY	0	0		0	1,455	14,180	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0399999	Total authorized - affiliates - U.S. non-pool - other	0	0	XXX	0	1,455	14,180	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999	Total authorized - affiliates - U.S. non-pool	0	0	XXX	0	1,455	14,180	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999	Total authorized - affiliates - other (non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
0899999	Total authorized - affiliates	0	0	XXX	0	1,455	14,180	0	0	0	0	0	0	0	XXX	0	0
05-0316605	FACTORY MUTAL INSURANCE CO	0	0		0	90	40	0	130	156	90	66	0	66	1	0	1
0999999	Total authorized - other U.S. unaffiliated insurers	0	0	XXX	0	90	40	0	130	156	90	66	0	66	XXX	0	1
1499999	Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	1,545	14,220	0	130	156	90	66	0	66	XXX	0	1
1899999	Total unauthorized - affiliates - U.S. non-pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999	Total unauthorized - affiliates - other (non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999	Total unauthorized - affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3299999	Total certified - affiliates - U.S. non-pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total certified - affiliates - other (non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999	Total certified - affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4299999	Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4699999	Total reciprocal jurisdiction - affiliates - U.S. non-pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total reciprocal jurisdiction - affiliates - other (non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999	Total reciprocal jurisdiction - affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999	Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999	Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	0	0	XXX	0	1,545	14,220	0	130	156	90	66	0	66	XXX	0	1
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999	Totals	0	0	XXX	0	1,545	14,220	0	130	156	90	66	0	66	XXX	0	1

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												42 Total Overdue Cols. 38+39 +40+41
74-2262949	INSURORS INDEMNITY COMPANY	204	0	0	0	0	204	0	0	204	0	0	0.0	0.0	0.0	XXX	0
0399999	Total authorized - affiliates - U.S. non-pool - other	204	0	0	0	0	204	0	0	204	0	0	0.0	0.0	0.0	XXX	0
0499999	Total authorized - affiliates - U.S. non-pool	204	0	0	0	0	204	0	0	204	0	0	0.0	0.0	0.0	XXX	0
0799999	Total authorized - affiliates - other (non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
0899999	Total authorized - affiliates	204	0	0	0	0	204	0	0	204	0	0	0.0	0.0	0.0	XXX	0
05-0316605	FACTORY MUTAL INSURANCE CO	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
0999999	Total authorized - other U.S. unaffiliated insurers	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
1499999	Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	204	0	0	0	0	204	0	0	204	0	0	0.0	0.0	0.0	XXX	0
1899999	Total unauthorized - affiliates - U.S. non-pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
2199999	Total unauthorized - affiliates - other (non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
2299999	Total unauthorized - affiliates	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
3299999	Total certified - affiliates - U.S. non-pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
3599999	Total certified - affiliates - other (non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
3699999	Total certified - affiliates	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
4299999	Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
4699999	Total reciprocal jurisdiction - affiliates - U.S. non-pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
4999999	Total reciprocal jurisdiction - affiliates - other (non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
5099999	Total reciprocal jurisdiction - affiliates	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
5699999	Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
5799999	Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	204	0	0	0	0	204	0	0	204	0	0	0.0	0.0	0.0	XXX	0
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
9999999	Totals	204	0	0	0	0	204	0	0	204	0	0	0.0	0.0	0.0	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
74-2262949	INSURORS INDEMNITY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0399999	Total authorized - affiliates - U.S. non-pool - other			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999	Total authorized - affiliates - U.S. non-pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999	Total authorized - affiliates - other (non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999	Total authorized - affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
05-0316605	FACTORY MUTAL INSURANCE CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999	Total authorized - other U.S. unaffiliated insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999	Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999	Total unauthorized - affiliates - U.S. non-pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total unauthorized - affiliates - other (non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999	Total unauthorized - affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3299999	Total certified - affiliates - U.S. non-pool			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
3599999	Total certified - affiliates - other (non-U.S.)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
3699999	Total certified - affiliates			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
4299999	Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
4699999	Total reciprocal jurisdiction - affiliates - U.S. non-pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4999999	Total reciprocal jurisdiction - affiliates - other (non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5099999	Total reciprocal jurisdiction - affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5699999	Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5799999	Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
9999999	Totals			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 3 (Continued)

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

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

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	23,099,904		23,099,904
2. Premiums and considerations (Line 15)	2,546,170	13,520,000	16,066,170
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	204,483	2,041,000	2,245,483
4. Funds held by or deposited with reinsured companies (Line 16.2)	0		0
5. Other assets	3,473,932		3,473,932
6. Net amount recoverable from reinsurers			0
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	29,324,489	15,561,000	44,885,489
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	0	2,041,000	2,041,000
10. Taxes, expenses, and other obligations (Lines 4 through 8)	849,286		849,286
11. Unearned premiums (Line 9)		13,520,000	13,520,000
12. Advance premiums (Line 10)	581,518		581,518
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	1,544,931		1,544,931
15. Funds held by company under reinsurance treaties (Line 13)	0		0
16. Amounts withheld or retained by company for account of others (Line 14)			0
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	157,318		157,318
19. Total liabilities excluding protected cell business (Line 26)	3,133,053	15,561,000	18,694,053
20. Protected cell liabilities (Line 27)			0
21. Surplus as regards policyholders (Line 37)	26,191,436	XXX	26,191,436
22. Totals (Line 38)	29,324,489	15,561,000	44,885,489

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

If yes, give full explanation:

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2016.....	11,823	11,823	0	6,680	6,680	191	191	418	418	82	0	XXX
3. 2017.....	12,956	12,956	0	4,913	4,913	298	298	358	358	92	0	XXX
4. 2018.....	13,650	13,650	0	2,846	2,846	37	37	261	261	34	0	XXX
5. 2019.....	14,726	14,726	0	6,374	6,374	18	18	277	277	81	0	XXX
6. 2020.....	13,236	13,236	0	5,421	5,421	2	2	317	317	22	0	XXX
7. 2021.....	616	616	0	16	16	0	0	4	4	0	0	XXX
8. 2022.....	1,804	1,804	0	505	505	0	0	65	65	7	0	XXX
9. 2023.....	2,335	2,335	0	500	500	0	0	80	80	0	0	XXX
10. 2024.....	5,999	5,999	0	1,413	1,413	0	0	166	166	0	0	XXX
11. 2025	16,934	16,934	0	3,263	3,263	0	0	322	322	6	0	XXX
12. Totals	XXX	XXX	XXX	31,931	31,931	546	546	2,268	2,268	324	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2024.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2025	306	306	1,565	1,565	0	0	22	22	149	149	0	0	52
12. Totals	306	306	1,565	1,565	0	0	22	22	149	149	0	0	52

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2016.....	7,289	7,289	0	61.7	61.7	0.0	0	0	0	0	0
3. 2017.....	5,569	5,569	0	43.0	43.0	0.0	0	0	0	0	0
4. 2018.....	3,144	3,144	0	23.0	23.0	0.0	0	0	0	0	0
5. 2019.....	6,669	6,669	0	45.3	45.3	0.0	0	0	0	0	0
6. 2020.....	5,740	5,740	0	43.4	43.4	0.0	0	0	0	0	0
7. 2021.....	20	20	0	3.2	3.2	0.0	0	0	0	0	0
8. 2022.....	570	570	0	31.6	31.6	0.0	0	0	0	0	0
9. 2023.....	580	580	0	24.8	24.8	0.0	0	0	0	0	0
10. 2024.....	1,579	1,579	0	26.3	26.3	0.0	0	0	0	0	0
11. 2025	5,627	5,627	0	33.2	33.2	0.0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025		
1. Prior.....	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2016.....	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	XXX	XXX
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	XXX	XXX
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX	XXX
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0
6. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0
7. 2021.....	391	391	0	0	0	0	0	1	1	0	0	3
8. 2022.....	1,165	1,165	0	371	371	0	0	46	46	7	0	64
9. 2023.....	1,017	1,017	0	288	288	0	0	47	47	0	0	70
10. 2024.....	2,678	2,678	0	613	613	0	0	74	74	0	0	102
11. 2025.....	6,103	6,103	0	1,387	1,387	0	0	139	139	0	0	217
12. Totals	XXX	XXX	XXX	2,659	2,659	0	0	307	307	7	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2024.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2025.....	134	134	572	572	0	0	0	0	43	43	0	0	28
12. Totals	134	134	572	572	0	0	0	0	43	43	0	0	28

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2021.....	1	1	0	0.3	0.3	0.0	0	0	0.0	0	0
8. 2022.....	417	417	0	35.8	35.8	0.0	0	0	0.0	0	0
9. 2023.....	335	335	0	32.9	32.9	0.0	0	0	0.0	0	0
10. 2024.....	687	687	0	25.7	25.7	0.0	0	0	0.0	0	0
11. 2025.....	2,275	2,275	0	37.3	37.3	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1B - Private Passenger Auto Liability/Medical

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2016.....	8,852.....	8,852.....	0.....	5,957.....	5,957.....	187.....	187.....	359.....	359.....	22.....	0.....	435.....
3. 2017.....	9,662.....	9,662.....	0.....	4,217.....	4,217.....	287.....	287.....	279.....	279.....	91.....	0.....	392.....
4. 2018.....	10,245.....	10,245.....	0.....	2,411.....	2,411.....	17.....	17.....	209.....	209.....	32.....	0.....	272.....
5. 2019.....	11,346.....	11,346.....	0.....	4,100.....	4,100.....	10.....	10.....	212.....	212.....	51.....	0.....	363.....
6. 2020.....	10,229.....	10,229.....	0.....	4,731.....	4,731.....	2.....	2.....	256.....	256.....	21.....	0.....	369.....
7. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2023.....	168.....	168.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2024.....	782.....	782.....	0.....	162.....	162.....	0.....	0.....	6.....	6.....	0.....	0.....	6.....
11. 2025.....	4,368.....	4,368.....	0.....	398.....	398.....	0.....	0.....	27.....	27.....	0.....	0.....	33.....
12. Totals.....	XXX.....	XXX.....	XXX.....	21,976.....	21,976.....	503.....	503.....	1,348.....	1,348.....	217.....	0.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2022.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2023.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2024.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2025.....	5.....	5.....	590.....	590.....	0.....	0.....	22.....	22.....	58.....	58.....	0.....	0.....	3.....
12. Totals.....	5.....	5.....	590.....	590.....	0.....	0.....	22.....	22.....	58.....	58.....	0.....	0.....	3.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....
2. 2016.....	6,503.....	6,503.....	0.....	73.5.....	73.5.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2017.....	4,783.....	4,783.....	0.....	49.5.....	49.5.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
4. 2018.....	2,637.....	2,637.....	0.....	25.7.....	25.7.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
5. 2019.....	4,322.....	4,322.....	0.....	38.1.....	38.1.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
6. 2020.....	4,989.....	4,989.....	0.....	48.8.....	48.8.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
7. 2021.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2022.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
9. 2023.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
10. 2024.....	168.....	168.....	0.....	21.5.....	21.5.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2025.....	1,100.....	1,100.....	0.....	25.2.....	25.2.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	0.....

