

**QUARTERLY STATEMENT**

**OF THE**

**Insurors Indemnity Select Insurance Company**

**TO THE**

**Insurance Department**

**OF THE**

**STATE OF**

Texas

FOR THE QUARTER ENDED  
SEPTEMBER 30, 2025

PROPERTY AND CASUALTY

**2025**



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2025  
OF THE CONDITION AND AFFAIRS OF THE

## Insurors Indemnity Select Insurance Company

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

Organized under the Laws of Texas, State of Domicile or Port of Entry TX

Country of Domicile United States of America

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

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

Main Administrative Office 225 South Fifth Street  
(Street and Number)  
Waco, TX, US 76701 (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  
(Street and Number)  
Waco, TX, US 76701 (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

State of Texas SS:  
County of McLennan

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

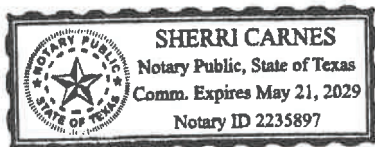
Dave E. Talbert  
President & CEO

Tammy Tieperman  
Secretary

Thomas G. Chase, Jr.  
Treasurer

Subscribed and sworn to before me this 11th day of November 2025  
Sherr 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.....



STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	5,984,549		5,984,549	5,805,263
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	10,746,617		10,746,617	10,106,795
3. Mortgage loans on real estate:				
3.1 First liens .....			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ encumbrances) .....			0	0
5. Cash (\$ ..... 3,522,967 ), cash equivalents (\$ ..... 64,078 ) and short-term investments (\$ ..... ) .....	3,587,045		3,587,045	2,961,156
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....			0	0
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	20,318,211	0	20,318,211	18,873,214
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	35,449		35,449	51,266
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	3,976,231		3,976,231	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 .....	280,203		280,203	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 .....			0	0
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	329,167	0	329,167	366,667
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	24,939,261	0	24,939,261	21,067,875
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	24,939,261	0	24,939,261	21,067,875
<b>DETAILS OF WRITE-INS</b>				
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 .....	329,167		329,167	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)	329,167	0	329,167	366,667

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ ..... ) .....		0
2. Reinsurance payable on paid losses and loss adjustment expenses .....		0
3. Loss adjustment expenses .....		0
4. Commissions payable, contingent commissions and other similar charges .....	340,134	232,433
5. Other expenses (excluding taxes, licenses and fees) .....	37,807	14,374
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	20,203	7,705
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses)) .....	521,926	237,799
7.2 Net deferred tax liability .....		
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ ..... and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ .....0 for medical loss ratio rebate per the Public Health Service Act) .....		
10. Advance premium .....	497,363	48,891
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	1,569,354	830,621
13. Funds held by company under reinsurance treaties .....		0
14. Amounts withheld or retained by company for account of others .....		
15. Remittances and items not allocated .....		
16. Provision for reinsurance (including \$ ..... certified) .....		0
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....	160,889	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) .....	3,147,676	1,459,869
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	3,147,676	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 .....		
34. Gross paid in and contributed surplus .....	14,122,422	14,122,422
35. Unassigned funds (surplus) .....	5,169,163	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) .....	21,791,585	19,608,006
38. Totals (Page 2, Line 28, Col. 3)	24,939,261	21,067,875
<b>DETAILS OF WRITE-INS</b>		
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 .....		0
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....	0	0
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

**STATEMENT OF INCOME**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>UNDERWRITING INCOME</b>			
1. Premiums earned:			
1.1 Direct (written \$ 19,787,902 )	10,583,668	3,913,112	5,998,515
1.2 Assumed (written \$ )			0
1.3 Ceded (written \$ )	10,583,668	3,913,112	5,998,515
1.4 Net (written \$ 19,787,902 )	0	0	0
<b>DEDUCTIONS:</b>			
2. Losses incurred (current accident year \$ ):			
2.1 Direct	3,568,760	1,322,176	1,501,243
2.2 Assumed			0
2.3 Ceded	3,568,760	1,322,176	1,501,243
2.4 Net	0	0	0
3. Loss adjustment expenses incurred			0
4. Other underwriting expenses incurred	(1,641,924)	(958,983)	(680,497)
5. Aggregate write-ins for underwriting deductions	0	0	0
6. Total underwriting deductions (Lines 2 through 5)	(1,641,924)	(958,983)	(680,497)
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	1,641,924	958,983	680,497
<b>INVESTMENT INCOME</b>			
9. Net investment income earned	297,142	247,756	334,420
10. Net realized capital gains (losses) less capital gains tax of \$		8,397	8,397
11. Net investment gain (loss) (Lines 9 + 10)	297,142	256,153	342,817
<b>OTHER INCOME</b>			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ )	0	0	0
13. Finance and service charges not included in premiums	15,058	8,544	92,913
14. Aggregate write-ins for miscellaneous income	0	0	0
15. Total other income (Lines 12 through 14)	15,058	8,544	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)	1,954,124	1,223,680	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)	1,954,124	1,223,680	1,116,227
19. Federal and foreign income taxes incurred	410,366	256,973	194,969
20. Net income (Line 18 minus Line 19)(to Line 22)	1,543,758	966,707	921,258
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year	19,608,006	17,842,374	17,842,374
22. Net income (from Line 20)	1,543,758	966,707	921,258
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$	639,821	286,956	844,374
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax			
27. Change in nonadmitted assets			
28. Change in provision for reinsurance			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	0	0	0
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			0
36. Change in treasury stock			0
37. Aggregate write-ins for gains and losses in surplus	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37)	2,183,579	1,253,663	1,765,632
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	21,791,585	19,096,037	19,608,006
<b>DETAILS OF WRITE-INS</b>			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
3701. GOODWILL ON ROADRUNNER INDEMNITY COMPANY		0	0
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0	0
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	0	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	(1,121,301)	(508,943)	(389,986)
2. Net investment income .....	298,907	218,556	278,387
3. Miscellaneous income .....	15,058	8,544	92,913
4. Total (Lines 1 to 3) .....	(807,336)	(281,843)	(18,686)
5. Benefit and loss related payments .....	171,200	18,659	60,494
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	(1,785,556)	(917,414)	(788,301)
8. Dividends paid to policyholders .....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	126,239	0	47,500
10. Total (Lines 5 through 9) .....	(1,488,117)	(898,755)	(680,307)
11. Net cash from operations (Line 4 minus Line 10) .....	680,781	616,912	661,621
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	709,890	502,082	579,821
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0	0
12.7 Miscellaneous proceeds .....	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	709,890	502,082	579,821
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	875,124	3,723,525	3,970,207
13.2 Stocks .....	0	0	0
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	0
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	875,124	3,723,525	3,970,207
14. Net increase/(decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	(165,234)	(3,221,443)	(3,390,386)
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied) .....	110,343	4,893,205	4,969,905
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	110,343	4,893,205	4,969,905
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	625,890	2,288,674	2,241,140
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	2,961,156	720,016	720,016
19.2 End of period (Line 18 plus Line 19.1) .....	3,587,046	3,008,690	2,961,156

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

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## 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 financial 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
<b>NET INCOME</b>					
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 1,543,758	\$ 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	\$ 1,543,758	\$ 921,258
<b>SURPLUS</b>					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 21,791,585	\$ 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	\$ 21,791,585	\$ 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. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. 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.

Net investment income earned consists primarily of interest and dividends less investment related expenses. Interest is recognized on an accrual basis. Net realized capital gains (losses) are recognized on a specific identification basis when securities are sold, redeemed or otherwise disposed.

In addition, the company uses the following accounting policies:

(1) **Basis for Short-Term Investments**

Short-term investments are carried at amortized cost. As of the end of this quarter, the company has no short-term investments.

(2) **Basis for Bonds and Amortization Schedule**

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

(3) **Basis for Common Stocks**

Common stocks and mutual funds are reported at market value. 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**

## NOTES TO FINANCIAL STATEMENTS

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

**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 05, 2024 by cash payments.

**A. Statutory Purchase Method**

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

1	2	3	4	5
Purchased Entity	Acquisition Date	Cost of Acquired Entity	Original Amount of Goodwill	Original Amount of Admitted Goodwill
Roadrunner Indemnity Company	12/31/2023	\$ 9,262,422	\$ 500,000	\$ 500,000
<b>Total</b>	<b>XXX</b>	<b>\$ 9,262,422</b>	<b>\$ 500,000</b>	<b>\$ 500,000</b>

1	6	7	8	9
Purchased Entity	Admitted Goodwill as of the Reporting Date	Amount of Goodwill Amortized During the Reporting Period	Book Value of SCA	Admitted Goodwill as a % of SCA BACV, Gross of Admitted Goodwill Col. 6/Col. 8
Roadrunner Indemnity Company	\$ 329,167	\$ 25,000	\$ 10,746,617	3.1%
<b>Total</b>	<b>\$ 329,167</b>	<b>\$ 25,000</b>	<b>\$ 10,746,617</b>	<b>XXX</b>

**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**

The company has no reverse mortgages

**D. Asset-Backed Securities**

(1) The company does not have any asset-backed securities

## NOTES TO FINANCIAL STATEMENTS

- (2) The company does not hold any mortgage backed securities with a recognized other than temporary impairment
- (3) The company does not have any recognized OTTI securities.
- (4) NONE
- (5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary
- 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  
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
- 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)  
The company has no tax credit structures for investments
- L. Restricted Assets  
The Company has no 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
- (1) Unsettled Short Sale Transactions (Outstanding as of Reporting Date)  
NONE
- (2) Settled Short Sale Transactions  
NONE
- 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

**A. Due and Accrued Income Excluded from Surplus - Not Applicable**

**B. Total amount Excluded - Not Applicable**

**C. The gross, nonadmitted and admitted amounts for interest income due and accrued.**

Interest Income Due and Accrued	Amount
1. Gross	\$ 35,449
2. Nonadmitted	
3. Admitted	\$ 35,449

**D. The aggregate deferred interest.**

NONE

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

NONE

**NOTE 8 Derivative Instruments**

The company has no derivative instruments

**NOTE 9 Income Taxes**

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

## NOTES TO FINANCIAL STATEMENTS

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

The company does not have any net deferred tax asset at the end of the current period

**B. Regarding Deferred Tax Liabilities That Are Not Recognized**

The company does not have any unrecognized deferred tax liabilities

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

	Current Period	12/31/2024	Change
<b>1. Current Income Tax</b>			
(a) Federal	\$ 410,366	\$ 194,969	\$ 215,397
(b) Foreign			\$ -
(c) Subtotal (1a+1b)	\$ 410,366	\$ 194,969	\$ 215,397
(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)	\$ 410,366	\$ 194,969	\$ 215,397
<b>2. Deferred Tax Assets:</b>			
(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)	\$ -	\$ -	\$ -
<b>3. Deferred Tax Liabilities:</b>			
(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)	\$ -	\$ -	\$ -
<b>4. Net deferred tax assets/liabilities (2i - 3c)</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

**D. Among the More Significant Book to Tax Adjustments**

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 the end of the quarter.