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2016.....	419	419	0	0	0	4	4	3	3	0	0	2
3. 2017.....	400	400	0	28	28	0	0	2	2	0	0	1
4. 2018.....	395	395	0	4	4	19	19	7	7	1	0	7
5. 2019.....	401	401	0	2	2	7	7	4	4	1	0	6
6. 2020.....	323	323	0	10	10	0	0	1	1	1	0	5
7. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2023.....	1	1	0	0	0	0	0	0	0	0	0	0
10. 2024.....	1	1	0	0	0	0	0	0	0	0	0	0
11. 2025.....	6	6	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	44	44	30	30	17	17	3	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2024.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2025.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2016.....	7	7	0	1.7	1.7	0.0	0	0	0.0	0	0
3. 2017.....	30	30	0	7.5	7.5	0.0	0	0	0.0	0	0
4. 2018.....	30	30	0	7.6	7.6	0.0	0	0	0.0	0	0
5. 2019.....	13	13	0	3.2	3.2	0.0	0	0	0.0	0	0
6. 2020.....	11	11	0	3.4	3.4	0.0	0	0	0.0	0	0
7. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2022.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2023.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2024.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2025.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2016.....												
3. 2017.....												
4. 2018.....												
5. 2019.....												
6. 2020.....												
7. 2021.....												
8. 2022.....												
9. 2023.....												
10. 2024.....												
11. 2025.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....													
7. 2021.....													
8. 2022.....													
9. 2023.....													
10. 2024.....													
11. 2025.....													
12. Totals													

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2016.....											
3. 2017.....											
4. 2018.....											
5. 2019.....											
6. 2020.....											
7. 2021.....											
8. 2022.....											
9. 2023.....											
10. 2024.....											
11. 2025.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed	
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments					
	Direct and Assumed	Ceded	Net (1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	XXX
2. 2016	2,512	2,512	0	722	722	0	0	55	55	59	0	0	XXX
3. 2017	2,855	2,855	0	654	654	10	10	75	75	0	0	0	XXX
4. 2018	2,970	2,970	0	431	431	1	1	45	45	1	0	0	XXX
5. 2019	2,932	2,932	0	2,272	2,272	1	1	61	61	29	0	0	XXX
6. 2020	2,647	2,647	0	679	679	0	0	60	60	0	0	0	XXX
7. 2021	225	225	0	16	16	0	0	3	3	0	0	0	XXX
8. 2022	639	639	0	134	134	0	0	19	19	0	0	0	XXX
9. 2023	1,148	1,148	0	212	212	0	0	33	33	0	0	0	XXX
10. 2024	2,450	2,450	0	638	638	0	0	86	86	0	0	0	XXX
11. 2025	6,303	6,303	0	1,478	1,478	0	0	156	156	6	0	0	XXX
12. Totals	XXX	XXX	XXX	7,236	7,236	12	12	593	593	95	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2019	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2022	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2023	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2024	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2025	167	167	398	398	0	0	0	0	48	48	0	0	21
12. Totals	167	167	398	398	0	0	0	0	48	48	0	0	21

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2016	777	777	0	30.9	30.9	0.0	0	0	0.0	0	0
3. 2017	739	739	0	25.9	25.9	0.0	0	0	0.0	0	0
4. 2018	477	477	0	16.1	16.1	0.0	0	0	0.0	0	0
5. 2019	2,334	2,334	0	79.6	79.6	0.0	0	0	0.0	0	0
6. 2020	739	739	0	27.9	27.9	0.0	0	0	0.0	0	0
7. 2021	19	19	0	8.4	8.4	0.0	0	0	0.0	0	0
8. 2022	153	153	0	23.9	23.9	0.0	0	0	0.0	0	0
9. 2023	245	245	0	21.3	21.3	0.0	0	0	0.0	0	0
10. 2024	724	724	0	29.6	29.6	0.0	0	0	0.0	0	0
11. 2025	2,247	2,247	0	35.6	35.6	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1J - Auto Physical Damage

N O N E

Schedule P - Part 1K - Fidelity/Surety

N O N E

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

N O N E

Schedule P - Part 1M - International

N O N E

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2016.....	40	40	0	1	1	0	0	1	1	1	1	2
3. 2017.....	39	39	0	14	14	1	1	2	2	2	1	3
4. 2018.....	40	40	0	0	0	0	0	0	0	0	0	0
5. 2019.....	47	47	0	0	0	0	0	0	0	0	0	0
6. 2020.....	37	37	0	1	1	0	0	0	0	0	0	1
7. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0
8. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0
9. 2023.....	1	1	0	0	0	0	0	0	0	0	0	0
10. 2024.....	1	1	0	0	0	0	0	0	0	0	0	0
11. 2025.....	1	1	0	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	16	16	1	1	3	3	2	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2024.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2025.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2016.....	2	2	0	5.0	5.0	0.0	0	0	0.0	0	0
3. 2017.....	17	17	0	43.6	43.6	0.0	0	0	0.0	0	0
4. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2020.....	1	1	0	2.7	2.7	0.0	0	0	0.0	0	0
7. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2022.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2023.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2024.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2025.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

N O N E

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

N O N E

Schedule P - Part 1T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 1U - PET INSURANCE PLANS
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX
3. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX
4. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX
5. 2019.....	0	0	0	0	0	0	0	0	0	0	0	XXX
6. 2020.....	0	0	0	0	0	0	0	0	0	0	0	XXX
7. 2021.....	0	0	0	0	0	0	0	0	0	0	0	XXX
8. 2022.....	0	0	0	0	0	0	0	0	0	0	0	XXX
9. 2023.....	0	0	0	0	0	0	0	0	0	0	0	XXX
10. 2024.....	87	87	0	0	0	0	0	0	0	0	0	XXX
11. 2025.....	153	153	0	0	0	0	0	0	0	0	0	XXX
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2022.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2023.....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. 2024.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2025.....	0	0	5	5	0	0	0	0	0	0	0	0	0
12. Totals	0	0	5	5	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2016.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3. 2017.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4. 2018.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5. 2019.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6. 2020.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7. 2021.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8. 2022.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9. 2023.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10. 2024.....	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11. 2025.....	5	5	0	3.3	3.3	0.0	0	0	0.0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

NONE

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

NONE

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....					0	0	0	0	0	0	0	0
3. 2017.....	XXX					0	0	0	0	0	0	0
4. 2018.....	XXX	XXX				0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX			0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX			0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX		0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	0	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0	XXX
12. Totals											0	0

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX			XXX								
12. Totals											XXX	XXX

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX			XXX								
12. Totals											XXX	XXX

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX			XXX								
12. Totals											XXX	XXX

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX			XXX								
12. Totals											XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 2N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX	XXX								
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
12. Totals											0	0

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

SCHEDULE P - PART 2T - WARRANTY

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX		XXX	XXX								
12. Totals												

SCHEDULE P - PART 2U - PET INSURANCE PLANS

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX				XXX							
11. 2025.....	XXX	0	XXX	XXX								
12. Totals											0	0

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SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025			
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2017.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2018.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2019.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	28.....	36.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	32.....	38.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	63.....	39.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	129.....	60.....

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....												
10. 2024.....	XXX.....												
11. 2025.....	XXX.....												

NONE

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....												
10. 2024.....	XXX.....												
11. 2025.....	XXX.....												

NONE

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....												
10. 2024.....	XXX.....												
11. 2025.....	XXX.....												

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	25.....	
2. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	252.....	183.....
3. 2017.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	199.....	193.....
4. 2018.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	154.....	118.....
5. 2019.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	219.....	144.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	178.....	191.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2023.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....						
10. 2024.....	XXX.....	0.....	0.....	0.....	4.....	2.....							
11. 2025.....	XXX.....	0.....	0.....	17.....	13.....								

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025			
1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....												
10. 2024.....	XXX.....												
11. 2025.....	XXX.....												

NONE

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....					XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....				XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

NONE

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

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	1.....
3. 2017.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	0.....
4. 2018.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	4.....
5. 2019.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	3.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	3.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....												
10. 2024.....	XXX.....												
11. 2025.....	XXX.....												

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025		
1. Prior.....	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2016.....						0	0	0	0	0	XXX	XXX
3. 2017.....	XXX					0	0	0	0	0	XXX	XXX
4. 2018.....	XXX	XXX				0	0	0	0	0	XXX	XXX
5. 2019.....	XXX	XXX	XXX			0	0	0	0	0	XXX	XXX
6. 2020.....	XXX	XXX	XXX	XXX			0	0	0	0	XXX	XXX
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX	XXX
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	000											
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX											
10. 2024.....	XXX											
11. 2025.....	XXX											

NONE

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	000										XXX	XXX
2. 2016.....											XXX	XXX
3. 2017.....	XXX										XXX	XXX
4. 2018.....	XXX	XXX									XXX	XXX
5. 2019.....	XXX	XXX	XXX								XXX	XXX
6. 2020.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2021.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2023.....	XXX				XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2024.....	XXX			XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

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

1. Prior.....	000										XXX	XXX
2. 2016.....											XXX	XXX
3. 2017.....	XXX										XXX	XXX
4. 2018.....	XXX	XXX									XXX	XXX
5. 2019.....	XXX	XXX	XXX								XXX	XXX
6. 2020.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2021.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2023.....	XXX				XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2024.....	XXX			XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000										XXX	XXX
2. 2016.....											XXX	XXX
3. 2017.....	XXX										XXX	XXX
4. 2018.....	XXX	XXX									XXX	XXX
5. 2019.....	XXX	XXX	XXX								XXX	XXX
6. 2020.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2021.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2023.....	XXX				XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2024.....	XXX			XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE P - PART 3N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025			
1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

**SCHEDULE P - PART 3O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....					XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....				XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....					XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....				XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025			
1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	.....
2. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	0.....
3. 2017.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	1.....
4. 2018.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2019.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	0.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....												
10. 2024.....	XXX.....												
11. 2025.....	XXX.....												

NONE

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....					XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....				XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

NONE

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....												
10. 2024.....	XXX.....												
11. 2025.....	XXX.....												

NONE

SCHEDULE P - PART 3U - PET INSURANCE PLANS

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....					XXX.....	XXX.....						
10. 2024.....	XXX.....				XXX.....	XXX.....							
11. 2025.....	XXX.....	0.....	XXX.....	XXX.....									

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SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX									
10. 2024.....	XXX									
11. 2025.....	XXX									

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX									
10. 2024.....	XXX									
11. 2025.....	XXX									

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX									
10. 2024.....	XXX									
11. 2025.....	XXX									

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	0	0	0						
10. 2024.....	XXX	0	0							
11. 2025.....	XXX	0								

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XXX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XXX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XXX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX									
11. 2025.....	XXX									

NONE

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....									0	0
3. 2017.....	XXX								0	0
4. 2018.....	XXX	XXX							0	0
5. 2019.....	XXX	XXX	XXX						0	0
6. 2020.....	XXX	XXX	XXX	XXX					0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX				0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX			0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX									
10. 2024.....	XXX									
11. 2025.....	XXX									

NONE

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX									
10. 2024.....	XXX									
11. 2025.....	XXX									

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX									
10. 2024.....	XXX									
11. 2025.....	XXX									

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX									
10. 2024.....	XXX									
11. 2025.....	XXX									

NONE

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**SCHEDULE P - PART 4N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

**SCHEDULE P - PART 4O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XX	XX					
8. 2022.....	XXX	XXX	XX	XX	XX	XX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XX	XX					
8. 2022.....	XXX	XXX	XX	XX	XX	XX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0
3. 2017.....	.XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	.XXX	.XXX	0	0	0	0	0	0	0	0
5. 2019.....	.XXX	.XXX	.XXX	0	0	0	0	0	0	0
6. 2020.....	.XXX	.XXX	.XXX	.XXX	0	0	0	0	0	0
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	0	0	0	0	0
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0	0	0	0
9. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0	0	0
10. 2024.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0	0
11. 2025.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	0

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

1. Prior.....										
2. 2016.....										
3. 2017.....	.XXX									
4. 2018.....	.XXX	.XXX								
5. 2019.....	.XXX	.XXX	.XXX							
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2023.....	.XXX									
10. 2024.....	.XXX									
11. 2025.....	.XXX									

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	.XXX									
4. 2018.....	.XXX	.XXX								
5. 2019.....	.XXX	.XXX	.XXX							
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2023.....	.XXX									
10. 2024.....	.XXX									
11. 2025.....	.XXX									

NONE

SCHEDULE P - PART 4T - WARRANTY

1. Prior.....										
2. 2016.....										
3. 2017.....	.XXX									
4. 2018.....	.XXX	.XXX								
5. 2019.....	.XXX	.XXX	.XXX							
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2023.....	.XXX									
10. 2024.....	.XXX									
11. 2025.....	.XXX									

NONE

SCHEDULE P - PART 4U - PET INSURANCE PLANS

1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....										
3. 2017.....	.XXX									
4. 2018.....	.XXX	.XXX								
5. 2019.....	.XXX	.XXX	.XXX							
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2023.....	.XXX									
10. 2024.....	.XXX									
11. 2025.....	.XXX									

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SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	3	3	3	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	15	25	28	28
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	32	32
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	63
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	129

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	9	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	28

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	9	9	2	3	3
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	52	49	64	64
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45	70	70
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	98	102
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	217