**F. 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)**

## NOTES TO FINANCIAL STATEMENTS

not applicable

- I. **Alternative Minimum Tax (AMT) Credit**  
not applicable

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

- A. Pursuant to the department's examination report, adopted June 21, 2024, and the company's plan to come into compliance with Section 822.204 (a), Roadrunner Indemnity Company (RIC) began non-renewing its policies May 1, 2025. Simultaneously, similar coverage is being offered to RIC's policyholders in its parent, Insurors Indemnity Select Insurance Company (Select).

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

Insurors Financial Corp. owns 100% of Insurors Indemnity General Agency, Inc. which owns 100% of ValueSure Agency, Inc. These entities are affiliates of the companies.

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

All other transactions between the affiliates in excess of the limits of Chapter 823.102 have been submitted to the TDI for review and approval or no action.

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

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

- E. Material Contracts with Affiliates

The company has a Managing General Agency Agreement with its affiliate, Insurors Indemnity General Agency, Inc., dba Insurors Indemnity Underwriters (IIU). Under the agreement, IIU has the authority to carry out the day-to-day operations of Insurors Indemnity and its affiliates through IIU's employees.

Insurors Indemnity Company has an affiliated reinsurance agreement with Insurors Indemnity Select (IIS) and Roadrunner Indemnity Company, covering 100% of the business written by each.

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

- 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. 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

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, 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.

- F. Multiemployer Plans

the company does not participate in a multiemployer plan

- 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.

## NOTES TO FINANCIAL STATEMENTS

- 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
- J. The portion of unassigned funds (surplus represented or reduced by cumulative unrealized gains and losses is \$639,821
- K. The Company issued the following surplus debentures or similar obligations: Not Applicable
- 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:  
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

### 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
iMGA, LLC	27-0771349	No	Surplus Lines	P	\$ 6,666,285
Germania General Agency, Inc.		No	Surplus Lines	P	\$ 1,134,476
Heritage General Agency		No	Surplus Lines	P	\$ 131,816
Atlas General Agency		No	Surplus Lines	P	\$ 5,356,598
Insurors Indemnity General Agency, Denali Specialty Group, LLC		No	Surplus Lines	P	\$ 6,501,454
				P	\$ (2,727)
<b>Total</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>\$ 19,787,902</b>

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

### NOTE 20 Fair Value Measurements

#### A. Fair Value Measurement

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
<b>a. Assets at fair value</b>					
BONDS	\$ 3,320,205	\$ 2,756,779			\$ 6,076,984
CASH EQUIVALENTS	\$ 64,078				\$ 64,078
<b>Total assets at fair value/NAV</b>	<b>\$ 3,384,283</b>	<b>\$ 2,756,779</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 6,141,062</b>

#### (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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Practicable (Carrying Value)
BONDS	\$ 6,076,984	\$ 5,984,549	\$ 3,320,205	\$ 2,756,779			
EQUIVALENTS	\$ 64,078	\$ 64,078	\$ 64,078				

## NOTES TO FINANCIAL STATEMENTS

**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**

The company had no subprime mortgage related risk exposure

**G. Insurance-Linked Securities (ILS) Contracts**

The company had no insurance linked securities ILS contracts

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

**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**

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

**B. Reinsurance Recoverable in Dispute**

The company does not have any reinsurance recoverable in dispute

**C. Reinsurance Assumed and Ceded**

(1)

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates					\$ -	\$ -
b. All Other					\$ -	\$ -
c. Total (a+b)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Reserve						\$12,822,780

(2)

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

(3)

**D. Uncollectible Reinsurance**

The company does not have any uncollectible reinsurance for the reporting period

**E. Commutation of Reinsurance Reflected in Income and Expenses.**

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

**F. Retroactive Reinsurance**

The company has no retroactive reinsurance agreements

**G. Reinsurance Accounted for as a Deposit**

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

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

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

**I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation**

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

**J. Reinsurance Agreements Qualifying for Reinsurer Aggregation**

The company has no reinsurance agreements qualifying for reinsurer aggregation

**K. Reinsurance Credit**

identified as A-791

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

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

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

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

**NOTE 26 Intercompany Pooling Arrangements**

The company had no pooling arrangements

**NOTE 27 Structured Settlements**

The company has no structured settlements

**NOTE 28 Health Care Receivables**

The company does not write Health insurance

**NOTE 29 Participating Policies**

The company does not issue participating policies

**NOTE 30 Premium Deficiency Reserves**

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

## NOTES TO FINANCIAL STATEMENTS

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**NOTE 31 High Deductibles**

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

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

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

**NOTE 33 Asbestos/Environmental Reserves**

The company is not exposed to asbestos / environmental claims

**NOTE 34 Subscriber Savings Accounts**

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

**NOTE 35 Multiple Peril Crop Insurance**

The company does not write Crop Insurance

**NOTE 36 Financial Guaranty Insurance**

The company does not sell Financial Guaranty Insurance

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES

### GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [ X ]
- 1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [ X ]
- 2.2 If yes, date of change: .....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [ X ] No [ ]  
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [ ] No [ X ]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.  
.....
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? ..... Yes [ ] No [ X ]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [ X ]
- 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [ X ] N/A [ ]  
If yes, attach an explanation.  
.....
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2022
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2022
- 6.3 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
- 6.4 By what department or departments?  
TEXAS DEPARTMENT OF INSURANCE .....
- 6.5 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 [ ]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ X ] No [ ] N/A [ ]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ X ]
- 7.2 If yes, give full information:  
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.  
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [ X ]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

## GENERAL INTERROGATORIES

- 9.1 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 [  ] 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.
- 9.11 If the response to 9.1 is No, please explain:  
.....
- 9.2 Has the code of ethics for senior managers been amended? ..... Yes [  ] No [  ]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).  
.....
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [  ] No [  ]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).  
.....

### FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [  ] No [  ]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ .....

### INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [  ] No [  ]
- 11.2 If yes, give full and complete information relating thereto:  
.....
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ .....
13. Amount of real estate and mortgages held in short-term investments: ..... \$ .....
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [  ] No [  ]
- 14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ ..... 0	\$ .....
14.22 Preferred Stock .....	\$ ..... 0	\$ .....
14.23 Common Stock .....	\$ ..... 10,106,795	\$ ..... 10,746,617
14.24 Short-Term Investments .....	\$ ..... 0	\$ .....
14.25 Mortgage Loans on Real Estate .....	\$ ..... 0	\$ .....
14.26 All Other .....	\$ ..... 0	\$ .....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) .....	\$ ..... 10,106,795	\$ ..... 10,746,617
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	\$ .....	\$ .....

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [  ] No [  ]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [  ] No [  ] N/A [  ]  
If no, attach a description with this statement.  
.....
16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. .... \$ ..... 0
- 16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$ ..... 0
- 16.3 Total payable for securities lending reported on the liability page. .... \$ ..... 0

## GENERAL INTERROGATORIES

17. 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 [  ] No [  ]
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
US BANK .....	BIRHINGHAM, AL .....

- 17.2 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)

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes [  ] No [  ]

- 17.4 If yes, give full information relating thereto:

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

- 17.5 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

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [  ] No [  ]

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [  ] No [  ]

- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed

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

- 18.2 If no, list exceptions:

.....

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for 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 [  ]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

- Has the reporting entity self-designated PLGI securities? ..... Yes [  ] No [  ]

21. 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 [  ]

# GENERAL INTERROGATORIES

## PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? ..... Yes [ ] No [ ] N/A [ X ]  
 If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? ..... Yes [ ] No [ X ]  
 If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? ..... Yes [ ] No [ X ]

3.2 If yes, give full and complete information thereto.

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? ..... Yes [ ] No [ X ]

4.2 If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
TOTAL			0	0	0	0	0	0	0	0

5. Operating Percentages:

5.1 A&H loss percent ..... %

5.2 A&H cost containment percent ..... %

5.3 A&H expense percent excluding cost containment expenses ..... %

6.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

6.2 If yes, please provide the amount of custodial funds held as of the reporting date ..... \$.....

6.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

6.4 If yes, please provide the balance of the funds administered as of the reporting date ..... \$.....

7. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [ X ] No [ ]

7.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ ]

### SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
<b>NONE</b>						

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

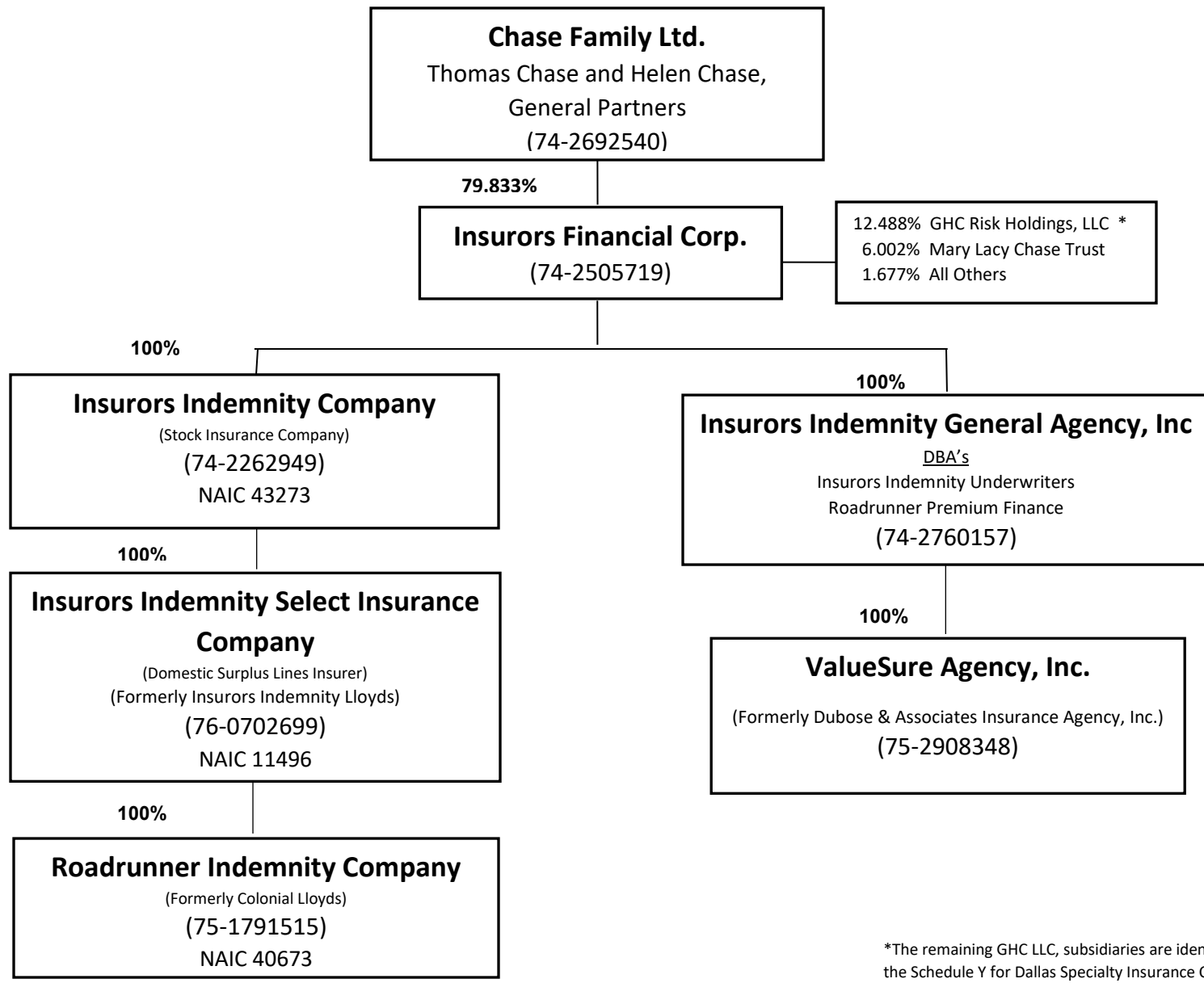
**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama	AL	N					
2. Alaska	AK	N					
3. Arizona	AZ	E	11,656	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	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)	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	47,730	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	19,731,243	5,304,331	2,592,055	1,050,172	1,260,378
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
59. Totals	XXX		19,787,902	5,304,331	2,592,055	1,050,172	1,260,378
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
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX		0	0	0	0	0