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2

N O N E

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2

N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	74	19	0	3	3	0	0	0	0	0
2. 2016.....	151	224	241	243	252	252	252	252	252	252
3. 2017.....	XXX	143	191	197	199	204	204	204	199	199
4. 2018.....	XXX	XXX	110	144	154	157	157	157	154	154
5. 2019.....	XXX	XXX	XXX	142	219	226	226	226	219	219
6. 2020.....	XXX	XXX	XXX	XXX	178	264	264	264	178	178
7. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	4
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	16	7	1	1	0	0	0	0	0	0
2. 2016.....	101	31	13	3	0					
3. 2017.....	XXX	60	17	9	5					
4. 2018.....	XXX	XXX	30	6	3					
5. 2019.....	XXX	XXX	XXX	35	7					
6. 2020.....	XXX	XXX	XXX	XXX	86					
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	42	1	1	2	2	0	0	0	0	0
2. 2016.....	390	423	435	435	436	435	435	435	435	435
3. 2017.....	XXX	351	388	393	397	397	397	397	392	392
4. 2018.....	XXX	XXX	250	267	275	275	275	275	272	272
5. 2019.....	XXX	XXX	XXX	261	370	370	370	370	363	363
6. 2020.....	XXX	XXX	XXX	XXX	455	455	455	455	369	369
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	6
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	2	0	0	0	0	0	0	0	0	0
2. 2016.....	1	1	1	1	1	1	1	1	1	1
3. 2017.....	XXX	1	1	1	1	1	1	1	1	1
4. 2018.....	XXX	XXX	1	3	3	3	3	3	3	3
5. 2019.....	XXX	XXX	XXX	3	3	3	3	3	3	3
6. 2020.....	XXX	XXX	XXX	XXX	2	2	2	2	2	2
7. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	1	0	0	0	0	0	0	0	0	0
2. 2016.....	1	1	1	0	0					
3. 2017.....	XXX	0	0	0	0					
4. 2018.....	XXX	XXX	2	1	0				2	
5. 2019.....	XXX	XXX	XXX	3	0				1	
6. 2020.....	XXX	XXX	XXX	XXX	0					
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	2	0	0	0	0	0	0	0	0	0
2. 2016.....	2	2	2	2	2	2	2	2	2	2
3. 2017.....	XXX	1	1	1	1	1	1	1	1	1
4. 2018.....	XXX	XXX	6	7	7	5	5	5	7	7
5. 2019.....	XXX	XXX	XXX	6	6	5	5	5	6	6
6. 2020.....	XXX	XXX	XXX	XXX	5	5	5	5	5	5
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE
SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	3	0	1	0	0	0	0	0	0	0
2. 2016.....	1	2	2	3	2	2	2	2	2	2
3. 2017.....	XXX	2	3	2	2	2	2	2	2	2
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	1	1	1	1	1	1
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	1	1	0	0	0	0	0	0	0	0
2. 2016.....	1	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	1	0	0	0	0	0	0	0	0	0
2. 2016.....	2	2	2	2	2	2	2	2	2	2
3. 2017.....	XXX	2	3	3	3	3	3	3	3	3
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	1	1	1	1	1	1
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

NONE

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

NONE

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

NONE

Schedule P - Part 5T - Warranty - Section 1

NONE

Schedule P - Part 5T - Warranty - Section 2

NONE

Schedule P - Part 5T - Warranty - Section 3

NONE

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

NONE

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

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	10,229	10,229	10,229	10,229	10,229	10,229	10,229
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	168	168	168	168
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	782	782	782
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,368	4,368
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,368
13. Earned Premiums (Sch P-Pt. 1)	8,852	9,662	10,245	11,346	10,229	0	0	168	782	4,368	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	10,229	10,229	10,229	10,229	10,229	10,229	10,229
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	168	168	168	168
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	782	782	782
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,368	4,368
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,368
13. Earned Premiums (Sch P-Pt. 1)	8,852	9,662	10,245	11,346	10,229	0	0	168	782	4,368	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	323	323	323	323	323	323	323
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	6
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6
13. Earned Premiums (Sch P-Pt. 1)	419	400	395	401	323	0	0	1	1	6	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	323	323	323	323	323	323	323
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	6
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6
13. Earned Premiums (Sch P-Pt. 1)	419	400	395	401	323	0	0	1	1	6	XXX

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 6M - International - Section 1

N O N E

Schedule P - Part 6M - International - Section 2

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	47	47	47	47	47	47	47	47
6. 2020.....	XXX	XXX	XXX	XXX	37	37	37	37	37	37	37
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sch P-Pt. 1)	40	39	40	47	37	0	0	1	1	1	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2016.....	0	0	0	0	0	0	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2020.....	XXX	XXX	XXX	XXX	37	37	37	37	37	37	37
7. 2021.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1
13. Earned Premiums (Sch P-Pt. 1)	40	39	40	47	37	0	0	1	1	1	XXX

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

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	
1. Prior.....											
2. 2016.....											
3. 2017.....	XXX										
4. 2018.....	XXX	XXX									
5. 2019.....	XXX	XXX	XXX								
6. 2020.....	XXX	XXX	XXX	XXX							
7. 2021.....	XXX	XXX	XXX	XXX	XXX						
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	
1. Prior.....											
2. 2016.....											
3. 2017.....	XXX										
4. 2018.....	XXX	XXX									
5. 2019.....	XXX	XXX	XXX								
6. 2020.....	XXX	XXX	XXX	XXX							
7. 2021.....	XXX	XXX	XXX	XXX	XXX						
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE P INTERROGATORIES

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

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2016		
1.603 2017		
1.604 2018		
1.605 2019		
1.606 2020		
1.607 2021		
1.608 2022		
1.609 2023		
1.610 2024		
1.611 2025		
1.612 Totals	0	0

- 2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
- 3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
- 4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

- 5. What were the net premiums in force at the end of the year for:
(in thousands of dollars)
 - 5.1 Fidelity
 - 5.2 Surety

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

7.2 (An extended statement may be attached.)
.....

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	E	42,053	31,347	0	0	0	0	
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. District of Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	E	1,234	22,772	0	0	0	0	
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	E	(3,961)	1,094	0	0	0	0	
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	E	92,870	24,462	0	0	0	0	
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	D	26,702,830	16,854,027	0	3,413,762	5,000,382	1,870,293	
45. Utah	UT	N							
46. Vermont	VT	N							
47. Virginia	VA	N							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0
59. Totals	XXX		26,835,026	16,933,702	0	3,413,762	5,000,382	1,870,293	0
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX		0	0	0	0	0	0	0

(a) Active Status Counts:

- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 0
- 2. R - Registered - Non-domiciled RRGs..... 0
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)..... 4
- 4. Q - Qualified - Qualified or accredited reinsurer..... 0
- 5. D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile..... 1
- 6. N - None of the above - Not allowed to write business in the state..... 52

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

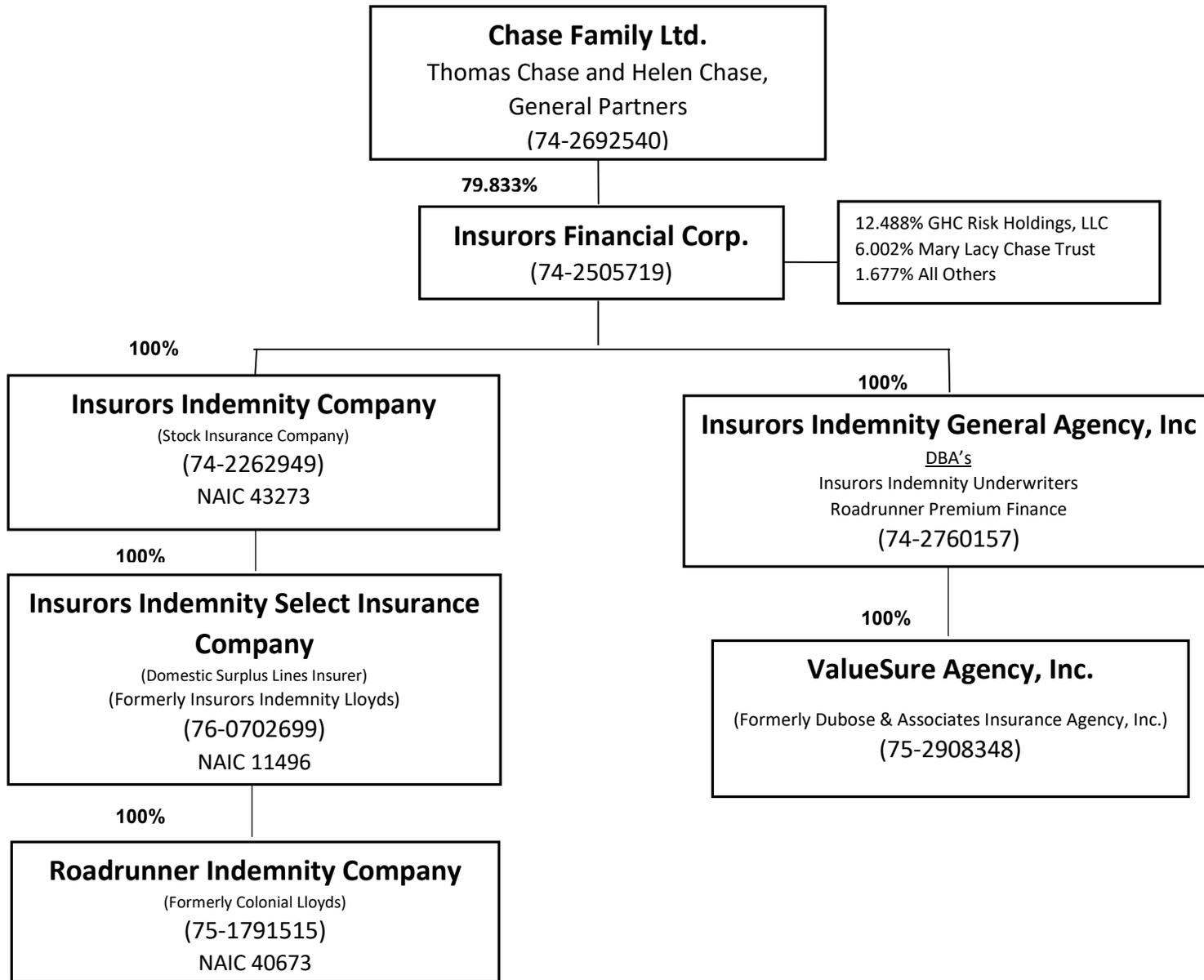
AMOUNT OF DIRECT WRITTEN PREMIUM OF POLICIES WRITTEN IS ALLOCATED BY STATE

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

Allocated by States and Territories

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

NONE



Effective: 8/29/2025

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.3279	Insurors Indemnity Companies	40673	75-1791515	0	0		Roadrunner Indemnity Company	TX	RE	Insurors Indemnity Select Insurance Company	Ownership	100.000	Chase Family, LTD	NO	0
.3279	Insurors Indemnity Companies	11496	76-0702699	0	0		Insurors Indemnity Select Insurance Company	TX	RE	Insurors Indemnity Company	Ownership	100.000	Chase Family, LTD	NO	0
.3279	Insurors Indemnity Companies	43273	74-2262949	0	0		Insurors Indemnity Company	TX	RE	Insurors Financial Corp	Ownership	100.000	Chase Family, LTD	NO	0
.0000		00000	75-2908348	0	0		ValueSure Agency, Inc.	TX	NIA	Insurors Indemnity General Agency, Inc.	Ownership	100.000	Chase Family, LTD	NO	0
.0000		00000	74-2760157	0	0		Insurors Indemnity General Agency, Inc.	TX	NIA	Insurors Financial Corp	Ownership	100.000	Chase Family, LTD	NO	0
.0000		00000	74-2505719	0	0		Insurors Financial Corp.	TX	UIP	Chase Family, LTD	Ownership	79.833	Chase Family, LTD	NO	0
.0000		00000	74-2505719	0	0		Insurors Financial Corp.	TX	NIA	GHC Risk Holdings LLC	Ownership	12.488	Chase Family, LTD	NO	0
.0000		00000	74-2692540	0	0		Chase Family Ltd	TX	UIP	Thomas Chase and Helen Chase	Ownership	100.000	Thomas Chase and Helen Chase Michael Doak and R.	NO	0
.0000		00000	99-3860598	0	0		GHC Risk Holdings LLC	DE	UIP	Griffin Highline Capital LLC	Ownership	100.000	Kent McGaughy	NO	0
.0000		00000	85-1655697	0	0		Griffin Highline Capital LLC	DE	UIP	Griffin Highline Holdings LLC	Board of Directors	0.000	Michael Doak	NO	0
.0000		00000	82-4864945	0	0		Griffin Highline Holdings LLC	DE	UIP	Michael Doak	Ownership	100.000	Michael Doak	NO	0
.0000		00000	85-1655697	0	0		Griffin Highline Capital LLC	DE	UIP	Canary Partners, LP	Ownership	15.600	R. Kent McGaughy	NO	0
.0000		00000	77-0616887	0	0		Canary Partners	TX	UIP	CPMG Inc	Ownership	100.000	R. Kent McGaughy	NO	0
.0000		00000	00-0000000	0	0		CPMG Inc.	TX	UIP	R. Kent McGaughy	Ownership	50.000	R. Kent McGaughy	NO	0
							R. Kent McGaughy		UIP			0.000		NO	
							Michael Doak		UIP			0.000		NO	

NONE

Asterisk	
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SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
99999	74-2760157	Insurors Indemnity General Agency, Inc.	0	0	0	0	1,844,039	0		0	1,844,039	0
11496	74-0702699	Insurors Indemnity Select Insurance Company	0	0	0	0	(1,844,039)	0		0	(1,844,039)	0
43273	74-2262949	Insurors Indemnity Company	0	0	0	0	0	(12,442,019)		0	(12,442,019)	0
11496	74-0702699	Insurors Indemnity Select Insurance Company	0	0	0	0	0	12,442,019		0	12,442,019	0
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

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

SUPPLEMENTAL FILINGS

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

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

Explanations:

- 11.
- 12.
- 13.
- 14.
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Bar Codes:

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

OVERFLOW PAGE FOR WRITE-INS

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 14	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage of Column 5 Line 14
1. Issuer credit obligations (Schedule D, Part 1, Section 1):						
1.01 U.S. government obligations.....	3,260,999	14.117	3,260,999	0	3,260,999	14.117
1.02 Other U.S. government obligations	0	0.000	0	0	0	0.000
1.03 Non-U.S. sovereign jurisdiction securities.....	0	0.000	0	0	0	0.000
1.04 Municipal bonds – general obligations (direct & guaranteed)	0	0.000	0	0	0	0.000
1.05 Municipal bonds – special revenue.....	0	0.000	0	0	0	0.000
1.06 Project finance bonds issued by operating entities	0	0.000	0	0	0	0.000
1.07 Corporate bonds	724,694	3.137	724,693	0	724,693	3.137
1.08 Mandatory convertible bonds	0	0.000	0	0	0	0.000
1.09 Single entity backed obligations	0	0.000	0	0	0	0.000
1.10 SVO-Identified bond exchange traded funds – fair value	0	0.000	0	0	0	0.000
1.11 SVO-Identified bond exchange traded funds – systematic value	0	0.000	0	0	0	0.000
1.12 Bonds issued by funds representing operating entities.....	0	0.000	0	0	0	0.000
1.13 Bank loans - issued.....	0	0.000	0	0	0	0.000
1.14 Bank loans - acquired.....	0	0.000	0	0	0	0.000
1.15 Mortgages loans that qualify as SVO-Identified credit tenant loans.....	0	0.000	0	0	0	0.000
1.16 Certificates of deposit.....	0	0.000	0	0	0	0.000
1.17 Other issuer credit obligations.....	0	0.000	0	0	0	0.000
1.18 Total issuer credit obligations.....	3,985,693	17.254	3,985,692	0	3,985,692	17.254
2. Asset-backed securities (Schedule D, Part 1, Section 2):						
2.01 Financial asset-backed securities – self-liquidating	1,918,284	8.304	1,918,285	0	1,918,285	8.304
2.02 Financial asset-backed securities – not self-liquidating	0	0.000	0	0	0	0.000
2.03 Non-financial asset-backed securities	0	0.000	0	0	0	0.000
2.04 Total asset-backed securities.....	1,918,284	8.304	1,918,285	0	1,918,285	8.304
3. Preferred stocks (Schedule D, Part 2, Section 1):						
3.01 Industrial and miscellaneous (unaffiliated).....	0	0.000	0	0	0	0.000
3.02 Parent, subsidiaries and affiliates.....	0	0.000	0	0	0	0.000
3.03 Total preferred stocks.....	0	0.000	0	0	0	0.000
4. Common stocks (Schedule D, Part 2, Section 2):						
4.01 Industrial and miscellaneous - publicly traded (unaffiliated)	0	0.000	0	0	0	0.000
4.02 Industrial and miscellaneous - other (unaffiliated)	0	0.000	0	0	0	0.000
4.03 Parent, subsidiaries and affiliates - publicly traded	0	0.000	0	0	0	0.000
4.04 Parent, subsidiaries and affiliates - other	11,332,886	49.060	11,332,886	0	11,332,886	49.060
4.05 Mutual funds	0	0.000	0	0	0	0.000
4.06 Unit investment trusts	0	0.000	0	0	0	0.000
4.07 Closed-end funds	0	0.000	0	0	0	0.000
4.08 Exchange traded funds	0	0.000	0	0	0	0.000
4.09 Total common stocks	11,332,886	49.060	11,332,886	0	11,332,886	49.060
5. Mortgage loans (Schedule B):						
5.01 Farm mortgages	0	0.000	0	0	0	0.000
5.02 Residential mortgages	0	0.000	0	0	0	0.000
5.03 Commercial mortgages	0	0.000	0	0	0	0.000
5.04 Mezzanine real estate loans	0	0.000	0	0	0	0.000
5.05 Total valuation allowance	0	0.000	0	0	0	0.000
5.06 Total mortgage loans	0	0.000	0	0	0	0.000
6. Real estate (Schedule A):						
6.01 Properties occupied by company	0	0.000	0	0	0	0.000
6.02 Properties held for production of income	0	0.000	0	0	0	0.000
6.03 Properties held for sale	0	0.000	0	0	0	0.000
6.04 Total real estate	0	0.000	0	0	0	0.000
7. Cash, cash equivalents and short-term investments:						
7.01 Cash (Schedule E, Part 1)	5,668,762	24.540	5,668,762	0	5,668,762	24.540
7.02 Cash equivalents (Schedule E, Part 2)	194,279	0.841	194,279	0	194,279	0.841
7.03 Short-term investments (Schedule DA)	0	0.000	0	0	0	0.000
7.04 Total cash, cash equivalents and short-term investments	5,863,041	25.381	5,863,041	0	5,863,041	25.381
8. Contract loans	0	0.000	0	0	0	0.000
9. Derivatives (Schedule DB)	0	0.000	0	0	0	0.000
10. Other invested assets (Schedule BA)	0	0.000	0	0	0	0.000
11. Receivables for securities	0	0.000	0	0	0	0.000
12. Securities Lending (Schedule DL, Part 1).....	0	0.000	0	XXX	XXX	XXX
13. Other invested assets (Page 2, Line 11)	0	0.000	0	0	0	0.000
14. Total invested assets	23,099,904	100.000	23,099,904	0	23,099,904	100.000

Schedule A - Verification - Real Estate

N O N E

Schedule B - Verification - Mortgage Loans

N O N E

Schedule BA - Verification - Other Long-Term Invested Assets

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

	1	2	3	4	5
	Total	Issuer Credit Obligations	Asset-Backed Securities	Preferred Stocks	Common Stocks
1. Book/adjusted carrying value, December 31 of prior year.....	15,912,058	3,590,743	2,214,520	.0	10,106,795
2. Cost of bonds and stocks acquired, Part 3, Column 6.....	875,124	875,124	.0	.0	.0
3. Accrual of discount	21,796	15,289	6,507	.0	.XXX.
4. Unrealized valuation increase/(decrease).....	1,226,091	.0	.0	.0	1,226,091
5. Total gain (loss) on disposals, Part 4, Column 18 .....	.0	.0	.0	.0	.0
6. Consideration for bonds and stocks disposed, Part 4, Column 6.....	797,475	495,000	302,475	.0	.0
7. Amortization of premium	731	463	268	.0	.XXX.
8. Total foreign exchange change in book/adjusted carrying value .....	.0	.0	.0	.0	.0
9. Current year's other-than-temporary impairment recognized .....	.0	.0	.0	.0	.0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2 .....	.0	.0	.0	.0	.XXX.
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	17,236,863	3,985,693	1,918,284	.0	11,332,886
12. Total nonadmitted amounts .....	.0	.0	.0	.0	.0
13. Statement value at end of current period (Line 11 minus Line 12)	17,236,863	3,985,693	1,918,284	0	11,332,886

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - SUMMARY BY COUNTRY

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

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Issuer Credit Obligations					
Governments and Municipalities	1. United States	3,260,999	3,325,007	3,254,073	3,275,000
	2. Canada	0	0	0	0
	3. Other Countries.....	0	0	0	0
	4. Total	3,260,999	3,325,007	3,254,073	3,275,000
All Other Issuer Credit Obligations (unaffiliated)	5. United States	724,693	740,473	694,100	750,000
	6. Canada	0	0	0	0
	7. Other Countries.....	0	0	0	0
8. Total	724,693	740,473	694,100	750,000	
All Other Issuer Credit Obligations (affiliated)	9. Total				
	10. Total Issuer Credit Obligations	3,985,692	4,065,480	3,948,173	4,025,000
Asset-Backed Securities					
Asset-Backed Securities (unaffiliated)	11. United States.....	1,918,285	1,944,864	1,913,999	1,967,239
	12. Canada.....	0	0	0	0
	13. Other Countries	0	0	0	0
14. Total	1,918,285	1,944,864	1,913,999	1,967,239	
Asset-Backed Securities (affiliated)	15. Total				
	16. Total Asset-Backed Securities	1,918,285	1,944,864	1,913,999	1,967,239
	17. Total Bonds	5,903,977	6,010,344	5,862,172	5,992,239
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	18. United States	0	0	0	
	19. Canada	0	0	0	
	20. Other Countries.....	0	0	0	
	21. Total	0	0	0	
Parent, Subsidiaries and Affiliates	22. Total				
	23. Total Preferred Stocks	0	0	0	
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds	24. United States	0	0	0	
	25. Canada	0	0	0	
	26. Other Countries.....	0	0	0	
	27. Total	0	0	0	
Parent, Subsidiaries and Affiliates	28. Total	11,332,886	11,332,886	9,262,422	
	29. Total Common Stocks	11,332,886	11,332,886	9,262,422	
	30. Total Stocks	11,332,886	11,332,886	9,262,422	
	31. Total Bonds and Stocks	17,236,863	17,343,230	15,124,594	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Government Obligations												
1.1 NAIC 1	0	2,485,408	775,591	0	0	XXX	3,260,999	55.2	XXX	XXX	3,260,999	0
1.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
1.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
1.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
1.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
1.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
1.7 Totals	0	2,485,408	775,591	0	0	XXX	3,260,999	55.2	XXX	XXX	3,260,999	0
2. Other U.S. Government Securities												
2.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
2.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
2.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
2.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
2.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
2.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
2.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
3. Non-U.S. Sovereign Jurisdiction Securities												
3.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
3.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
3.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
3.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
3.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
3.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
3.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
4. Municipal Bonds – General Obligations												
4.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
4.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
4.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
4.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
4.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
4.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
4.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
5. Municipal Bonds – Special Revenue												
5.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
5.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
5.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
5.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
5.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
5.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
5.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
6. Project Finance Bonds Issued by Operating Entities (Unaffiliated)												
6.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
6.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
6.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
6.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
6.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
6.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
6.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
7. Project Finance Bonds Issued by Operating Entities (Affiliated)												
7.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
7.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
7.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
7.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
7.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
7.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
7.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
8. Corporate Bonds (Unaffiliated)												
8.1 NAIC 1	0	724,693	0	0	0	XXX	724,693	12.3	XXX	XXX	724,693	0
8.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
8.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
8.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
8.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
8.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
8.7 Totals	0	724,693	0	0	0	XXX	724,693	12.3	XXX	XXX	724,693	0
9. Corporate Bonds (Affiliated)												
9.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
9.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
9.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
9.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
9.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
9.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
9.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10. Mandatory Convertible Bonds (Unaffiliated)												
10.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11. Mandatory Convertible Bonds (Affiliated)												
11.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12. Single Entity Backed Obligations (Unaffiliated)												
12.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
13. Single Entity Backed Obligations (Affiliated)												
13.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
13.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
13.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
13.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
13.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
13.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
13.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
14. SVO-Identified Bond Exchange Traded Funds – Fair Value												
14.1 NAIC 1	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
14.2 NAIC 2	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
14.3 NAIC 3	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
14.4 NAIC 4	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
14.5 NAIC 5	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
14.6 NAIC 6	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
14.7 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
15. SVO-Identified Bond Exchange Traded Funds – Systematic Value												
15.1 NAIC 1	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
15.2 NAIC 2	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
15.3 NAIC 3	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
15.4 NAIC 4	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
15.5 NAIC 5	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
15.6 NAIC 6	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
15.7 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
16. Bonds Issued by Funds Representing Operating Entities (Unaffiliated)												
16.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
16.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
16.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
16.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
16.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
16.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
16.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
17. Bonds Issued by Funds Representing Operating Entities (Affiliated)												
17.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
17.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
17.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
17.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
17.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
17.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
17.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
18. Bank Loans – Issued (Unaffiliated)												
18.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
18.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
18.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
18.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
18.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
18.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
18.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
19. Bank Loans – Issued (Affiliated)												
19.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
19.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
19.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
19.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
19.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
19.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
19.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
20. Bank Loans – Acquired (Unaffiliated)												
20.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
20.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
20.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
20.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
20.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
20.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
20.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
21. Bank Loans – Acquired (Affiliated)												
21.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
21.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
21.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
21.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
21.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
21.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
21.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
22. Mortgage Loans that Qualify as SVO-Identified Credit Tenant Loans (Unaffiliated)												
22.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
22.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
22.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
22.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
22.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
22.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
22.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
23. Mortgage Loans that Qualify as SVO-Identified Credit Tenant Loans (Affiliated)												
23.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
23.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
23.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
23.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
23.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
23.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
23.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
24. Certificates of Deposit (Unaffiliated)												
24.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
24.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
24.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
24.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
24.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
24.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
24.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
25. Certificates of Deposit (Affiliated)												
25.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
25.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
25.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
25.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
25.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
25.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
25.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
26. Other Issuer Credit Obligations (Unaffiliated)												
26.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
26.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
26.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
26.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
26.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
26.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
26.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
27. Other Issuer Credit Obligations (Affiliated)												
27.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
27.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
27.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
27.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
27.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
27.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
27.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
28. Agency Residential Mortgage-Backed Securities - Guaranteed												
28.1 NAIC 1	1,396	4,406	1,538	0	0	XXX	7,340	0.1	XXX	XXX	7,339	1
28.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
28.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
28.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
28.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
28.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
28.7 Totals	1,396	4,406	1,538	0	0	XXX	7,340	0.1	XXX	XXX	7,339	1
29. Agency Commercial Mortgage-Backed Securities - Guaranteed												
29.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
29.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
29.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
29.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
29.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
29.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
29.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
30. Agency Residential Mortgage-Backed Securities - Not Guaranteed												
30.1 NAIC 1	171,590	562,972	509,613	490,545	111,457	XXX	1,846,177	31.3	XXX	XXX	1,846,177	0
30.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
30.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
30.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
30.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
30.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
30.7 Totals	171,590	562,972	509,613	490,545	111,457	XXX	1,846,177	31.3	XXX	XXX	1,846,177	0