(a) Active Status Counts:

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



\*The remaining GHC LLC, subsidiaries are identified on the Schedule Y for Dallas Specialty Insurance Company / MD Group 5095

STATEMENT AS OF SEPTEMBER 30, 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	Domi-ciliary Location	Relation-ship 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 Re-quired? (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	UIP	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	NO	0
.0000		00000	99-3860598	0	0		GHC Risk Holdings LLC	DE	UIP	Griffin Highline Capital LLC	Ownership	100.000	Michael Doak and Kent McGaughy	NO	0
.0000		00000	85-1655697	0	0		Griffin Highline Capital LLC	DE	UIP	Griffin Highline Holdings LLC	Ownership	100.000	Michael Doak	NO	0
.0000		00000	85-1655697	0	0		Griffin Highline Capital LLC	DE	UIP	Michael Doak	Ownership	100.000	Michael Doak	NO	0
.0000		00000	85-1655697	0	0		Griffin Highline Capital LLC	DE	UIP			0.000		NO	0
.0000		00000	85-1655697	0	0		Griffin Highline Capital LLC	DE	UIP	Canary Partners, LP	Ownership	100.000	CPMG Inc, / Kent McGaughy	NO	0
.0000		00000		0	0		Canary Partners	DE	UIP	CPMG Inc	Ownership	100.000	Kent McGaughy	NO	0
.0000		00000	77-0616887	0	0		CPMG Inc.	DE	UIP	Kent McGaughy	Ownership	100.000	Kent McGaughy	NO	0

Asterisk	Explanation

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**PART 1 - LOSS EXPERIENCE**

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire .....	1,576,179	196,820	12.5	4.6
2.1 Allied Lines .....	2,468,622	1,217,226	49.3	50.0
2.2 Multiple peril crop .....			0.0	0.0
2.3 Federal flood .....			0.0	0.0
2.4 Private crop .....			0.0	0.0
2.5 Private flood .....			0.0	0.0
3. Farmowners multiple peril .....			0.0	0.0
4. Homeowners multiple peril .....	3,808,780	1,419,278	37.3	39.8
5.1 Commercial multiple peril (non-liability portion) .....	2,212,347	658,675	29.8	24.7
5.2 Commercial multiple peril (liability portion) .....	406,280	73,799	18.2	15.7
6. Mortgage guaranty .....			0.0	0.0
8. Ocean marine .....			0.0	0.0
9.1 Inland marine .....	108,429	3,119	2.9	(1.5)
9.2 Pet insurance .....			0.0	0.0
10. Financial guaranty .....			0.0	0.0
11.1 Medical professional liability - occurrence .....			0.0	0.0
11.2 Medical professional liability - claims-made .....			0.0	0.0
12. Earthquake .....			0.0	0.0
13.1 Comprehensive (hospital and medical) individual .....			0.0	0.0
13.2 Comprehensive (hospital and medical) group .....			0.0	0.0
14. Credit accident and health .....			0.0	0.0
15.1 Vision only .....			0.0	0.0
15.2 Dental only .....			0.0	0.0
15.3 Disability income .....			0.0	0.0
15.4 Medicare supplement .....			0.0	0.0
15.5 Medicaid Title XIX .....			0.0	0.0
15.6 Medicare Title XVIII .....			0.0	0.0
15.7 Long-term care .....			0.0	0.0
15.8 Federal employees health benefits plan .....			0.0	0.0
15.9 Other health .....			0.0	0.0
16. Workers' compensation .....			0.0	0.0
17.1 Other liability - occurrence .....	2,723	114	4.2	13.3
17.2 Other liability - claims-made .....			0.0	0.0
17.3 Excess workers' compensation .....			0.0	0.0
18.1 Products liability - occurrence .....	308	(271)	(88.0)	31.2
18.2 Products liability - claims-made .....			0.0	0.0
19.1 Private passenger auto no-fault (personal injury protection) .....			0.0	0.0
19.2 Other private passenger auto liability .....			0.0	0.0
19.3 Commercial auto no-fault (personal injury protection) .....			0.0	0.0
19.4 Other commercial auto liability .....			0.0	0.0
21.1 Private passenger auto physical damage .....			0.0	0.0
21.2 Commercial auto physical damage .....			0.0	0.0
22. Aircraft (all perils) .....			0.0	0.0
23. Fidelity .....			0.0	0.0
24. Surety .....			0.0	0.0
26. Burglary and theft .....			0.0	0.0
27. Boiler and machinery .....			0.0	0.0
28. Credit .....			0.0	0.0
29. International .....			0.0	0.0
30. Warranty .....			0.0	0.0
31. Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business .....	0	0	0.0	0.0
35. Totals	10,583,668	3,568,760	33.7	33.8
<b>DETAILS OF WRITE-INS</b>				
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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**PART 2 - DIRECT PREMIUMS WRITTEN**

Line of Business		1	2	3
		Current Quarter	Current Year to Date	Prior Year Year to Date
1.	Fire .....	867,691	2,526,443	873,410
2.1	Allied Lines .....	1,700,428	4,590,430	1,228,566
2.2	Multiple peril crop .....	0		
2.3	Federal flood .....	0		
2.4	Private crop .....	0		
2.5	Private flood .....	0		
3.	Farmowners multiple peril .....	0		
4.	Homeowners multiple peril .....	3,556,262	7,522,011	2,402,543
5.1	Commercial multiple peril (non-liability portion) .....	1,787,283	4,263,493	589,403
5.2	Commercial multiple peril (liability portion) .....	291,170	731,021	158,816
6.	Mortgage guaranty .....	0		
8.	Ocean marine .....	0		
9.1	Inland marine .....	51,374	144,115	51,593
9.2	Pet insurance .....	0		
10.	Financial guaranty .....	0		
11.1	Medical professional liability - occurrence .....	0		
11.2	Medical professional liability - claims-made .....	0		
12.	Earthquake .....	0		
13.1	Comprehensive (hospital and medical) individual .....	0		
13.2	Comprehensive (hospital and medical) group .....	0		
14.	Credit accident and health .....	0		
15.1	Vision only .....	0		
15.2	Dental only .....	0		
15.3	Disability income .....	0		
15.4	Medicare supplement .....	0		
15.5	Medicaid Title XIX .....	0		
15.6	Medicare Title XVIII .....	0		
15.7	Long-term care .....	0		
15.8	Federal employees health benefits plan .....	0		
15.9	Other health .....	0		
16.	Workers' compensation .....	0		
17.1	Other liability - occurrence .....	6,019	10,088	
17.2	Other liability - claims-made .....	0		
17.3	Excess workers' compensation .....	0		
18.1	Products liability - occurrence .....	578	301	
18.2	Products liability - claims-made .....	0		
19.1	Private passenger auto no-fault (personal injury protection) .....	0		
19.2	Other private passenger auto liability .....	0		
19.3	Commercial auto no-fault (personal injury protection) .....	0		
19.4	Other commercial auto liability .....	0		
21.1	Private passenger auto physical damage .....	0		
21.2	Commercial auto physical damage .....	0		
22.	Aircraft (all perils) .....	0		
23.	Fidelity .....	0		
24.	Surety .....	0		
26.	Burglary and theft .....	0		
27.	Boiler and machinery .....	0		
28.	Credit .....	0		
29.	International .....	0		
30.	Warranty .....	0		
31.	Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business .....	0	0	0
35.	Totals	8,260,805	19,787,902	5,304,331
<b>DETAILS OF WRITE-INS</b>				
3401.	.....			
3402.	.....			
3403.	.....			
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**PART 3 (\$000 OMITTED)**

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2025 Loss and LAE Payments on Claims Reported as of Prior Year-End	2025 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2025 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2022 + Prior .....													
2. 2023 .....													
3. Subtotals 2023 + Prior .....													
4. 2024 .....													
5. Subtotals 2024 + Prior .....													
6. 2025 .....	XXX	XXX	XXX	XXX			XXX				XXX	XXX	XXX
7. Totals .....													
8. Prior Year-End Surplus As Regards Policyholders											Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1.	2.	3.
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4.

**NONE**

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

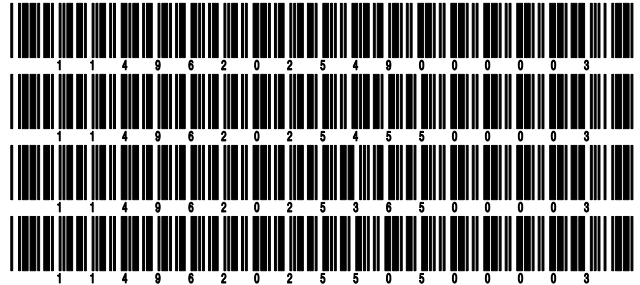
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? .....	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? .....	NO
3. Will the Medicare Part D Coverage Supplement be filed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

Explanations:

- 1.
- 2.
- 3.
- 4.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]
2. Supplement A to Schedule T [Document Identifier 455]
3. Medicare Part D Coverage Supplement [Document Identifier 365]
4. Director and Officer Supplement [Document Identifier 505]



**OVERFLOW PAGE FOR WRITE-INS**

**NONE**

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE A - VERIFICATION**

Real Estate

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

**NONE**

**SCHEDULE B - VERIFICATION**

Mortgage Loans

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

**NONE**

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

**NONE**

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	15,912,060	11,650,807
2. Cost of bonds and stocks acquired .....	875,124	3,970,207
3. Accrual of discount .....	14,454	18,520
4. Unrealized valuation increase/(decrease) .....	639,820	844,374
5. Total gain (loss) on disposals .....	0	8,397
6. Deduct consideration for bonds and stocks disposed of .....	709,890	579,821
7. Deduct amortization of premium .....	402	424
8. Total foreign exchange change in book/adjusted carrying value .....	0	0
9. Deduct current year's other than temporary impairment recognized .....	0	0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	16,731,166	15,912,060
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	16,731,166	15,912,060

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>ISSUER CREDIT OBLIGATIONS (ICO)</b>								
1. NAIC 1 (a) .....	3,825,423	347,732	195,000	3,734	3,593,865	3,825,423	3,981,889	3,590,743
2. NAIC 2 (a) .....	0	0	0	0	0	0	0	0
3. NAIC 3 (a) .....	0	0	0	0	0	0	0	0
4. NAIC 4 (a) .....	0	0	0	0	0	0	0	0
5. NAIC 5 (a) .....	0	0	0	0	0	0	0	0
6. NAIC 6 (a) .....	0	0	0	0	0	0	0	0
7. Total ICO	3,825,423	347,732	195,000	3,734	3,593,865	3,825,423	3,981,889	3,590,743
<b>ASSET-BACKED SECURITIES (ABS)</b>								
8. NAIC 1 .....	2,086,608	0	85,401	1,454	2,147,874	2,086,608	2,002,661	2,214,520
9. NAIC 2 .....	0	0	0	0	0	0	0	0
10. NAIC 3 .....	0	0	0	0	0	0	0	0
11. NAIC 4 .....	0	0	0	0	0	0	0	0
12. NAIC 5 .....	0	0	0	0	0	0	0	0
13. NAIC 6 .....	0	0	0	0	0	0	0	0
14. Total ABS	2,086,608	0	85,401	1,454	2,147,874	2,086,608	2,002,661	2,214,520
<b>PREFERRED STOCK</b>								
15. NAIC 1 .....	0	0	0	0	0	0	0	0
16. NAIC 2 .....	0	0	0	0	0	0	0	0
17. NAIC 3 .....	0	0	0	0	0	0	0	0
18. NAIC 4 .....	0	0	0	0	0	0	0	0
19. NAIC 5 .....	0	0	0	0	0	0	0	0
20. NAIC 6 .....	0	0	0	0	0	0	0	0
21. Total Preferred Stock	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	5,912,031	347,732	280,401	5,188	5,741,739	5,912,031	5,984,550	5,805,263

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

NAIC 1 \$ .....0 ; NAIC 2 \$ .....0 ; NAIC 3 \$ .....0 NAIC 4 \$ .....0 ; NAIC 5 \$ .....0 ; NAIC 6 \$ .....0

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Schedule DA - Part 1 - Short-Term Investments

**N O N E**

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**

**SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	24,243	222,469
2. Cost of cash equivalents acquired .....	1,074,657	1,466,031
3. Accrual of discount .....	0	0
4. Unrealized valuation increase/(decrease) .....	0	0
5. Total gain (loss) on disposals .....	0	0
6. Deduct consideration received on disposals .....	1,034,822	1,664,257
7. Deduct amortization of premium .....	0	0
8. Total foreign exchange change in book/adjusted carrying value .....	0	0
9. Deduct current year's other than temporary impairment recognized .....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	64,078	24,243
11. Deduct total nonadmitted amounts .....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	64,078	24,243

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

**N O N E**

Schedule A - Part 3 - Real Estate Disposed

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

**N O N E**

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

**N O N E**

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
91282C-NH-7	US TREASURY N/B	09/02/2025	BOFA SECURITIES INC		347,732	350,000	112	1.A
0019999999	Subtotal - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC)				347,732	350,000	112	XXX
0489999999	Total - Issuer Credit Obligations (Unaffiliated)				347,732	350,000	112	XXX
0499999999	Total - Issuer Credit Obligations (Affiliated)				0	0	0	XXX
0509999997	Total - Issuer Credit Obligations - Part 3				347,732	350,000	112	XXX
0509999998	Total - Issuer Credit Obligations - Part 5				XXX	XXX	XXX	XXX
0509999999	Total - Issuer Credit Obligations				347,732	350,000	112	XXX
1889999999	Total - Asset-Backed Securities (Unaffiliated)				0	0	0	XXX
1899999999	Total - Asset-Backed Securities (Affiliated)				0	0	0	XXX
1909999997	Total - Asset-Backed Securities - Part 3				0	0	0	XXX
1909999998	Total - Asset-Backed Securities - Part 5				XXX	XXX	XXX	XXX
1909999999	Total - Asset-Backed Securities				0	0	0	XXX
2009999999	Total - Issuer Credit Obligations and Asset-Backed Securities				347,732	350,000	112	XXX
4509999997	Total - Preferred Stocks - Part 3				0	XXX	0	XXX
4509999998	Total - Preferred Stocks - Part 5				XXX	XXX	XXX	XXX
4509999999	Total - Preferred Stocks				0	XXX	0	XXX
5989999997	Total - Common Stocks - Part 3				0	XXX	0	XXX
5989999998	Total - Common Stocks - Part 5				XXX	XXX	XXX	XXX
5989999999	Total - Common Stocks				0	XXX	0	XXX
5999999999	Total - Preferred and Common Stocks				0	XXX	0	XXX
6009999999	Totals				347,732	XXX	112	XXX

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE D - PART 4**

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

1	2	3	4	5	6	7	8	9	Change In Book/Adjusted Carrying Value					15	16	17	18	19	20	21	
									10	11	12	13	14								
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ 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 Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	
..254672-TE-8	DISCOVER BANK	08/05/2025	MATURITY at 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	1.A FE	
..38148J-ZR-5	GOLDMAN SACHS BANK USA	07/29/2025	MATURITY at 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	1.A FE	
0249999999. Subtotal - Issuer Credit Obligations - Certificates of Deposit (Unaffiliated)					195,000	195,000	195,000	195,000	0	0	0	0	0	195,000	0	0	0	5,900	XXX	XXX	
0489999999. Total - Issuer Credit Obligations (Unaffiliated)					195,000	195,000	195,000	195,000	0	0	0	0	0	195,000	0	0	0	5,900	XXX	XXX	
0499999999. Total - Issuer Credit Obligations (Affiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
0509999997. Total - Issuer Credit Obligations - Part 4					195,000	195,000	195,000	195,000	0	0	0	0	0	195,000	0	0	0	5,900	XXX	XXX	
0509999998. Total - Issuer Credit Obligations - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0509999999. Total - Issuer Credit Obligations					195,000	195,000	195,000	195,000	0	0	0	0	0	195,000	0	0	0	5,900	XXX	XXX	
..38374L-RZ-6	GOVERNMENT NATIONAL MORTGAGE A 05-56 JA	09/01/2025	MBS PAYDOWN		270	270	302	273	0	(2)	0	(2)	0	270	0	0	0	9	05/17/2035	1.A FE	
1019999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Guaranteed (Exempt from RBC)					270	270	302	273	0	(2)	0	(2)	0	270	0	0	0	0	9	XXX	XXX
..3132DS-LC-4	UMBS - POOL SD4823	09/01/2025	MBS PAYDOWN		36,730	36,730	35,651	36,694	0	35	0	35	0	36,730	0	0	0	1,191	12/01/2053	1.A FE	
..3140LX-CA-1	UMBS - POOL BT8164	09/01/2025	MBS PAYDOWN		3,111	3,111	2,963	3,107	0	4	0	4	0	3,111	0	0	0	78	06/01/2052	1.A FE	
..3140QP-2F-3	UMBS - POOL CB4373	09/01/2025	MBS PAYDOWN		11,490	11,490	11,315	11,479	0	11	0	11	0	11,490	0	0	0	309	08/01/2052	1.A FE	
1039999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)					51,331	51,331	49,929	51,280	0	50	0	50	0	51,331	0	0	0	1,578	XXX	XXX	
..98163V-AD-0	WORLD OMNI AUTO RECEIVABLES TR 22-D A3	09/15/2025	MBS PAYDOWN		33,800	33,800	33,794	33,769	0	30	0	30	0	33,800	0	0	0	1,254	02/15/2028	1.A FE	
1119999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)					33,800	33,800	33,794	33,769	0	30	0	30	0	33,800	0	0	0	1,254	XXX	XXX	
1889999999. Total - Asset-Backed Securities (Unaffiliated)					85,401	85,401	84,025	85,322	0	78	0	78	0	85,401	0	0	0	2,841	XXX	XXX	
1899999999. Total - Asset-Backed Securities (Affiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1909999997. Total - Asset-Backed Securities - Part 4					85,401	85,401	84,025	85,322	0	78	0	78	0	85,401	0	0	0	2,841	XXX	XXX	
1909999998. Total - Asset-Backed Securities - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1909999999. Total - Asset-Backed Securities					85,401	85,401	84,025	85,322	0	78	0	78	0	85,401	0	0	0	2,841	XXX	XXX	
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities					280,401	280,401	279,025	280,322	0	78	0	78	0	280,401	0	0	0	8,741	XXX	XXX	
4509999997. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999. Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals					280,401	XXX	279,025	280,322	0	78	0	78	0	280,401	0	0	0	8,741	XXX	XXX	

E05

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

**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 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

**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**

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

**SCHEDULE E - PART 1 - CASH**

Month End Depository Balances

1 Depository	2 Restricted Asset Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Central National Bank Operating ..... Waco, TX .....		3.040	3,723	0	121,964	262,479	290,707	XXX
Central National Bank Atlas Operating ..... Waco, TX .....		3.040	2,074	0	241,453	76,207	275,837	XXX
Central National Bank iMGA Premium ..... Waco, TX .....		0.500	7,114	0	641,973	1,094,540	1,459,032	XXX
Central National Bank iMGA Claims ..... Waco, TX .....		0.000	0	0	(479,975)	(324,288)	(320,328)	XXX
Central National Bank iMGA Refunds ..... Waco, TX .....		0.000	0	0	(46,457)	(40,148)	(39,778)	XXX
Central National Bank Money Market ..... Waco, TX .....		3.820	15,143	0	1,593,823	1,598,900	1,603,907	XXX
Central National Bank AGA Premium ..... Waco, TX .....		3.040	12,510	0	758,827	1,146,722	467,526	XXX
Central National Bank AGA Refund ..... Waco, TX .....		0.000	0	0	(56,605)	(70,302)	(78,999)	XXX
Central National Bank AGA Claims ..... Waco, TX .....		0.000	0	0	(102,331)	(78,742)	(134,937)	XXX
0199998. Deposits in ... 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	40,564	0	2,672,672	3,665,368	3,522,967	XXX
0299998. Deposits in ... 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	40,564	0	2,672,672	3,665,368	3,522,967	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
.....								
.....								
.....								
0599999. Total - Cash	XXX	XXX	40,564	0	2,672,672	3,665,368	3,522,967	XXX

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Insurors Indemnity Select Insurance Company

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

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Restricted Asset Code	4 Date Acquired	5 Stated Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0489999999. Total - Issuer Credit Obligations (Unaffiliated)						0	0	0
0499999999. Total - Issuer Credit Obligations (Affiliated)						0	0	0
0509999999. Total - Issuer Credit Obligations						0	0	0
31846V-54-2	FIRST AMER TREASURY OBLIG-Z		09/04/2025	0.000		64,078	0	0
8209999999. Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO						64,078	0	0
8589999999. Total Cash Equivalents (Unaffiliated)						64,078	0	0
8599999999. Total Cash Equivalents (Affiliated)						0	0	0
8609999999 - Total Cash Equivalents						64,078	0	0

E14