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
31. Agency Commercial Mortgage-Backed Securities - Not Guaranteed												
31.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
31.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
31.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
31.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
31.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
31.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
31.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
32. Non-Agency Residential Mortgage-Backed Securities (Unaffiliated)												
32.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
32.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
32.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
32.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
32.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
32.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
32.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
33. Non-Agency Residential Mortgage-Backed Securities (Affiliated)												
33.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
33.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
33.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
33.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
33.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
33.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
33.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
34. Non-Agency Commercial Mortgage-Backed Securities (Unaffiliated)												
34.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
34.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
34.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
34.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
34.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
34.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
34.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
35. Non-Agency Commercial Mortgage-Backed Securities (Affiliated)												
35.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
35.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
35.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
35.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
35.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
35.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
35.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
36. Non-Agency – CLOs/CBOs/CDOs (Unaffiliated)												
36.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
36.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
36.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
36.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
36.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
36.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
36.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
37. Non-Agency – CLOs/CBOs/CDOs (Affiliated)												
37.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
37.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
37.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
37.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
37.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
37.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
37.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
38. Other Financial Asset-Backed Securities (Unaffiliated)												
38.1 NAIC 1	64,769	0	0	0	0	XXX	64,769	1.1	XXX	XXX	64,769	0
38.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
38.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
38.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
38.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
38.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
38.7 Totals	64,769	0	0	0	0	XXX	64,769	1.1	XXX	XXX	64,769	0
39. Other Financial Asset-Backed Securities (Affiliated)												
39.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
39.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
39.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
39.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
39.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
39.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
39.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
40. Equity-Backed Securities (Unaffiliated)												
40.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
40.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
40.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
40.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
40.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
40.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
40.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
41. Equity-Backed Securities (Affiliated)												
41.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
41.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
41.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
41.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
41.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
41.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
41.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
42. Other Financial Asset-Backed Securities – Not Self-Liquidating (Unaffiliated)												
42.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
42.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
42.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
42.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
42.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
42.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
42.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
43. Other Financial Asset-Backed Securities – Not Self-Liquidating (Affiliated)												
43.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
43.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
43.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
43.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
43.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
43.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
43.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
44. Lease-Backed Securities – Practical Expedient (Unaffiliated)												
44.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
44.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
44.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
44.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
44.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
44.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
44.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
45. Lease-Backed Securities – Practical Expedient (Affiliated)												
45.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
45.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
45.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
45.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
45.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
45.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
45.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
46. Other Non-Financial Asset-Backed Securities – Practical Expedient (Unaffiliated)												
46.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
46.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
46.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
46.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
46.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
46.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
46.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
47. Other Non-Financial Asset-Backed Securities – Practical Expedient (Affiliated)												
47.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
47.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
47.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
47.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
47.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
47.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
47.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
48. Lease-Backed Securities – Full Analysis (Unaffiliated)												
48.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
48.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
48.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
48.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
48.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
48.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
48.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
49. Lease-Backed Securities – Full Analysis (Affiliated)												
49.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
49.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
49.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
49.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
49.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
49.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
49.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
50. Other Non-Financial Asset-Backed Securities – Full Analysis (Unaffiliated)												
50.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
50.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
50.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
50.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
50.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
50.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
50.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
51. Other Non-Financial Asset-Backed Securities – Full Analysis (Affiliated)												
51.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
51.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
51.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
51.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
51.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
51.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
51.7 Totals	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1A (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
52. Total Bonds Current Year												
52.1 NAIC 1	237,755	3,777,479	1,286,742	490,545	111,457	0	5,903,978	100.0	XXX	XXX	5,903,977	1
52.2 NAIC 2	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
52.3 NAIC 3	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
52.4 NAIC 4	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
52.5 NAIC 5	(d) 0	0	0	0	0	0	0	0.0	XXX	XXX	0	0
52.6 NAIC 6	(d) 0	0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
52.7 Totals	237,755	3,777,479	1,286,742	490,545	111,457	0	(b) 5,903,978	100.0	XXX	XXX	5,903,977	1
52.8 Line 52.7 as a % of Col. 7	4.0	64.0	21.8	8.3	1.9	0.0	100.0	XXX	XXX	XXX	100.0	0.0
53. Total Bonds Prior Year												
53.1 NAIC 1	832,810	3,734,138	548,178	549,755	140,382	0	XXX	XXX	5,805,263	100.0	5,805,264	(1)
53.2 NAIC 2							XXX	XXX	0	0.0	0	0
53.3 NAIC 3							XXX	XXX	0	0.0	0	0
53.4 NAIC 4							XXX	XXX	0	0.0	0	0
53.5 NAIC 5							XXX	XXX	(c) 0	0.0	0	0
53.6 NAIC 6							XXX	XXX	(c) 0	0.0	0	0
53.7 Totals	832,810	3,734,138	548,178	549,755	140,382	0	XXX	XXX	(b) 5,805,263	100.0	5,805,264	(1)
53.8 Line 53.7 as a % of Col. 9	14.3	64.3	9.4	9.5	2.4	0.0	XXX	XXX	100.0	XXX	100.0	0.0
54. Total Publicly Traded Bonds												
54.1 NAIC 1	237,755	3,777,479	1,286,742	490,545	111,457	0	5,903,978	100.0	XXX	XXX	5,903,978	XXX
54.2 NAIC 2	0	0	0	0	0	0	0	0.0	XXX	XXX	0	XXX
54.3 NAIC 3	0	0	0	0	0	0	0	0.0	XXX	XXX	0	XXX
54.4 NAIC 4	0	0	0	0	0	0	0	0.0	XXX	XXX	0	XXX
54.5 NAIC 5	0	0	0	0	0	0	0	0.0	XXX	XXX	0	XXX
54.6 NAIC 6	0	0	0	0	0	0	0	0.0	XXX	XXX	0	XXX
54.7 Totals	237,755	3,777,479	1,286,742	490,545	111,457	0	5,903,978	100.0	XXX	XXX	5,903,978	XXX
54.8 Line 54.7 as a % of Col. 7	4.0	64.0	21.8	8.3	1.9	0.0	100.0	XXX	XXX	XXX	100.0	XXX
54.9 Line 54.7 as a % of Line 52.7, Col. 7, Section 52	4.0	64.0	21.8	8.3	1.9	0.0	100.0	XXX	XXX	XXX	100.0	XXX
55. Total Privately Placed Bonds												
55.1 NAIC 1	0	0	0	0	0	0	0	0.0	XXX	XXX	XXX	0
55.2 NAIC 2	0	0	0	0	0	0	0	0.0	XXX	XXX	XXX	0
55.3 NAIC 3	0	0	0	0	0	0	0	0.0	XXX	XXX	XXX	0
55.4 NAIC 4	0	0	0	0	0	0	0	0.0	XXX	XXX	XXX	0
55.5 NAIC 5	0	0	0	0	0	0	0	0.0	XXX	XXX	XXX	0
55.6 NAIC 6	0	0	0	0	0	0	0	0.0	XXX	XXX	XXX	0
55.7 Totals	0	0	0	0	0	0	0	0.0	XXX	XXX	XXX	0
55.8 Line 55.7 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
55.9 Line 55.7 as a % of Line 52.7, Col. 7, Section 52	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

(a) Includes \$ 0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ 0 current year of bonds with Z designations and \$ 0 prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.

(c) Includes \$ 0 current year, \$ 0 prior year of bonds with 5GI designations and \$ 0 current year, \$ 0 prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ 0 ; NAIC 2 \$ 0 ; NAIC 3 \$ 0 ; NAIC 4 \$ 0 ; NAIC 5 \$ 0 ; NAIC 6 \$ 0

Schedule DA - Verification - Short-Term Investments

N O N E

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

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS

(Cash Equivalents)

	1 Total	2 Bonds	3 Money Market Mutual funds	4 Other
1. Book/adjusted carrying value, December 31 of prior year	24,243	0	24,243	0
2. Cost of cash equivalents acquired	1,488,871	0	1,488,871	0
3. Accrual of discount	0	0	0	0
4. Unrealized valuation increase/(decrease)	0	0	0	0
5. Total gain (loss) on disposals	0	0	0	0
6. Deduct consideration received on disposals	1,318,835	0	1,318,835	0
7. Deduct amortization of premium	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0	0	0
9. Deduct current year's other-than-temporary impairment recognized	0	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	194,279	0	194,279	0
11. Deduct total nonadmitted amounts	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	194,279	0	194,279	0

Schedule A - Part 1 - Real Estate Owned

NONE

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

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 1 - Mortgage Loans Owned

NONE

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

NONE

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

NONE

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1 - SECTION 1

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

1	2	3	4	5	6	7	8	Change in Book/Adjusted Carrying Value				Interest			Dates		20		
								9	10	11	12	13	14	15	16	17		18	19
CUSIP Identification	Description	Re-stricted Asset Code	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Par Value	Fair Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Stated Rate of	Effective Rate of	When Paid	Interest Income Due & Accrued	Interest Received During Year	Acquired	Stated Contractual Maturity Date	Payment Due at Maturity
91282C-GG-8	UNITED STATES TREASURY NOTE		1.A	99,481	100,000	101,305	99,561	0	80	0	0	4.000	4.116	FA	1,359	2,000	02/27/2025	02/28/2030	102,000
91282C-JW-2	UNITED STATES TREASURY NOTE		1.A	1,481,900	1,500,000	1,519,219	1,488,333	0	3,472	0	0	4.000	4.272	JJ	25,109	60,000	02/13/2024	01/31/2029	1,530,000
91282C-KD-2	UNITED STATES TREASURY NOTE		1.A	401,267	400,000	408,125	400,840	0	(244)	0	0	4.250	4.178	FA	5,776	17,000	03/13/2024	02/28/2029	408,500
91282C-KT-7	US TREASURY N/B		1.A	249,102	250,000	257,246	249,366	0	168	0	0	4.500	4.581	MN	989	11,250	05/30/2024	05/31/2029	255,625
91282C-MA-6	UNITED STATES TREASURY NOTE		1.A	246,681	250,000	254,375	247,308	0	624	0	0	4.125	4.428	MN	907	10,313	12/27/2024	11/30/2029	255,156
91282C-MM-0	US TREASURY N/B		1.A	178,945	175,000	181,870	178,726	0	(219)	0	0	4.625	4.340	FA	3,057	4,047	04/21/2025	02/15/2035	179,047
91282C-NF-4	UNITED STATES TREASURY NOTE		1.A	248,966	250,000	253,496	249,040	0	74	0	0	4.125	4.194	MN	912	5,156	06/16/2025	05/31/2032	255,156
91282C-NW-7	US TREASURY N/B		1.A	347,732	350,000	349,371	347,825	0	93	0	0	3.875	3.982	FA	4,533	0	09/02/2025	08/31/2032	356,781
0019999999	Subtotal - issuer credit obligations - U.S. government obligations (exempt from RBC)			3,254,074	3,275,000	3,325,007	3,260,999	0	4,048	0	0	XXX	XXX	XXX	42,642	109,766	XXX	XXX	3,342,265
756109-BG-8	REALTY INCOME CORP		1.G FE	235,440	250,000	250,010	244,736	0	3,031	0	0	3.950	5.323	FA	3,731	9,875	09/29/2022	08/15/2027	254,938
89236T-KJ-3	TOYOTA MOTOR CREDIT CORP		1.E FE	246,113	250,000	253,053	248,547	0	792	0	0	4.550	4.907	MS	3,191	11,375	10/05/2022	09/20/2027	255,688
976656-CM-8	WISCONSIN ELECTRIC POWER		1.F FE	212,548	250,000	237,410	231,411	0	6,955	0	0	1.700	4.954	JD	189	4,250	02/27/2023	06/15/2028	252,125
0089999999	Subtotal - issuer credit obligations - corporate bonds (unaffiliated)			694,101	750,000	740,473	724,694	0	10,778	0	0	XXX	XXX	XXX	7,111	25,500	XXX	XXX	762,751
0489999999	Total - issuer credit obligations (unaffiliated)			3,948,175	4,025,000	4,065,480	3,985,693	0	14,826	0	0	XXX	XXX	XXX	49,753	135,266	XXX	XXX	4,105,016
0499999999	Total - issuer credit obligations (affiliated)			0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX	0
0509999999	Total - issuer credit obligations			3,948,175	4,025,000	4,065,480	3,985,693	0	14,826	0	0	XXX	XXX	XXX	49,753	135,266	XXX	XXX	4,105,016

1. Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

Line Number	1A	2A	3A	4A	5A	6	1B	2B	3B	4B	5B	1C	2C	3C	4C	5C	1D	1E	1F	1G
1A	3,260,999	0	0	0	0	0	0	0	0	0	0	248,547	0	0	0	0	0	0	231,411	244,736
1B	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1C	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1E	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1F	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 1 - SECTION 2

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

1	2	3	4	5	6	7	8	Change in Book/Adjusted Carrying Value				Interest			Dates		20	21		
								9	10	11	12	13	14	15	16	17			18	19
CUSIP Identification	Description	Re-stricted Asset Code	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Par Value	Fair Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Stated Rate of	Effective Rate of	When Paid	Interest Income Due & Accrued	Interest Received During Year	Acquired	Stated Contractual Maturity Date	Payment Due at Maturity	Origin-ation Ballon Pay-ment %
38374L-RZ-6	GOVERNMENT NATIONAL MORTGAGE A 05-56 JA		1.A FE	7,451	6,664	6,741	7,339	0	(96)	0	0	5.000	1.647	MON	28	333	02/01/2013	05/17/2035	1	
1019999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - agency residential mortgage-backed securities - guaranteed (exempt from RBC)			7,451	6,664	6,741	7,339	0	(96)	0	0	XXX	XXX	XXX	28	333	XXX	XXX	1	XXX
3132DS-LC-4	UMBS - POOL SD4823		1.A FE	1,268,672	1,307,067	1,313,657	1,271,060	0	4,419	0	0	5.000	5.400	MON	5,446	65,353	02/13/2024	12/01/2053	653	
3140LX-CA-1	UMBS - POOL BT8164		1.A FE	195,378	205,155	191,344	196,862	0	1,056	0	0	3.500	4.124	MON	598	7,180	09/07/2022	06/01/2052	78	
3140QP-2F-3	UMBS - POOL CB4373		1.A FE	377,739	383,583	368,090	378,254	0	658	0	0	4.000	4.183	MON	1,279	15,343	09/06/2022	08/01/2052	290	
1039999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - agency residential mortgage-backed securities - not/partially guaranteed (not exempt from RBC)			1,841,789	1,895,805	1,873,091	1,846,176	0	6,133	0	0	XXX	XXX	XXX	7,323	87,876	XXX	XXX	1,021	XXX
98163V-AD-0	WORLD OMNI AUTO RECEIVABLES TR 22-D A3		1.A FE	64,759	64,770	65,032	64,769	0	(164)	0	0	5.610	5.617	MON	161	3,634	11/09/2022	02/15/2028	7,058	
1119999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - other financial asset-backed securities - self-liquidating (unaffiliated)			64,759	64,770	65,032	64,769	0	(164)	0	0	XXX	XXX	XXX	161	3,634	XXX	XXX	7,058	XXX
1209999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating			1,913,999	1,967,239	1,944,864	1,918,284	0	5,873	0	0	XXX	XXX	XXX	7,512	91,843	XXX	XXX	8,080	XXX
1409999999	Subtotal - asset-backed securities - financial asset-backed securities - not self-liquidating			0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX	0	XXX
1609999999	Subtotal - asset-backed securities - non-financial asset-backed securities - practical expedient			0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX	0	XXX
1809999999	Subtotal - asset-backed securities - non-financial asset-backed securities - full analysis			0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX	0	XXX
1889999999	Total - asset-backed securities (unaffiliated)			1,913,999	1,967,239	1,944,864	1,918,284	0	5,873	0	0	XXX	XXX	XXX	7,512	91,843	XXX	XXX	8,080	XXX
1899999999	Total - asset-backed securities (affiliated)			0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX	0	XXX
1909999999	Total - asset-backed securities			1,913,999	1,967,239	1,944,864	1,918,284	0	5,873	0	0	XXX	XXX	XXX	7,512	91,843	XXX	XXX	8,080	XXX
2009999999	Total long term bonds - issuer credit obligations and asset-backed securities			5,862,174	5,992,239	6,010,344	5,903,977	0	20,699	0	0	XXX	XXX	XXX	57,265	227,109	XXX	XXX	4,113,096	XXX

1. Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:
 Number
 1A 1A ..\$ 1,918,284 1B ..\$ 0 1C ..\$ 0 1D ..\$ 0 1E ..\$ 0 1F ..\$ 0 1G ..\$ 0
 1B 2A ..\$ 0 2B ..\$ 0 2C ..\$ 0
 1C 3A ..\$ 0 3B ..\$ 0 3C ..\$ 0
 1D 4A ..\$ 0 4B ..\$ 0 4C ..\$ 0
 1E 5A ..\$ 0 5B ..\$ 0 5C ..\$ 0
 1F 6 ..\$ 0

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 2 - SECTION 1

Showing All PREFERRED STOCKS Owned December 31 of Current Year

1 CUSIP Identi- fication	2 Description	3 Restricted Asset Code	4 Number of Shares	5 Par Value Per Share	6 Book/ Adjusted Carrying Value	Fair Value		9 Actual Cost	Dividends				Change in Book/Adjusted Carrying Value				19 NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admin- istrative Symbol	20 Date Acquired
						7 Rate Per Share Used to Obtain Fair Value	8 Fair Value		10 Amount Received During Year	11 Declared But Unpaid	12 Nonadmitted Declared But Unpaid	13 Cumulative Undeclared	14 Unrealized Valuation Increase/ (Decrease)	15 Current Year's (Amor- tization)/ Accretion	16 Current Year's Other-Than- Temporary Impairment Recognized	17 Total Change in Book/Adjusted Carrying Value (14 + 15 - 16)			18 Total Foreign Exchange Change in Book/ Adjusted Carrying Value
NONE																		
4509999999 - Total preferred stocks						XXX											XXX	XXX

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

E12

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 2 - SECTION 2

Showing All COMMON STOCKS Owned December 31 of Current Year

1 CUSIP Identi- fication	2 Description	3 Restricted Asset Code	4 Number of Shares	5 Book/ Adjusted Carrying Value	Fair Value		8 Actual Cost	Dividends			Change in Book/Adjusted Carrying Value				16 Date Acquired	17 NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admin- istrative Symbol
					6 Rate Per Share Used to Obtain Fair Value	7 Fair Value		9 Declared but Unpaid	10 Amount Received During Year	11 Nonadmitted Declared But Unpaid	12 Unrealized Valuation Increase/ (Decrease)	13 Current Year's Other-Than- Temporary Impairment Recognized	14 Total Change in Book/Adjusted Carrying Value (12 - 13)	15 Total Foreign Exchange Change in Book/Adjusted Carrying Value		
5109999999	Total - common stock - industrial and miscellaneous (unaffiliated)			0	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
5409999999	Total - common stocks - mutual funds			0	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
5609999999	Total - common stocks - unit investment trusts			0	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
5809999999	Total - common stocks - closed-end funds			0	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
000000-00-0	ROADRUNNER INDEMNITY COMPANY		11,332,886.000	11,332,886	1.000	11,332,886	9,262,422				1,226,091		1,226,091		12/31/2023	
5929999999	Subtotal - common stock - parent, subsidiaries and affiliates other			11,332,886	XXX	11,332,886	9,262,422	0	0	0	1,226,091	0	1,226,091	0	XXX	XXX
5979999999	Total - common stocks - parent, subsidiaries and affiliates			11,332,886	XXX	11,332,886	9,262,422	0	0	0	1,226,091	0	1,226,091	0	XXX	XXX
5989999999	Total common stocks			11,332,886	XXX	11,332,886	9,262,422	0	0	0	1,226,091	0	1,226,091	0	XXX	XXX
5999999999	Total preferred and common stocks			11,332,886	XXX	11,332,886	9,262,422	0	0	0	1,226,091	0	1,226,091	0	XXX	XXX

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

E13

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends
91282C-G0-8	UNITED STATES TREASURY NOTE	02/27/2025	BMO CAPITAL MARKETS CORP.		99,481	100,000	0
91282C-MM-0	US TREASURY N/B	04/21/2025	BMO CAPITAL MARKETS CORP.		178,945	175,000	1,476
91282C-NF-4	UNITED STATES TREASURY NOTE	06/16/2025	BOFA SECURITIES INC.		248,966	250,000	479
91282C-NW-7	US TREASURY N/B	09/02/2025	BOFA SECURITIES INC.		347,732	350,000	112
0019999999	Subtotal - issuer credit obligations - U.S. government obligations (exempt from RBC)				875,124	875,000	2,067
0489999999	Total - issuer credit obligations (unaffiliated)				875,124	875,000	2,067
0499999999	Total - issuer credit obligations (affiliated)				0	0	0
0509999997	Total - issuer credit obligations - Part 3				875,124	875,000	2,067
0509999998	Total - issuer credit obligations - Part 5						
0509999999	Total - issuer credit obligations				875,124	875,000	2,067
1889999999	Total - asset-backed securities (unaffiliated)				0	0	0
1899999999	Total - asset-backed securities (affiliated)				0	0	0
1909999997	Total - asset-backed securities - Part 3				0	0	0
1909999998	Total - asset-backed securities - Part 5						
1909999999	Total - asset-backed securities				0	0	0
2009999999	Total - issuer credit obligations and asset-backed securities				875,124	875,000	2,067
4509999997	Total - preferred stocks - Part 3				0	XXX	0
4509999998	Total - preferred stocks - Part 5					XXX	
4509999999	Total - preferred stocks				0	XXX	0
5989999997	Total - common stocks - Part 3				0	XXX	0
5989999998	Total - common stocks - Part 5					XXX	
5989999999	Total - common stocks				0	XXX	0
5999999999	Total - preferred and common stocks				0	XXX	0
6009999999	Totals				875,124	XXX	2,067

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	Change In Book/Adjusted Carrying Value					15	16	17	18	19	20	
									10	11	12	13	14							
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Con- sideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other- Than- Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Value (10+11-12)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	
17284D-BS-0	CIT BANK NA	.06/03/2025	MATURITY 100.0000		200,000	200,000	200,000	200,000	0	0	0	0	0	200,000	0	0	0	2,942	06/03/2025	
254672-TE-8	DISCOVER BANK	.08/05/2025	MATURITY 100.0000		95,000	95,000	95,000	95,000	0	0	0	0	0	95,000	0	0	0	2,850	08/05/2025	
38148J-ZR-5	GOLDMAN SACHS BANK USA	.07/29/2025	MATURITY 100.0000		100,000	100,000	100,000	100,000	0	0	0	0	0	100,000	0	0	0	3,050	07/29/2025	
73319F-AK-5	POPPY BANK	.03/27/2025	MATURITY 100.0000		100,000	100,000	100,000	100,000	0	0	0	0	0	100,000	0	0	0	271	03/27/2025	
0249999999	Subtotal - issuer credit obligations - certificates of deposit (unaffiliated)				495,000	495,000	495,000	495,000	0	0	0	0	0	495,000	0	0	0	9,113	XXX	
0489999999	Total - issuer credit obligations (unaffiliated)				495,000	495,000	495,000	495,000	0	0	0	0	0	495,000	0	0	0	9,113	XXX	
0499999999	Total - issuer credit obligations (affiliated)				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0509999997	Total - issuer credit obligations - Part 4				495,000	495,000	495,000	495,000	0	0	0	0	0	495,000	0	0	0	9,113	XXX	
0509999998	Total - issuer credit obligations - Part 5				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0509999999	Total - issuer credit obligations				495,000	495,000	495,000	495,000	0	0	0	0	0	495,000	0	0	0	9,113	XXX	
38374L-RZ-6	GOVERNMENT NATIONAL MORTGAGE A 05-56 JA	.12/01/2025	MBS PAYDOWN 100.0000		1,336	1,336	1,494	1,344	0	(8)	0	(8)	0	1,336	0	0	0	34	05/17/2035	
1019999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - agency residential mortgage-backed securities - guaranteed (exempt from RBC)				1,336	1,336	1,494	1,344	0	(8)	0	(8)	0	1,336	0	0	0	34	XXX	
3132DS-LC-4	UMBS - POOL SD4823	.12/01/2025	MBS PAYDOWN 100.0000		103,249	103,249	100,216	103,108	0	140	0	140	0	103,249	0	0	0	3,461	12/01/2053	
3140LX-CA-1	UMBS - POOL BT8164	.12/01/2025	MBS PAYDOWN 100.0000		15,766	15,766	15,015	15,736	0	30	0	30	0	15,766	0	0	0	376	06/01/2052	
3140QP-2F-3	UMBS - POOL CB4373	.12/01/2025	MBS PAYDOWN 100.0000		41,598	41,598	40,964	41,566	0	31	0	31	0	41,598	0	0	0	905	08/01/2052	
1039999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - agency residential mortgage-backed securities - not/partially guaranteed (not exempt from RBC)				160,613	160,613	156,195	160,410	0	201	0	201	0	160,613	0	0	0	4,742	XXX	
98163V-AD-0	WORLD OMNI AUTO RECEIVABLES TR 22-D A3	.12/15/2025	MBS PAYDOWN 100.0000		140,526	140,526	140,501	140,353	0	173	0	173	0	140,526	0	0	0	3,978	02/15/2028	
1119999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - other financial asset-backed securities - self-liquidating (unaffiliated)				140,526	140,526	140,501	140,353	0	173	0	173	0	140,526	0	0	0	3,978	XXX	
1889999999	Total - asset-backed securities (unaffiliated)				302,475	302,475	298,190	302,107	0	366	0	366	0	302,475	0	0	0	8,754	XXX	
1899999999	Total - asset-backed securities (affiliated)				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
1909999997	Total - asset-backed securities - Part 4				302,475	302,475	298,190	302,107	0	366	0	366	0	302,475	0	0	0	8,754	XXX	
1909999998	Total - asset-backed securities - Part 5				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
1909999999	Total - asset-backed securities				302,475	302,475	298,190	302,107	0	366	0	366	0	302,475	0	0	0	8,754	XXX	
2009999999	Total - issuer credit obligations and asset-backed securities				797,475	797,475	793,190	797,107	0	366	0	366	0	797,475	0	0	0	17,867	XXX	
4509999997	Total - preferred stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4509999998	Total - preferred stocks - Part 5				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4509999999	Total - preferred stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5989999997	Total - common stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5989999998	Total - common stocks - Part 5				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5989999999	Total - common stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5999999999	Total - preferred and common stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6009999999	Totals				797,475	XXX	793,190	797,107	0	366	0	366	0	797,475	0	0	0	17,867	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 5

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

1 CUSIP Identi- fication	2 Description	3 Date Acquired	4 Name of Vendor	5 Disposal Date	6 Name of Purchaser	7 Par Value (Bonds) or Number of Shares (Stock)	8 Actual Cost	9 Consid- eration	10 Book/ Adjusted Carrying Value at Disposal	Change in Book/Adjusted Carrying Value					16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Interest and Dividends Received During Year	20 Paid for Accrued Interest and Dividends
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amort- ization)/ Accretion	13 Current Year's Other- Than- Temporary Impairment Recognized	14 Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	15 Total Foreign Exchange Change in Book/ Adjusted Carrying Value					
NONE																			
6009999999 - Totals																			

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE D - PART 6 - SECTION 1

Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

1 CUSIP Identification	2 Description, Name of Subsidiary, Controlled or Affiliated Company	3 NAIC Company Code	4 ID Number	5 NAIC Valuation Method	6 Book/Adjusted Carrying Value	7 Total Amount of Goodwill Included in Book/Adjusted Carrying Value	8 Nonadmitted Amount	Stock of Such Company Owned by Insurer on Statement Date	
								9 Number of Shares	10 % of Outstanding
0999999. Total preferred stocks					0	0	0	XXX	XXX
000000-00-0	ROADRUNNER INDEMNITY COMPANY	40673	75-1791515	8B1	11,332,886				
1099999. Subtotal - common stock - parent					11,332,886	0	0	XXX	XXX
1899999. Total common stocks					11,332,886	0	0	XXX	XXX
1999999 - Totals					11,332,886	0	0	XXX	XXX

1. Total amount of goodwill nonadmitted \$

SCHEDULE D - PART 6 - SECTION 2

1 CUSIP Identification	2 Name of Lower-Tier Company	3 Name of Company Listed in Section 1 Which Controls Lower-Tier Company	4 Total Amount of Goodwill Included in Amount Shown in Column 7, Section 1	Stock in Lower-Tier Company Owned Indirectly by Insurer on Statement Date	
				5 Number of Shares	6 % of Outstanding
NONE					
0399999 - Total				XXX	XXX

Schedule DA - Part 1 - Short-Term Investments Owned

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
Depository	Re- stricted Asset Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
CENTRAL NATIONAL BANK AGA CLAIMS WACO, TX					(167,016)	.XXX.
CENTRAL NATIONAL BANK AGA PREMIUM WACO, TX		2.620	31,304		1,485,055	.XXX.
CENTRAL NATIONAL BANK AGA REFUND WACO, TX					(22,697)	.XXX.
CENTRAL NATIONAL BANK iMGA CLAIM WACO, TX					(255,176)	.XXX.
CENTRAL NATIONAL BANK OPERATING WACO, TX		2.590	17,807		1,058,813	.XXX.
CENTRAL NATIONAL BANK ATLAS CLAIM WACO, TX		2.610	5,907		276,553	.XXX.
CENTRAL NATIONAL BANK iMGA PREMIUM WACO, TX		2.610	24,830		1,795,643	.XXX.
CENTRAL NATIONAL BANK iMGA REFUND WACO, TX					(57,166)	.XXX.
COMMUNITY NATIONAL BANK MIDLAND, TX		2.250	3,371		247,773	.XXX.
FIRST CITIZENS BANK & TRUST COMPANY RALEIGH, NC		2.250	2,512		247,754	.XXX.
FIRST BANK NASHVILLE, TN		2.250	564		68,927	.XXX.
NEXBANK DALLAS, TX		2.250	2,781		247,055	.XXX.
PINNACLE BANK NASHVILLE, TN		2.250	1,209		247,773	.XXX.
THE BANCORP BANK SIOUX FALLS, SD		2.250	983		247,773	.XXX.
THE HUNTINGTON NATIONAL BANK COLUMBUS, OH		2.250	1,037		247,698	.XXX.
0199998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - open depositories	XXX	XXX	0	0	0	XXX
0199999. Totals - open depositories	XXX	XXX	92,305	0	5,668,762	XXX
0299998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - suspended depositories	XXX	XXX	0	0	0	XXX
0299999. Totals - suspended depositories	XXX	XXX	0	0	0	XXX
0399999. Total cash on deposit	XXX	XXX	92,305	0	5,668,762	XXX
0499999. Cash in company's office	XXX	XXX	XXX	XXX	0	XXX
0599999 Total - cash	XXX	XXX	92,305	0	5,668,762	XXX

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

1. January.....	3,794,740	4. April.....	4,032,320	7. July.....	2,672,672	10. October.....	4,860,880
2. February....	3,746,843	5. May.....	4,136,024	8. August.....	3,665,368	11. November...	4,998,151
3. March.....	3,046,160	6. June.....	3,812,803	9. September.....	3,522,967	12. December.....	5,668,762

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

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

NONE

STATEMENT OF ACTUARIAL OPINION
for
INSURORS INDEMNITY SELECT INSURANCE COMPANY
as of
DECEMBER 31, 2025

IDENTIFICATION

I, Patrick L. Whatley, am associated with the firm of The Burkhalter Group, Inc. I am a member of the American Academy of Actuaries and a Fellow of the Casualty Actuarial Society. I was appointed by the Board of Directors of Insurors Indemnity Select Insurance Company (“the Company”) on December 10, 2025 to render this opinion regarding the Company's loss and loss adjustment expense reserves. I meet the definition of a Qualified Actuary per the NAIC Annual Statement Instructions – Property and Casualty, Actuarial Opinion.

SCOPE

I have examined the reserves listed in Exhibit A, as shown in the Annual Statement of the Company as prepared for filing with state regulatory officials, as of December 31, 2025. Both the accounting date and valuation date of the data used in my reserve evaluation are December 31, 2025. My review considered information provided to me through February 13, 2026. The reserves listed in Exhibit A, where applicable, include provisions for Disclosure items (disclosures 8 through 13.2) in Exhibit B. The reserves listed in Exhibit A are recorded under U.S. Statutory Accounting Principles (SAP).

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

OPINION

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

- A. Meet the requirements of the insurance laws of Texas.
- B. Are consistent with reserves computed in accordance with accepted actuarial standards and principles.
- C. Make a reasonable provision in the aggregate, both net of ceded reinsurance and direct and assumed, for all unpaid loss and loss adjustment expense obligations of the Company under the terms of its contracts and agreements.

RELEVANT COMMENTS

In April 2021, the conversion of Insurors Indemnity Lloyds to a stock company named Insurors Indemnity Select Insurance Company (Select) was completed. Select is designated a Domestic Surplus Lines Insurer. Since Insurors Indemnity Lloyds first started writing business in 2003, it had been 100% reinsured by an affiliated company, Insurors Indemnity Company. Effective 10/31/2020, the reinsurance agreement between the two companies was amended by adding Article XX – Assumption of Responsibilities of the Company by the Reinsurer. The amendment states in part: “The Reinsurer hereby assumes all liabilities, obligations and responsibilities of Company under the Agreement, including all duties toward the policyholders. Reinsurer will henceforth become the direct company for all obligations.” Thus, Insurors Indemnity Lloyds had \$0 unpaid claim liabilities, both direct and assumed and net after reinsurance at 12/31/2020.

After the conversion in 2021, Select has written residential property business in the Texas surplus lines market. In late 2023, Select began to write some commercial property and casualty business in the Texas surplus line market. Select is 100% reinsured by Insurors Indemnity Company, exactly like the prior Lloyds company. I have selected \$0 as the materiality standard shown in Exhibit B. In this case, the materiality standard is judged more on the quality of the Company’s reinsurers as opposed to traditional quantitative measures. My selection of the materiality standard was based on the fact that this opinion is prepared for the regulatory review of Insurors Indemnity Select Insurance Company. Other measures of materiality might be used for reserves being evaluated in a different context.

The assuming company, Insurors Indemnity Company, is well capitalized relative to the size of its own loss and loss adjustment expense reserves and is rated “A-” by A.M. Best Company. Further, Insurors Indemnity Company maintains both catastrophe reinsurance and excess of loss reinsurance with high-quality professional reinsurers at relatively low retentions compared to its statutory surplus. Because the Company has no responsibility for unpaid claims prior to accident year 2021, there are no open claims prior to the 2025 accident year, and it is 100% reinsured by Insurors Indemnity Company, I do not believe there are any major risk factors applicable to the Company.

I do not believe that there are significant risks and uncertainties that could result in a material adverse deviation from the carried net reserve amounts.

The Company records salvage or subrogation as it is received and case reserves are gross of anticipated salvage and subrogation. However, unpaid claim liabilities are estimated from triangles that are ultimately net of salvage and subrogation received. Bulk reserve estimates, therefore, implicitly recognize some level of future salvage and subrogation recoverable. These amounts, however, are not material for the lines of business written by the Company.

The Company does not discount its reserves listed in Exhibit A for the time value of money.

The Company does not participate in any underwriting pools or associations.

I have reviewed the Company’s exposure to asbestos and environmental claims. In my opinion, the chance of material liability is remote since the Company wrote no business prior to 2003.

Based on discussions with Company management and its description of the Company's ceded reinsurance, I am not aware of any reinsurance contract that either has been or should have been accounted for as retroactive reinsurance or financial reinsurance.

Based on discussions with Company management, I am not aware that collectibility of reinsurance is a material issue as regards the Company's loss and loss adjustment expense reserves.

The Company has no net loss reserves. Therefore, the Company's test values for the NAIC IRIS Tests for One-Year Reserve Development to Surplus, Two-Year Reserve Development to Surplus, and Estimated Current Reserve Deficiency to Surplus are all zero.

There have been no material changes in actuarial methods and assumptions since the prior Statement of Actuarial Opinion.

The Company writes no Long Duration Contracts, defined as contracts, excluding financial guaranty contracts, mortgage guaranty contracts and surety contracts that fulfill both of the following conditions: (1) the contract term is 13 months or greater and (2) the insurer can neither cancel the contract, nor increase the premium during the policy or contract term.

Actuarial estimates of property and casualty loss and loss adjustment expense reserves are inherently uncertain because they are dependent on future contingent events. Also, these reserve estimates are generally derived from analyses of historical data, and future events or conditions may differ from the past. The actual amount necessary to settle the unpaid claims may therefore be significantly different from the reserve amounts listed in Exhibit A.

I have not examined the Company's assets, and I have formed no opinion as to their validity or value. My opinion that reserves make reasonable provision for unmatured obligations rests upon the assumption that all reserves are backed by valid assets which have suitably scheduled maturities and/or adequate liquidity to meet cash flow requirements.

An actuarial report — including pertinent exhibits which document the historical data base and the calculations underlying the findings expressed in this statement of actuarial opinion — will be provided to the company to be retained at its administrative offices for a period of seven years and available for regulatory examination.

This statement is intended solely for the use of the Company, its Board of Directors, and the state insurance department with which it files its annual statement. It is not intended for any other purpose.



Patrick L. Whatley, FCAS, MAAA

The Burkhalter Group, Inc.
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Richardson, Texas 75080
Tel: (972) 644-8172
E-mail: pwhatley1950@gmail.com

February 23, 2026

Exhibit A: SCOPE

<u>Loss and Loss Adjustment Expense Reserves:</u>	<u>Amount</u>
1. Unpaid Losses (Liabilities, Surplus and Other Funds page, Col 1, Line 1)	\$0
2. Unpaid Loss Adjustment Expenses (Liabilities, Surplus and Other Funds page, Col 1, Line 3)	\$0
3. Unpaid Losses - Direct and Assumed (Should equal Schedule P, Part 1, Summary, Totals from Cols. 13 and 15, Line 12 * 1000)	\$1,871,000
4. Unpaid Loss Adjustment Expenses - Direct and Assumed (Should equal Schedule P, Part 1, Summary, Totals from Cols. 17, 19, and 21, Line 12 * 1000)	\$171,000
5. The Page 3 write-in item reserve, "Retroactive Reinsurance Reserve Assumed"	\$0
6. Other Loss Reserve items on which the Appointed Actuary is expressing an Opinion (list separately, adding additional lines as needed)	\$0
<u>Premium Reserves:</u>	
7. Reserve for Direct and Assumed Unearned Premiums for P&C Long Duration Contracts	\$0
8. Reserve for Net Unearned Premiums for P&C Long Duration Contracts	\$0
9. Other Premium Reserve items on which the Appointed Actuary is expressing an Opinion (list separately, adding additional lines as needed)	\$0

Exhibit B: DISCLOSURES

1. Name of Appointed Actuary		Whatley	Patrick	L
2. The Appointed Actuary's Relationship to the Company. Enter E or C based upon the following: E if an Employee of the Company or Group C if a Consultant				C
3. The Appointed Actuary's Accepted Actuarial Designation (indicated by the letter code): F if a Fellow of the Casualty Actuarial Society (FCAS) A if an Associate of the Casualty Actuarial Society (ACAS) S if a Fellow of the Society of Actuaries (FSA) through the General Insurance track M if the actuary does not have an Accepted Actuarial Designation but is approved by the Academy's Casualty Practice Council. O for Other				F
4. Type of Opinion, as identified in the OPINION paragraph. Enter R, I, E, Q, or N based upon the following: R if Reasonable I if Inadequate or Deficient Provision E if Excessive or Redundant Provision Q if Qualified. Use Q when part of the OPINION is Qualified. N if No Opinion				R
5. Materiality Standard expressed in US dollars (Used to Answer Question #6)	\$0			
6. Are there significant risks that could result in Material Adverse Deviation?		Yes []	No [X]	N/A []
7. Statutory Surplus (Liabilities, Surplus and Other Funds page, Col 1, Line 37)	\$26,191,436			
8. Anticipated net salvage and subrogation included as a reduction to loss reserves as reported in Schedule P (should equal Part 1 Summary, Col 23, Line 12 * 1000)	\$0			
9. Discount included as a reduction to loss reserves and loss expense reserves as reported in Schedule P				
9.1 Nontabular Discount [Notes, Line 32B23, (Amounts 1,2,3,&4)], Electronic Filing Cols 1,2,3,&4,	\$0			
9.2 Tabular Discount [Notes, Line 32A23 (Amounts 1 & 2)] Electronic Filing Cols 1 & 2.	\$0			
10. The net reserves for losses and expenses for the company's share of voluntary and involuntary underwriting pools' and associations' unpaid losses and expenses that are included in reserves shown on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expense lines.	\$0			

11. The net reserves for losses and loss adjustment expenses that the company carries for the following liabilities included on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expense lines. *	
11.1 Asbestos, as disclosed in the Notes to Financial Statements (Notes, Line 33A03D, ending net asbestos reserves for current year) Electronic Filing Col 5	\$0
11.2 Environmental, as disclosed in the Notes to Financial Statements (Notes, Line 33D03D, ending net environmental reserves for current year) Electronic Filing Col 5	\$0
12. The total claims made extended loss and expense reserve (Greater than or equal to Schedule P Interrogatories).	
12.1 Amount reported as loss and loss adjustment expense reserves	\$0
12.2 Amount reported as unearned premium reserves	\$0
13. The net reserves for the A&H Long Duration Contracts that the Company carries on the following lines on the Liabilities, Surplus and Other Funds page:	
13.1 Losses	\$0
13.2 Loss Adjustment Expenses	\$0
13.3 Unearned Premium	\$0
13.4 Write-In (list separately, adding additional lines as needed, and identify (e.g., "Premium Deficiency Reserves", "Contract Reserves other than Premium Deficiency Reserves" or "AG51 Reserves"))	\$0
14. Other items on which the Appointed Actuary is providing Relevant Comment (list separately, adding additional lines as needed)	\$0

* The reserves disclosed in item 11 above should exclude amounts relating to contracts specifically written to cover asbestos and environmental exposures. Contracts specifically written to cover these exposures include Environmental Impairment Liability (post 1986), Asbestos Abatement, Pollution Legal Liability, Contractor's Pollution Liability, Consultant's Environmental Liability, and Pollution and Remediation Legal Liability.

Exhibit B: DISCLOSURES

1
Amount

- 1. Name of the Appointed Actuary Patrick L Whatley
 - 2. The Appointed Actuary's relationship to the Company. Enter E or C based upon the following: C
E if an Employee of the Company or Group
C if a Consultant
 - 3. The Appointed Actuary's Accepted Actuarial Designation (indicated by the letter code):..... F
F if a Fellow of the Casualty Actuarial Society (FCAS)
A if an Associate of the Casualty Actuarial Society (ACAS)
S if a Fellow of the Society of Actuaries (FSA) through the General Insurance track
M if the actuary does not have an Accepted Actuarial Designation, but is approved by the Academy's Casualty Practice Council.
O for Other
 - 4. Type of Opinion, as identified in the OPINION paragraph. Enter R, I, E, Q, or N based upon the following: R
R if Reasonable
I if Inadequate or Deficient Provision
E if Excessive or Redundant Provision
Q if Qualified. Use Q when part of the OPINION is Qualified.
N if No Opinion
 - 5. Materiality Standard expressed in US dollars (Used to Answer Question #6) 0
 - 6. Are there Significant Risks that could result in Material Adverse Deviation? Yes [] No [X] N/A []
 - 7. Statutory Surplus (Liabilities, Surplus and Other Funds page, Col 1, Line 37) 26,191,436
 - 8. Anticipated net salvage and subrogation included as a reduction to loss reserves as reported in Schedule P (should equal Part 1 Summary, Col 23, Line 12 * 1000) 0
 - 9. Discount included as a reduction to loss reserves and loss adjustment expense reserves as reported in Schedule P
 - 9.1 Nontabular Discount [Notes, Line 32B23, (Amounts 1, 2, 3 & 4)], Electronic Filing Cols 1, 2, 3, & 4 0
 - 9.2 Tabular Discount [Notes, Line 32A23, (Amounts 1 & 2)], Electronic Filing Col 1 & 2 0
 - 10. The net reserves for losses and loss adjustment expenses for the Company's share of voluntary and involuntary underwriting pools' and associations' unpaid losses and loss adjustment expenses that are included in reserves shown on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expenses lines. 0
 - 11. The net reserves for losses and loss adjustment expenses that the Company carries for the following liabilities included on the Liabilities, Surplus and Other Funds page, Losses and Loss Adjustment Expenses lines. *
 - 11.1 Asbestos, as disclosed in the Notes to Financial Statements (Notes, Line 33A03D, ending net asbestos reserves for current year) Electronic Filing Col 5 0
 - 11.2 Environmental, as disclosed in the Notes to Financial Statements (Notes, Line 33D03D, ending net environmental reserves for current year), Electronic Filing Col 5 0
 - 12. The total claims made extended loss and loss adjustment expense, and unearned premium reserves (Greater than or equal to Schedule P Interrogatories).
 - 12.1 Amount reported as loss and loss adjustment expense reserves 0
 - 12.2 Amount reported as unearned premium reserves 0
 - 13. The net reserves for the A&H Long Duration Contracts that the Company carries on the following lines on the Liabilities, Surplus and Other Funds page:
 - 13.1 Losses 0
 - 13.2 Loss Adjustment Expenses 0
 - 13.3 Unearned Premium 0
 - 13.4 Write-In (list separately, adding additional lines as needed, and identify (e.g., "Premium Deficiency Reserves", "Contract Reserves other than Premium Deficiency Reserves" or "AG 51 Reserves"))
-
-
- 14. Other items on which the Appointed Actuary is providing relevant comment (list separately, adding additional lines as needed)
-
-

* The reserves disclosed in item 11 above, should exclude amounts relating to contracts specifically written to cover asbestos and environmental exposures. Contracts specifically written to cover these exposures include Environmental Impairment Liability (post 1986), Asbestos Abatement, Pollution Legal Liability, Contractor's Pollution Liability, Consultant's Environmental Liability, and Pollution and Remediation Legal Liability.



SUPPLEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company

EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES

(To Be Filed by March 1)

NAIC Group Code 3279

NAIC Company Code 11496

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations				
2. Errors & omissions (E&O)				
3. Directors & officers (D&O)				
4. Environmental liability				
5. Excess workers' compensation				
6. Commercial excess & umbrella				
7. Personal umbrella				
8. Employment liability				
9. Aggregate write-ins for facilities & premises (CGL)	1,387	14,624	0	0
10. Internet & cyber liability				
11. Aggregate write-ins for other	0	0	0	0
12. Total ASL 17 - other liability (sum of lines 1 through 11)	1,387	14,624	0	0
DETAILS OF WRITE-INS				
0901. Premises	1,387	14,624		
0902.				
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	1,387	14,624	0	0
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0



SUPPLEMENT FOR THE YEAR 2025 OF THE Insurors Indemnity Select Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Texas

NAIC Group Code 3279

NAIC Company Code 11496

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	YES
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO