



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE

OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

NAIC Group Code 4762 4762 NAIC Company Code 29378 Employer's ID Number 75-0728676
(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 08/10/1946 Commenced Business 08/10/1946

Statutory Home Office 14675 DALLAS PARKWAY, SUITE 500 DALLAS, TX, US 75254
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 14675 DALLAS PARKWAY, SUITE 500
(Street and Number) DALLAS, TX, US 75254 214-561-1991
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. BOX 793747 DALLAS, TX, US 75379-3747
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 14675 DALLAS PARKWAY, SUITE 500
(Street and Number) DALLAS, TX, US 75254 214-561-1991
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address COUNTYMUTUAL.COM

Statutory Statement Contact MICHELLE STEPHENS 214-561-1965
(Name) (Area Code) (Telephone Number)
stat@oldam.com 214-561-1990
(E-mail Address) (FAX Number)

OFFICERS

PRESIDENT ANDREW JAMES KIRKPATRICK TREASURER MARK FRANCIS BANAR
SECRETARY MELISSA WADDELL SAYLORS

OTHER

DEBRA JANE ROBERTS, CHIEF EXECUTIVE OFFICER BRENT LAYNE MCGILL, EXECUTIVE VICE PRESIDENT & CHIEF UNDERWRITING OFFICER RONALD JAMES BALLARD, EXECUTIVE VICE PRESIDENT & CHIEF FINANCIAL OFFICER
MELANIE SHAE GARRISON, SENIOR VICE PRESIDENT & CHIEF ACCOUNTING OFFICER

DIRECTORS OR TRUSTEES

DEBRA JANE ROBERTS JAMES LANDO ZECH WILLIAM ROBERT ZECH
ANDREW JAMES KIRKPATRICK BRENT LAYNE MCGILL JOSE O MONTEMAYOR

State of Texas SS
County of Dallas

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.

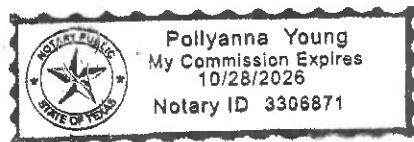
ANDREW JAMES KIRKPATRICK
PRESIDENT

MELISSA WADDELL SAYLORS
SECRETARY

MARK FRANCIS BANAR
TREASURER

Subscribed and sworn to before me this 18th day of February 2025
Pollyanna Young
POLLYANNA YOUNG
NOTARY PUBLIC
OCTOBER 28, 2026

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	101,406,523		101,406,523	101,505,820
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks				
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)				
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$ 33,956,829 , Schedule E - Part 1), cash equivalents (\$, Schedule E - Part 2) and short-term investments (\$ 1,498,984 , Schedule DA)	35,455,813		35,455,813	37,676,352
6. Contract loans (including \$ premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)				
9. Receivable for securities				
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	136,862,336		136,862,336	139,182,172
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	769,543		769,543	852,617
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	50,015,804		50,015,804	36,526,377
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	116,703,543		116,703,543	85,228,212
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	21,733,939		21,733,939	32,654,270
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit	352,439		352,439	426,029
20. Electronic data processing equipment and software				
21. Furniture and equipment, including health care delivery assets (\$)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates				
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other-than-invested assets	194,374		194,374	80,787
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	326,631,978		326,631,978	294,950,463
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	326,631,978		326,631,978	294,950,463
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)				
2501. OTHER ASSETS	194,374		194,374	80,787
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	194,374		194,374	80,787

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)		
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)		
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)	244,472	185,723
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	4,187,702	3,267,714
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))		
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$230,378,752 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)		
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	186,453,178	154,556,944
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	117,941,019	119,072,306
14. Amounts withheld or retained by company for account of others	11,057,475	11,619,369
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 3, Column 78)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	1,644,866	963,651
20. Derivatives		
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	103,267	284,756
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	321,631,978	289,950,463
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	321,631,978	289,950,463
29. Aggregate write-ins for special surplus funds		
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other-than-special surplus funds		
33. Surplus notes	4,700,000	4,700,000
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)	300,000	300,000
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	5,000,000	5,000,000
38. TOTALS (Page 2, Line 28, Col. 3)	326,631,978	294,950,463
DETAILS OF WRITE-INS		
2501. PAYABLE TO MGA'S	103,267	284,756
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	103,267	284,756
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)		

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....	44,066,597	34,259,142
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)		
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	43,678,847	33,871,392
5. Aggregate write-ins for underwriting deductions		
6. Total underwriting deductions (Lines 2 through 5)	43,678,847	33,871,392
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	387,750	387,750
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	(387,750)	(341,679)
10. Net realized capital gains (losses) less capital gains tax of \$ (Exhibit of Capital Gains (Losses))		(46,071)
11. Net investment gain (loss) (Lines 9 + 10)	(387,750)	(387,750)
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)		
13. Finance and service charges not included in premiums		
14. Aggregate write-ins for miscellaneous income		
15. Total other income (Lines 12 through 14)		
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)		
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)		
19. Federal and foreign income taxes incurred		
20. Net income (Line 18 minus Line 19)(to Line 22)		
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	5,000,000	5,000,000
22. Net income (from Line 20)		
23. Net transfers (to) from Protected Cell accounts		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$		
25. Change in net unrealized foreign exchange capital gain (loss)		
26. Change in net deferred income tax		
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
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		
33.2 Transferred to capital (Stock Dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37. Aggregate write-ins for gains and losses in surplus		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)		
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	5,000,000	5,000,000
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page		
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)		
1401.		
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page		
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)		
3701.		
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page		
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)		

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	30,998,072	59,190,404
2. Net investment income	(848,939)	(1,280,964)
3. Miscellaneous income		
4. Total (Lines 1 through 3)	30,149,133	57,909,440
5. Benefit and loss related payments	(10,920,331)	23,174,016
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	42,626,520	31,682,737
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		
10. Total (Lines 5 through 9)	31,706,189	54,856,753
11. Net cash from operations (Line 4 minus Line 10)	(1,557,056)	3,052,687
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	15,703,375	27,895,792
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	15,703,375	27,895,792
13. Cost of investments acquired (long-term only):		
13.1 Bonds	15,059,815	39,195,969
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	15,059,815	39,195,969
14. Net increase/(decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	643,559	(11,300,177)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	(1,307,042)	16,426,884
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(1,307,042)	16,426,884
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(2,220,539)	8,179,394
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	37,676,352	29,496,958
19.2 End of period (Line 18 plus Line 19.1)	35,455,813	37,676,352

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

20.0001. Bonds transferred in to increase collateral with reinsurer.		14,010,269
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UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire				
2.1 Allied lines				
2.2 Multiple peril crop				
2.3 Federal flood				
2.4 Private crop				
2.5 Private flood				
3. Farmowners multiple peril				
4. Homeowners multiple peril				
5.1 Commercial multiple peril (non-liability portion)				
5.2 Commercial multiple peril (liability portion)				
6. Mortgage guaranty				
8. Ocean marine				
9.1 Inland marine				
9.2 Pet insurance plans				
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake				
13.1 Comprehensive (hospital and medical) individual				
13.2 Comprehensive (hospital and medical) group				
14. Credit accident and health (group and individual)				
15.1 Vision only				
15.2 Dental only				
15.3 Disability income				
15.4 Medicare supplement				
15.5 Medicaid Title XIX				
15.6 Medicare Title XVIII				
15.7 Long-term care				
15.8 Federal employees health benefits plan				
15.9 Other health				
16. Workers' compensation				
17.1 Other liability - occurrence				
17.2 Other liability - claims-made				
17.3 Excess workers' compensation				
18.1 Products liability - occurrence				
18.2 Products liability - claims-made				
19.1 Private passenger auto no-fault (personal injury protection)				
19.2 Other private passenger auto liability.....	(378,423)			(378,423)
19.3 Commercial auto no-fault (personal injury protection)				
19.4 Other commercial auto liability.....				
21.1 Private passenger auto physical damage				
21.2 Commercial auto physical damage				
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft				
27. Boiler and machinery				
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - nonproportional assumed property				
32. Reinsurance - nonproportional assumed liability				
33. Reinsurance - nonproportional assumed financial lines				
34. Aggregate write-ins for other lines of business	44,445,020			44,445,020
35. TOTALS	44,066,597			44,066,597
DETAILS OF WRITE-INS				
3401. Policy Fees	44,445,020			44,445,020
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	44,445,020			44,445,020

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned But Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire					
2.1 Allied lines					
2.2 Multiple peril crop					
2.3 Federal flood					
2.4 Private crop					
2.5 Private flood					
3. Farmowners multiple peril					
4. Homeowners multiple peril					
5.1 Commercial multiple peril (non-liability portion)					
5.2 Commercial multiple peril (liability portion)					
6. Mortgage guaranty					
8. Ocean marine					
9.1 Inland marine					
9.2 Pet insurance plans					
10. Financial guaranty					
11.1 Medical professional liability - occurrence					
11.2 Medical professional liability - claims-made					
12. Earthquake					
13.1 Comprehensive (hospital and medical) individual					
13.2 Comprehensive (hospital and medical) group					
14. Credit accident and health (group and individual)					
15.1 Vision only					
15.2 Dental only					
15.3 Disability income					
15.4 Medicare supplement					
15.5 Medicaid Title XIX					
15.6 Medicare Title XVIII					
15.7 Long-term care					
15.8 Federal employees health benefits plan					
15.9 Other health					
16. Workers' compensation					
17.1 Other liability - occurrence					
17.2 Other liability - claims-made					
17.3 Excess workers' compensation					
18.1 Products liability - occurrence					
18.2 Products liability - claims-made					
19.1 Private passenger auto no-fault (personal injury protection)					
19.2 Other private passenger auto liability					
19.3 Commercial auto no-fault (personal injury protection)					
19.4 Other commercial auto liability					
21.1 Private passenger auto physical damage					
21.2 Commercial auto physical damage					
22. Aircraft (all perils)					
23. Fidelity					
24. Surety					
26. Burglary and theft					
27. Boiler and machinery					
28. Credit					
29. International					
30. Warranty					
31. Reinsurance - nonproportional assumed property					
32. Reinsurance - nonproportional assumed liability					
33. Reinsurance - nonproportional assumed financial lines					
34. Aggregate write-ins for other lines of business					
35. TOTALS					
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Line 35 through 37)					
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498. Summary of remaining write-ins for Line 34 from overflow page					
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)					

NONE

(a) State here basis of computation used in each case

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1		Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
	Direct Business (a)	2	3	4	5		
1. Fire							
2.1 Allied lines							
2.2 Multiple peril crop							
2.3 Federal flood							
2.4 Private crop							
2.5 Private flood							
3. Farmowners multiple peril							
4. Homeowners multiple peril							
5.1 Commercial multiple peril (non-liability portion)							
5.2 Commercial multiple peril (liability portion)							
6. Mortgage guaranty							
8. Ocean marine							
9.1 Inland marine							
9.2 Pet insurance plans							
10. Financial guaranty							
11.1 Medical professional liability - occurrence							
11.2 Medical professional liability - claims- made							
12. Earthquake							
13.1 Comprehensive (hospital and medical) individual							
13.2 Comprehensive (hospital and medical) group							
14. Credit accident and health (group and individual)							
15.1 Vision only							
15.2 Dental only							
15.3 Disability income							
15.4 Medicare supplement							
15.5 Medicaid Title XIX							
15.6 Medicare Title XVIII							
15.7 Long-term care							
15.8 Federal employees health benefits plan ...							
15.9 Other health							
16. Workers' compensation							
17.1 Other liability - occurrence							
17.2 Other liability - claims-made							
17.3 Excess workers' compensation							
18.1 Products liability - occurrence							
18.2 Products liability - claims-made							
19.1 Private passenger auto no-fault (personal injury protection)	1,755,833			38,656	1,717,177		
19.2 Other private passenger auto liability.....	513,331,817			20,421,996	493,288,244	(378,423)	
19.3 Commercial auto no-fault (personal injury protection)							
19.4 Other commercial auto liability.....							
21.1 Private passenger auto physical damage .	164,988,019			6,148,165	158,839,854		
21.2 Commercial auto physical damage							
22. Aircraft (all perils)							
23. Fidelity							
24. Surety							
26. Burglary and theft							
27. Boiler and machinery							
28. Credit							
29. International							
30. Warranty							
31. Reinsurance - nonproportional assumed property	XXX						
32. Reinsurance - nonproportional assumed liability	XXX						
33. Reinsurance - nonproportional assumed financial lines	XXX						
34. Aggregate write-ins for other lines of business	44,445,020						44,445,020
35. TOTALS	724,520,689			26,608,817	653,845,275		44,066,597
DETAILS OF WRITE-INS							
3401. Policy Fees	44,445,020						44,445,020
3402.							
3403.							
3498. Summary of remaining write-ins for Line 34 from overflow page							
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	44,445,020						44,445,020

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A , Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire								
2.1 Allied lines								
2.2 Multiple peril crop								
2.3 Federal flood								
2.4 Private crop								
2.5 Private flood								
3. Farmowners multiple peril								
4. Homeowners multiple peril								
5.1 Commercial multiple peril (non-liability portion)								
5.2 Commercial multiple peril (liability portion)								
6. Mortgage guaranty								
8. Ocean marine								
9.1 Inland marine								
9.2 Pet insurance plans								
10. Financial guaranty								
11.1 Medical professional liability - occurrence								
11.2 Medical professional liability - claims-made								
12. Earthquake								
13.1 Comprehensive (hospital and medical) individual								
13.2 Comprehensive (hospital and medical) group								
14. Credit accident and health (group and individual)								
15.1 Vision only								
15.2 Dental only								
15.3 Disability income								
15.4 Medicare supplement								
15.5 Medicaid Title XIX								
15.6 Medicare Title XVIII								
15.7 Long-term care								
15.8 Federal employees health benefits plan								
15.9 Other health								
16. Workers' compensation								
17.1 Other liability - occurrence								
17.2 Other liability - claims-made								
17.3 Excess workers' compensation								
18.1 Products liability - occurrence								
18.2 Products liability - claims-made								
19.1 Private passenger auto no-fault (personal injury protection)				247,470				
19.2 Other private passenger auto liability				237,709,015				
19.3 Commercial auto no-fault (personal injury protection)								
19.4 Other commercial auto liability								
21.1 Private passenger auto physical damage				84,488,982				
21.2 Commercial auto physical damage								
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance - nonproportional assumed property		XXX						
32. Reinsurance - nonproportional assumed liability		XXX						
33. Reinsurance - nonproportional assumed financial lines		XXX						
34. Aggregate write-ins for other lines of business								
35. TOTALS	322,445,467			322,445,467				
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page								
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)								

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire									
2.1 Allied lines									
2.2 Multiple peril crop									
2.3 Federal flood									
2.4 Private crop									
2.5 Private flood									
3. Farmowners multiple peril									
4. Homeowners multiple peril									
5.1 Commercial multiple peril (non-liability portion)									
5.2 Commercial multiple peril (liability portion)									
6. Mortgage guaranty									
8. Ocean marine									
9.1 Inland marine									
9.2 Pet insurance plans									
10. Financial guaranty									
11.1 Medical professional liability - occurrence									
11.2 Medical professional liability - claims-made									
12. Earthquake									
13.1 Comprehensive (hospital and medical) individual								(a)	
13.2 Comprehensive (hospital and medical) group								(a)	
14. Credit accident and health (group and individual)									
15.1 Vision only								(a)	
15.2 Dental only								(a)	
15.3 Disability income								(a)	
15.4 Medicare supplement								(a)	
15.5 Medicaid Title XIX								(a)	
15.6 Medicare Title XVIII								(a)	
15.7 Long-term care								(a)	
15.8 Federal employees health benefits plan								(a)	
15.9 Other health								(a)	
16. Workers' compensation									
17.1 Other liability - occurrence									
17.2 Other liability - claims-made									
17.3 Excess workers' compensation									
18.1 Products liability - occurrence									
18.2 Products liability - claims-made									
19.1 Private passenger auto no-fault (personal injury protection)				185,300					
19.2 Other private passenger auto liability	123,069,094			123,069,094		173,701,979		173,701,979	
19.3 Commercial auto no-fault (personal injury protection)									
19.4 Other commercial auto liability									
21.1 Private passenger auto physical damage	7,785,058			7,785,058		1,944,055		1,944,055	
21.2 Commercial auto physical damage									
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft									
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance - nonproportional assumed property	XXX				XXX				
32. Reinsurance - nonproportional assumed liability	XXX				XXX				
33. Reinsurance - nonproportional assumed financial lines	XXX				XXX				
34. Aggregate write-ins for other lines of business									
35. TOTALS	131,039,453			131,039,453		175,646,034		175,646,034	
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page									
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)									

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	57,790,860			57,790,860
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	57,790,860			57,790,860
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)				
2. Commission and brokerage:				
2.1 Direct excluding contingent		86,871,078		86,871,078
2.2 Reinsurance assumed, excluding contingent				
2.3 Reinsurance ceded, excluding contingent		114,090,586		114,090,586
2.4 Contingent - direct				
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded				
2.7 Policy and membership fees		42,787,053		42,787,053
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) ..		15,567,545		15,567,545
3. Allowances to managers and agents				
4. Advertising		22,838		22,838
5. Boards, bureaus and associations		37,105		37,105
6. Surveys and underwriting reports		35,297		35,297
7. Audit of assureds' records		1,377,922		1,377,922
8. Salary and related items:				
8.1 Salaries		8,229,355		8,229,355
8.2 Payroll taxes		376,271		376,271
9. Employee relations and welfare		1,254,827		1,254,827
10. Insurance		444,064		444,064
11. Directors' fees		535,357		535,357
12. Travel and travel items		403,984		403,984
13. Rent and rent items		631,633		631,633
14. Equipment		244,345		244,345
15. Cost or depreciation of EDP equipment and software		10,886		10,886
16. Printing and stationery		120,528		120,528
17. Postage, telephone and telegraph, exchange and express		81,014		81,014
18. Legal and auditing		353,616		353,616
19. Totals (Lines 3 to 18)		14,159,044		14,159,044
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$		12,679,112		12,679,112
20.2 Insurance department licenses and fees				
20.3 Gross guaranty association assessments				
20.4 All other (excluding federal and foreign income and real estate)		275,169		275,169
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)		12,954,281		12,954,281
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses		997,977		997,977
25. Total expenses incurred		43,678,847	(a)	43,678,847
26. Less unpaid expenses - current year		4,432,174		4,432,174
27. Add unpaid expenses - prior year		3,453,437		3,453,437
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)		42,700,110		42,700,110
DETAILS OF WRITE-INS				
2401. Professional Fees		961,133		961,133
2402. Charitable Contributions		36,844		36,844
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 through 2403 plus 2498)(Line 24 above)		997,977		997,977

(a) Includes management fees of \$ 14,918,400 to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 1,362,994	..... 1,229,659
1.1 Bonds exempt from U.S. tax	(a) 744	..... 394
1.2 Other bonds (unaffiliated)	(a) 2,935,602	..... 2,982,284
1.3 Bonds of affiliates	(a) .....	.....
2.1 Preferred stocks (unaffiliated)	(b) .....	.....
2.11 Preferred stocks of affiliates	(b) .....	.....
2.2 Common stocks (unaffiliated) .....	.....	.....
2.21 Common stocks of affiliates .....	.....	.....
3. Mortgage loans	(c) .....	.....
4. Real estate	(d) .....	.....
5. Contract loans .....	.....	.....
6. Cash, cash equivalents and short-term investments	(e) 139,520	..... 139,520
7. Derivative instruments	(f) .....	.....
8. Other invested assets .....	.....	.....
9. Aggregate write-ins for investment income .....	.....	(4,351,857)
10. Total gross investment income	4,438,860	.....
11. Investment expenses .....	.....	(g)
12. Investment taxes, licenses and fees, excluding federal income taxes .....	.....	(g)
13. Interest expense .....	.....	(h) 387,750
14. Depreciation on real estate and other invested assets .....	.....	(i)
15. Aggregate write-ins for deductions from investment income .....	.....	.....
16. Total deductions (Lines 11 through 15) .....	.....	..... 387,750
17. Net investment income (Line 10 minus Line 16) .....	.....	(387,750)
DETAILS OF WRITE-INS		
0901. Income Credited for Funds Held .....	.....	(4,351,857)
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.....	.....
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above) .....	.....	(4,351,857)
1501. ....	.....	.....
1502. ....	.....	.....
1503. ....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page .....	.....	.....
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15, above) .....	.....	.....

- (a) Includes \$599,509 accrual of discount less \$55,246 amortization of premium and less \$82,308 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$38,839 accrual of discount less \$ amortization of premium and less \$3,570 paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds
1.1 Bonds exempt from U.S. tax
1.2 Other bonds (unaffiliated)
1.3 Bonds of affiliates
2.1 Preferred stocks (unaffiliated)
2.11 Preferred stocks of affiliates
2.2 Common stocks (unaffiliated)
2.21 Common stocks of affiliates
3. Mortgage loans
4. Real estate
5. Contract loans
6. Cash, cash equivalents and short-term investments
7. Derivative instruments
8. Other invested assets
9. Aggregate write-ins for capital gains (losses)
10. Total capital gains (losses)
NONE					
DETAILS OF WRITE-INS					
0901.
0902.
0903.
0998. Summary of remaining write-ins for Line 9 from overflow page
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)

EXHIBIT OF NON-ADMITTED ASSETS

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

NONE

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

Old American County Mutual Fire Insurance Company (the "Company") is a county mutual property and casualty insurance company domiciled in the State of Texas. The Company's operations consist primarily of nonstandard automobile liability and physical damage insurance products. The Company underwrites insurance business produced by Texas-based managing general agents, companies, and other agents. A substantial portion of the business is then ceded to reinsurers.

The Company is controlled through a management contract owned by Old American Services, LLC (OASLLC).

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Texas. The State of Texas requires that insurance companies domiciled in Texas prepare their statutory basis financial statements in accordance with the National Association of Insurance Commissioners (NAIC) Accounting Practices and Procedures Manual, subject to any deviations prescribed or permitted by the Texas Insurance Commissioner. The impact of any permitted accounting practices on statutory surplus was not material.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Texas is shown below.

	SSAP #	F/S Page	F/S Line #	2024	2023
NET INCOME					
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ -	\$ -
(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	\$ -	\$ -
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 5,000,000	\$ 5,000,000
(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	\$ 5,000,000	\$ 5,000,000

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

The Company prepares its statutory financial statements in conformity with the NAIC Annual Statement Instructions. The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of certain assets and liabilities and disclosure of contingent liabilities at the date of the financial statements and the reported amounts of revenue and losses and expenses during the reporting period. Actual results could differ from those estimates.

Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates, based on reports received from ceding companies for reinsurance, and an amount for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, 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 is continually reviewed and adjustments are reflected in the period determined.

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 rata methods and are based on reports received from ceding companies for reinsurance. Certain assets designated as non-admitted are excluded from the statutory balance sheet and changes in such amounts are charged or credited directly to unassigned surplus. Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

Invested assets are valued according to statutory requirements and the basis of valuation adopted by the NAIC.

(1) Short term investments are stated at amortized cost.

(2) Bonds not backed by other loans are stated at amortized cost using the interest method.

(3) - (5) Not Applicable

(6) Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities except for interest only securities, securities where the yield had become negative, or EITF 99-20 eligible securities which are valued using the prospective method.

(7) - (9) Not Applicable

(10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property-Casualty Contracts - Premiums.

(11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates, based on reports received from managing general agents, and an amount for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, 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 is continually reviewed and adjustments are reflected in the period determined.

(12) - (13) Not Applicable

D. Going Concern

According to management's evaluation, as of December 31, 2024, there were no principal conditions or events that raised substantial doubt about the Company's ability to continue as a going concern.

NOTE 2 Accounting Changes and Corrections of Errors

Not Applicable

NOTE 3 Business Combinations and Goodwill

Not Applicable

NOTE 4 Discontinued Operations

Not Applicable

NOTES TO FINANCIAL STATEMENTS

NOTE 5 Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
Not Applicable
- B. Debt Restructuring
Not Applicable
- C. Reverse Mortgages
Not Applicable
- D. Loan-Backed Securities
 - (1) Prepayment assumptions for loan-backed securities were generated using a purchased prepayment model. The prepayment model uses several factors to estimate prepayment activity, including the time of year (seasonality), current levels of interest rates (refinancing incentive), economic activity (including housing turnover), and term and age of the underlying collateral (burnout, seasoning). On an ongoing basis, the rate of prepayment is monitored and the model calibrated to reflect actual experience and market factors.
 - (2) Aggregate Intent to sell or Aggregate Intent and Ability:
Not Applicable
 - (3) Securities with an other than temporary impairment recognized in the reporting period:
Not Applicable
 - (4) As of December 31, 2024, the Company owns loan-backed securities for which the amortized cost exceeds fair value but an other-than-temporary impairment has not been recognized in earnings as a realized loss, as reflected below.
 - a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$	162,910
2. 12 Months or Longer	\$	28,273
 - b) The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$	6,075,377
2. 12 Months or Longer	\$	2,198,402
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
Not Applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not Applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not Applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale
Not Applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Not Applicable
- J. Real Estate
Not Applicable
- K. Low Income Housing tax Credits (LIHTC)
Not Applicable
- L. Restricted Assets

1. Restricted Assets (Including Pledged)

	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6	7
	1	2	3	4	5		
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)
a. Subject to contractual obligation for which liability is not shown					\$ -	\$ -	\$ -
b. Collateral held under security lending agreements					\$ -	\$ -	\$ -
c. Subject to repurchase agreements					\$ -	\$ -	\$ -
d. Subject to reverse repurchase agreements					\$ -	\$ -	\$ -
e. Subject to dollar repurchase agreements					\$ -	\$ -	\$ -
f. Subject to dollar reverse repurchase agreements					\$ -	\$ -	\$ -
g. Placed under option contracts					\$ -	\$ -	\$ -
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock					\$ -	\$ -	\$ -
i. FHLB capital stock					\$ -	\$ -	\$ -
j. On deposit with states	\$ 75,000				\$ 75,000	\$ 75,000	\$ -
k. On deposit with other regulatory bodies					\$ -	\$ -	\$ -
l. Pledged collateral to FHLB (including assets backing funding agreements)					\$ -	\$ -	\$ -
m. Pledged as collateral not captured in other categories					\$ -	\$ -	\$ -
n. Other restricted assets					\$ -	\$ -	\$ -
o. Total Restricted Assets (Sum of a through n)	\$ 75,000	\$ -	\$ -	\$ -	\$ 75,000	\$ 75,000	\$ -

(a) Subset of Column 1

(b) Subset of Column 3

	Current Year	
	8	9
	Percentage	

NOTES TO FINANCIAL STATEMENTS

Restricted Asset Category	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	10 Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	11 Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown		\$ -	0.000%	0.000%
b. Collateral held under security lending agreements		\$ -	0.000%	0.000%
c. Subject to repurchase agreements		\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements		\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements		\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase agreements		\$ -	0.000%	0.000%
g. Placed under option contracts		\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		\$ -	0.000%	0.000%
i. FHLB capital stock		\$ -	0.000%	0.000%
j. On deposit with states		\$ 75,000	0.023%	0.023%
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)		\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories		\$ -	0.000%	0.000%
n. Other restricted assets		\$ -	0.000%	0.000%
o. Total Restricted Assets (Sum of a through n)	\$ -	\$ 75,000	0.023%	0.023%

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

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

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

3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)
Not Applicable

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements
Not Applicable

M. Working Capital Finance Investments
Not Applicable

N. Offsetting and Netting of Assets and Liabilities
Not Applicable

O. 5GI Securities
Not Applicable

P. Short Sales
Not Applicable

Q. Prepayment Penalty and Acceleration Fees

	<u>General Account</u>	<u>Protected Cell</u>
1. Number of CUSIPs		2
2. Aggregate Amount of Investment Income	\$ -	

R. Reporting Entity's Share of Cash Pool by Asset Type
Not Applicable

S. Aggregate Collateral Loans by Qualifying Investment Collateral
Not Applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies
Not Applicable

NOTE 7 Investment Income

A. Due and Accrued Income was Excluded from Surplus on the Following Basis:
The Company's surplus excludes due and accrued investment income if amounts are over 90 days past due.

B. Total Amount of Due and Accrued Income Excluded:
As of December 31, 2024, the Company did not have any due and accrued investment income past due.

C. The Gross, Nonadmitted and Admitted Amounts for Interest Income Due and Accrued.

Interest Income Due and Accrued	<u>Amount</u>
1. Gross	\$ 769,543
2. Nonadmitted	
3. Admitted	\$ 769,543

D. The Aggregate Deferred Interest.
Not Applicable

E. The Cumulative Amounts of Paid-in-Kind (PIK) Interest Included in the Current Principal Balance.
Not Applicable

NOTES TO FINANCIAL STATEMENTS

NOTE 8 Derivative Instruments

Not Applicable

NOTE 9 Income Taxes

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

1. The Company did not recognize a deferred tax asset or liability during the current year, nor in the prior year.

	As of End of Current Period			12/31/2023			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets			\$ -			\$ -	\$ -	\$ -	\$ -
(b) Statutory Valuation Allowance Adjustment			\$ -			\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(d) Deferred Tax Assets Nonadmitted			\$ -			\$ -	\$ -	\$ -	\$ -
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(f) Deferred Tax Liabilities			\$ -			\$ -	\$ -	\$ -	\$ -
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

2. The Company follows the Statements of Statutory Accounting Principles (SSAP) No. 10R, Income Taxes. The Company did not recognize any admitted deferred tax assets or liabilities at December 31, 2024 or 2023. The Company's federal tax return is not consolidated with any other entities.

	As of End of Current Period			12/31/2023			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks			\$ -			\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)			\$ -			\$ -	\$ -	\$ -	\$ -
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.			\$ -			\$ -	\$ -	\$ -	\$ -
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX		XXX	XXX		XXX	XXX	\$ -
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.			\$ -			\$ -	\$ -	\$ -	\$ -
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

3.

2024 2023

a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.

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

4.

	As of End of Current Period		12/31/2023		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies					0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies					0.000%	0.000%

b. Do the Company's tax-planning strategies include the use of reinsurance?

Yes [] No [X]

B. Deferred Tax Liabilities not Recognized

There are no amounts on which the Company has not recognized deferred tax.

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

The Company did not incur income taxes during the current year, nor in the prior year.

1. Current Income Tax

(1) As of End of Current Period	(2) 12/31/2023	(3) (Col. 1 - 2) Change
---------------------------------------	-------------------	-------------------------------

NOTES TO FINANCIAL STATEMENTS

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

D. Significant Book to Tax Adjustments
Not Applicable

E. Additional Disclosures
Not Applicable

F. Consolidation of Federal Income Tax Return
Not Applicable

G. Federal or Foreign Income Tax Loss Contingencies
Not Applicable

H. Repatriation Transition Tax (RTT)
Not Applicable

I. Alternative Minimum Tax (AMT) Credit
Not Applicable

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

A. Relationship of Parent, Subsidiaries and Affiliates
Management of the Company is provided under the terms of a management contract until the year 2036. The management contract is held by Old American Services, LLC.

B. Transaction Information
The management contract provides that the Manager shall promote, develop, and manage the business of the Company for a management fee. This management fee is based upon statutory net income calculated before the management fee of the Company is recorded, and subject to certain surplus adjustments. Should the Company incur a net loss, no compensation would be paid to the Manager, and the Manager would forego all future compensation until the Company has net income to offset the prior net loss. However, in no event shall the management fee reduce the total Policyholder Surplus of the Company below the greatest of (1) Five Million Dollars (\$5,000,000); (2) one-third (1/3) of the net retained writings of the Company over the previous twelve (12) months; or (3) the minimum surplus required by law. In 2024 and 2023, the Company recorded \$14,918,400 and \$11,263,556, respectively, in management fees paid or payable to Old American Services.

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

D. Amounts Due To or From Related Parties
At December 31, 2024, the Company reported amounts due to affiliates of \$1,644,866.

E. Management, Service Contracts, Cost Sharing Arrangements

NOTES TO FINANCIAL STATEMENTS

The Company's affiliate, Old American Services, provides administrative support for the Company under a management contract, which services are detailed in paragraph B above.

- F. Guarantees or Undertakings for Related Parties
Not Applicable
- G. Nature of Relationships That Could Affect Operations
Not Applicable
- H. Amount Deducted for Investment in Upstream Company
Not Applicable
- I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets
Not Applicable
- J. Write-down for Impairments of Investments in Affiliates
Not Applicable
- K. Foreign Insurance Subsidiary Valued using CARVM
Not Applicable
- L. Downstream Holding Company Valued Using Look-Through Method
Not Applicable
- M. All SCA Investments
Not Applicable
- N. Investment in Insurance SCAs
Not Applicable
- O. SCA or SSAP 48 Entity Loss Tracking
Not Applicable

NOTE 11 Debt

A. Debt Related Items

In 2008, the Company obtained approval from the Texas Department of Insurance to increase its required surplus from \$2 million to \$5 million through the issuance of a subordinated surplus note payable. The note payable provides for interest on the unpaid principal balance of the annual rate of 8.25% and calls for principal payments due only if in excess of the surplus floor of \$5,000,000. Repayment of the principal balance is due on December 31, 2033. The payment of interest and principal is payable out of statutory surplus, payable only if in excess of the surplus floor, as defined in the note agreement and is subject to the approval of the Commissioner of Insurance of the State of Texas. The surplus note payable at December 31, 2024 and 2023 was \$4,700,000. The Company did not make any payments of principal in 2024 or 2023. Interest paid on the surplus note for the years ended December 31, 2024 and 2023 was \$387,750.

The note payable provides, among other items, that in the event of any liquidation or sale of assets or business, reinsurance, or winding up which is involuntary in nature, the instrument will be subordinate to the rights attributable to the insurance policies of the Company, but shall be prior and superior entitlement to the distribution of assets remaining after reinsurance or transfer of policies and reserves and payment of expenses of liquidation or sale to the rights of any security holder of the Company.

- B. FHLB (Federal Home Loan Bank) Agreements
Not Applicable

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

- A. Defined Benefit Plan
Not Applicable
- B. Investment Policies
Not Applicable
- C. The Fair Value of Each Class of Plan Assets
Not Applicable
- D. Rate of Return Assumptions
Not Applicable
- E. Defined Contribution Plan
Not Applicable
- F. Multiemployer Plans
Not Applicable
- G. Consolidated/Holding Company Plans
The Company's upstream parent has a 401(K) plan that follows all ERISA regulations and IRS Section 125 cafeteria regulations. The parent company matches employee contributions up to 6%. The Company has no legal obligation for benefits under this plan.
- H. Postemployment Benefits and Compensated Absences
Not Applicable
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
Not Applicable

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

- A. Outstanding Shares
Not Applicable
- B. Dividend Rate of Preferred Stock
Not Applicable
- C. Dividend Restrictions
Not Applicable
- D. Dates and Amounts of Dividends Paid
Not Applicable
- E. Amount of Ordinary Dividends that may be Paid

NOTES TO FINANCIAL STATEMENTS

Not Applicable

F. Restrictions on Unassigned Funds

The minimum required surplus of the Company at December 2024 and 2023 was \$5,000,000.

G. Mutual Surplus Advances

Not Applicable

H. Company Stock Held for Special Purposes

Not Applicable

I. Changes in Special Surplus Funds

Not Applicable

J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is

Not Applicable

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

1 Item Number	2 Date Issued	3 Interest Rate	4 Original Issue Amount of Note	5 Is Surplus Note Holder a Related Party (Y/N)	6 Carrying Value of Note Prior Year	7 Carrying Value of Note Current Year*	8 Unapproved Interest And/Or Principal
0001	12/31/2008	8.250%	\$ 4,700,000	Yes	\$ 4,700,000	\$ 4,700,000	
Total	XXX	XXX	\$ 4,700,000	XXX	\$ 4,700,000	\$ 4,700,000	\$ -

* Total should agree with Page 3, Line 33.

1 Item Number	9 Current Year Interest Expense Recognized	10 Life-To-Date Interest Expense Recognized	11 Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider)	12 Current Year Principal Paid	13 Life-To-Date Principal Paid	14 Date of Maturity
0001	\$ 387,750	\$ 6,204,000				12/31/2033
Total	\$ 387,750	\$ 6,204,000	XXX	\$ -	\$ -	XXX

1 Item Number	15 Are Surplus Note Payments Contractually Linked? (Y/N)	16 Surplus Note Payments Subject to Administrative Offsetting Provisions? (Y/N)	17 Were Surplus Note Proceeds Used to Purchase an Asset Directly From the Holder of the Surplus Note? (Y/N)	18 Is Asset Issuer a Related Party (Y/N)	19 Type of Assets Received Upon Issuance
0001	Yes	No	No	Yes	Cash
Total	XXX	XXX	XXX	XXX	XXX

1 Item Number	20 Principal Amount of Assets Received Upon Issuance	21 Book/Adjusted Carry Value of Assets	22 Is Liquidity Source a Related Party to the Surplus Note Issuer? (Y/N)
0001	\$ 4,700,000	\$ 4,700,000	No
Total	\$ 4,700,000	\$ 4,700,000	XXX

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

Not Applicable

M. Date of Quasi-Reorganizations

Not Applicable

NOTE 14 Liabilities, Contingencies and Assessments

Not Applicable

NOTE 15 Leases

Not Applicable

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

Not Applicable

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

NOTES TO FINANCIAL STATEMENTS

Not Applicable

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

Not Applicable

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

During 2024, the direct written premium of \$680,075,669 before policy fees was written by 23 active and 2 run-off managing general agents. The direct written premium for the majority of managing general agents exceeded 5% of the Company's surplus. The direct written premium before policy fees of the managing general agents are shown below.

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
21st Century General Agency 1761 International Parkway, Suite 105 Richardson, TX 75081	75-2765001	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 18,354,761
Acceptance Insurance Agency of TN P.O. Box 23410 Nashville, TN 37202	62-1552707	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 12,026,429
Aggressive Insurance Services, LLC 28470 Avenue Stanford, Suite 250 Santa Clarita, CA 91355	20-8521100	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 105,741,768
Aguila Dorada General Agency, LLC 9703 N. Interstate 35 San Antonio, TX 78233	88-2872696	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 18,075,403
American Agencies Insurance Services 4500 Fuller Dr., Suite 400 Dallas, TX 75038	75-2770432	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 838,505
AmWINS Specialty Auto, Inc. 6201 W Plano Pkwy, Suite 225 Plano, TX 75093	74-3009541	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 16,163,610
Artesia Underwriters Ins Group 2034 Airline Rd., Ste A Corpus Christi, TX 78415	99-0871729	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 309,996
Connect MGA 3700 W 15th St., Suite 200A Plano, TX 75075	45-1475095	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 162,528,586
Cox Insurance Group 4514 Cole Avenue, Suite 600 Dallas, TX 75205	47-3521734	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 2,500,551
Empower MGA, Inc. P.O. Box 137089 Fort Worth, TX 76136	75-1469549	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 3,539,743
Fenix General Agency, LLC 3 Greenway Plaza, #1320 Houston, TX 77046	86-1235771	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 20,681,524
Hillco General Agency LLC P.O. Box 310 Marble Falls, TX 78654	84-3086321	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 23,545,826
Lonestar Managing General Agency, Inc. 10715 Plano Road, Suite 200 Dallas, TX 75238	20-1008449	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 2,420,870
Louis A. Williams and Associates, Inc. 907 East Grand Avenue Marshall, TX 75670	75-1469549	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 46,371,699
MGA Agency Inc 3333 Lee Pkwy, Suite 1200 Dallas, TX 75219-5134	75-1622457	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ (82)
Noble General Agency, LLC 2600 W. FM 2147 Marble Falls, TX 78657	88-3564050	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 7,282,219
Reliant General MGA, LLC 3700 W 15th St, Suite 200A Plano, TX 75075-4729	92-2831517	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 3,173,775
Save Money Car Insurance 6528 E. 101st St., Suite D1 #390 Tulsa, OK 74133	46-5338509	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ (13,170)
Sigo Managing General Agency, LLC 1 Harrison Lane Harrison, NJ 07029	85-3501219	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 17,650,291
Standard Insurance Agency 620 West Pipeline Road Hurst, TX 76053	75-1569378	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 7,701,124
Tejas Seguros LLC 4500 Fuller Dr., Suite 400 Dallas, TX 75038	27-3029234	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 3,898,607
The General Automobile Ins Svcs of Georgia, Inc. 2636 Elm Hill Pike, Suite 100 Nashville, TN 37214	62-1820203	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 26,762,029
The General Automobile Ins Svcs of Texas 2636 Elm Hill Pike, Suite 100 Nashville, TN 37214	62-1812273	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 87,409,144
United Group Underwriters, Inc. 901 Main St., Suite 5330 Dallas, TX 75202	26-0180489	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 58,048,854

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

Venture General Agency LLC P.O. Box 1970 Marble Falls, TX 78654	80-1816944	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 35,063,607
Total	XXX	XXX	XXX	XXX	\$ 680,075,669

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

NOTE 20 Fair Value Measurements

The Company does not own any investments that are considered to be other than temporarily impaired. All bonds held are reported at amortized cost in the statement of financial position. Short term securities and cash equivalents are valued at amortized cost.

Fair value of the Company's invested assets is determined and reported for disclosure purposes in accordance with the Purposes and Procedures Manual of the NAIC Investment Analysis Office when available. For those investments not valued by the NAIC securities Valuation Office, prices were obtained from an independent pricing service vendor such as Interactive Data Corporation, Merrill Lynch indices, Reuters, S&P or Bloomberg. Under certain circumstances, if neither an SVO price nor a vendor price is available, a price may be obtained from a broker.

Transfers between fair value levels are recognized as of the end of the reporting period. During the year of 2024, the Company did not have any transfers between Levels 1, 2 or 3 for assets measured and reported at fair value.

As of December 31, 2024, the fair value of the Company's financial instruments is summarized as below:

A. Fair Value Measurements at December 31, 2024

Not Applicable

B. Other Fair Value Disclosures

Not Applicable

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 100,736,168	\$ 101,406,523	\$ 24,327,836	\$ 76,408,332			
Cash, Cash Equivalents and Short-Term Investments	\$ 35,456,360	\$ 35,455,813	\$ 35,456,360				

D. Not Practicable to Estimate Fair Value

Not Applicable

E. Instruments Measured at NAV

Not Applicable

NOTE 21 Other Items

A. Unusual or Infrequent Items

Not Applicable

B. Troubled Debt Restructuring: Debtors

Not Applicable

C. Other Disclosures

Not Applicable

D. Business Interruption Insurance Recoveries

Not Applicable

E. State Transferable and Non-transferable Tax Credits

Not Applicable

F. Subprime Mortgage Related Risk Exposure

Not Applicable

G. Insurance-Linked Securities (ILS) Contracts

Not Applicable

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

Not Applicable

NOTE 22 Events Subsequent

Not Applicable

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables

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

Individual Reinsurers Who Are Not Members of a Group

ID Number	Reinsurer Name	Unsecured Amount
38-2145898	DORINCO REINS CO	\$ 74,410,296
RJ-1460019	MS AMLIN AG	\$ 2,805,228

Individual Reinsurers Who Are Members of a Group

Group Code	ID Number	Reinsurer Name	Unsecured Amount
0473	39-1173498	AMERICAN FAMILY CONNECT P&C INS CO	\$ 75,584,301
3219	35-2293075	ENDURANCE ASSUR CORP	\$ 20,765,470

NOTES TO FINANCIAL STATEMENTS

0922	95-2769232	INSURANCE COMPANY OF THE WEST	\$ 10,963,109
0473	02-0170490	NGM INS CO	\$ 3,363,350
0158	47-0698507	ODYSSEY REINS CO	\$ 16,048,154
0169	26-2465659	THE GENERAL AUTOMOBILE INS CO	\$ 46,241,018

All Members of the Groups Shown above with Unsecured Reinsurance Recoverables

Group Code	ID Number	Reinsurer Name	Unsecured Amount
0473	39-1173498	AMERICAN FAMILY CONNECT P&C INS CO	XXX
0473	02-0170490	NGM INS CO	XXX
Total			\$ 78,947,651

B. Reinsurance Recoverable in Dispute
Not Applicable

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			\$ 8,106,319	\$ 1,545,434	\$ (8,106,319)	\$ (1,545,434)
b. All Other			\$ 222,272,433	\$ 34,847,877	\$(222,272,433)	\$ (34,847,877)
c. Total (a+b)	\$ -	\$ -	\$ 230,378,752	\$ 36,393,311	\$(230,378,752)	\$ (36,393,311)
d. Direct Unearned Premium Reserve						\$ 230,378,752

D. Uncollectible Reinsurance
Not Applicable

E. Commutation of Reinsurance Reflected in Income and Expenses.
Not Applicable

F. Retroactive Reinsurance
Not Applicable

G. Reinsurance Accounted for as a Deposit
Not Applicable

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements
Not Applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation
Not Applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation
Not Applicable

K. Reinsurance Credit
Not Applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination
Not Applicable

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

- A. Development of Prior Year Losses and Loss Adjustment Expenses
Reserves as of December 31, 2024 were \$0. The Company ceded 100% of its business to reinsurers in 2024 and 2023.
- B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Losses and Loss Adjustment Expenses.
Not Applicable

NOTE 26 Intercompany Pooling Arrangements
Not Applicable

NOTE 27 Structured Settlements
Not Applicable

NOTE 28 Health Care Receivables
Not Applicable

NOTE 29 Participating Policies
Not Applicable

NOTE 30 Premium Deficiency Reserves
Not Applicable

NOTE 31 High Deductibles
Not Applicable

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses
Not Applicable

NOTE 33 Asbestos/Environmental Reserves
Not Applicable

NOTE 34 Subscriber Savings Accounts
Not Applicable

NOTES TO FINANCIAL STATEMENTS

NOTE 35 Multiple Peril Crop Insurance
Not Applicable

NOTE 36 Financial Guaranty Insurance
Not Applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State Regulating? TEXAS
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [X] No []
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0001352713
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2023
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2018
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/26/2020
- 3.4 By what department or departments?
TEXAS DEPARTMENT OF INSURANCE
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes [X] No []
4.12 renewals? Yes [X] No []
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes [] No [X]
4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 6.2 If yes, give full information
.....
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [X] No []
- 7.2 If yes,
7.21 State the percentage of foreign control 100.0 %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
BERMUDA	HOLDING COMPANY

GENERAL INTERROGATORIES

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

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

- 8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? Yes [] No [X]
- 8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
DELOITTE & TOUCHE LLP, JPMORGAN CHASE TOWER, 2200 ROSS AVENUE, SUITE 1600, DALLAS, TX 75201
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:
.....
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
.....
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
- 10.6 If the response to 10.5 is no or n/a, please explain.
.....
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
WILLIS TOWERS WATSON / SALEH LALANI, 500 NORTH AKARD STREET, SUITE 4300, DALLAS, TEXAS 75201
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
- 12.11 Name of real estate holding company ...
- 12.12 Number of parcels involved
- 12.13 Total book/adjusted carrying value \$
- 12.2 If yes, provide explanation
.....
- 13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
.....
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A [X]
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- c. Compliance with applicable governmental laws, rules and regulations;
- d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:
.....
- 14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
.....
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
.....

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
GENERAL INTERROGATORIES**

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

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

BOARD OF DIRECTORS

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

FINANCIAL

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

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

INVESTMENT

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
GENERAL INTERROGATORIES

- 25.02 If no, give full and complete information, relating thereto

- 25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

- 25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$
- 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$
- 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]
- 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]
- 25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]
- 25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:
- 25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
- 25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
- 25.093 Total payable for securities lending reported on the liability page \$

- 26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No []
- 26.2 If yes, state the amount thereof at December 31 of the current year:
- 26.21 Subject to repurchase agreements \$
- 26.22 Subject to reverse repurchase agreements \$
- 26.23 Subject to dollar repurchase agreements \$
- 26.24 Subject to reverse dollar repurchase agreements \$
- 26.25 Placed under option agreements \$
- 26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$
- 26.27 FHLB Capital Stock \$
- 26.28 On deposit with states \$ 75,000
- 26.29 On deposit with other regulatory bodies \$
- 26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$
- 26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$
- 26.32 Other \$

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....

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

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

- 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [] No []
- 27.4 If the response to 27.3 is YES, does the reporting entity utilize:
- 27.41 Special accounting provision of SSAP No. 108 Yes [] No []
- 27.42 Permitted accounting practice Yes [] No []
- 27.43 Other accounting guidance Yes [] No []
- 27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [] No []
- The reporting entity has obtained explicit approval from the domiciliary state.
 - Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
 - Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
 - Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.
- 28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]
- 28.2 If yes, state the amount thereof at December 31 of the current year. \$
29. Excluding items in Schedule E, Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?..... Yes [X] No []
- 29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
CITIBANK, N.A.	NEW YORK, NY

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
GENERAL INTERROGATORIES

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

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

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

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

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

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

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

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105900	NEW ENGLAND ASSET MANAGEMENT, INC.	KUR85E5PS460FZTFC130	SEC	NO.....

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

30.2 If yes, complete the following schedule:

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
GENERAL INTERROGATORIES

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	102,905,507	102,235,699	(669,808)
31.2 Preferred stocks			
31.3 Totals	102,905,507	102,235,699	(669,808)

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

Fair values are based on end of period prices provided by independent pricing services (vendor price) such as: Refinitiv, ICE Data Services, Bloomberg, IHS Markit, S&P Capital IQ or PricingDirect. Under certain circumstances, if a vendor price is unavailable, a price may be obtained from a broker.

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

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

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

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

33.2 If no, list exceptions:

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

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

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

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

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

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

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

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

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
GENERAL INTERROGATORIES

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

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

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

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
 39.21 Held directly Yes [] No []
 39.22 Immediately converted to U.S. dollars Yes [] No []

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

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

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$318,775

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

1 Name	2 Amount Paid
ISO SERVICES, INC. ....	.....306,857

41.1 Amount of payments for legal expenses, if any? \$ 115,440

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

1 Name	2 Amount Paid
GREENBERG TRAUERIG, P.A. ....	..... 60,000
MITCHELL, WILLIAMS, SELIG, GATES & WOODYARD, PLLC .....	..... 55,000

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

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

1 Name	2 Amount Paid

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

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

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

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

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

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

1.6 Individual policies:

Most current three years:

1.61 Total premium earned \$ _____

1.62 Total incurred claims \$ _____

1.63 Number of covered lives _____

All years prior to most current three years:

1.64 Total premium earned \$ _____

1.65 Total incurred claims \$ _____

1.66 Number of covered lives _____

1.7 Group policies:

Most current three years:

1.71 Total premium earned \$ _____

1.72 Total incurred claims \$ _____

1.73 Number of covered lives _____

All years prior to most current three years:

1.74 Total premium earned \$ _____

1.75 Total incurred claims \$ _____

1.76 Number of covered lives _____

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator		
2.2 Premium Denominator	44,066,597	34,259,142
2.3 Premium Ratio (2.1/2.2)	0.000	0.000
2.4 Reserve Numerator		
2.5 Reserve Denominator		
2.6 Reserve Ratio (2.4/2.5)	0.000	0.000

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

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

3.21 Participating policies \$ _____

3.22 Non-participating policies \$ _____

4. For mutual reporting Entities and Reciprocal Exchanges only:

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

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

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

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

5. For Reciprocal Exchanges Only:

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

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation..... Yes [] No [] N/A [X]

5.22 As a direct expense of the exchange..... Yes [] No [] N/A [X]

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

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

5.5 If yes, give full information

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
The Company does not write workers' compensation.
- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
The Company writes property damage coverage on a direct basis in Texas and has a 100% quota share for all programs. The Company evaluates its exposure by zip code and county.
- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
The Company has 100% quota share reinsurance agreements in place on all ongoing programs. The Company also participates in a reinsurance program that provides additional protection from excessive losses.
- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [] No [X]
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss
The Company is party to multiple reinsurance agreements that provide protection from covered claims, including catastrophe risks.
- 7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)? Yes [] No [X]
- 7.2 If yes, indicate the number of reinsurance contracts containing such provisions.
- 7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [] No []
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [] No [X]
- 8.2 If yes, give full information
.....
- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [] No [X]
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [X] No []
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [] No [X]
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or, Yes [] No [X]
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [] No [X]
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes [] No [X]
10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [] No [] N/A [X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

- 11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? Yes [] No [X]
- 11.2 If yes, give full information
.....
- 12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
- 12.11 Unpaid losses \$
- 12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$
- 12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral and other funds. \$ _____
- 12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [] N/A [X]
- 12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
- 12.41 From %
- 12.42 To..... %
- 12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [] No [X]
- 12.6 If yes, state the amount thereof at December 31 of the current year:
- 12.61 Letters of Credit \$
- 12.62 Collateral and other funds..... \$
- 13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ _____
- 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]
- 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. 1
- 14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [] No [X]
- 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
.....
- 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [] No []
- 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No []
- 14.5 If the answer to 14.4 is no, please explain:
.....
- 15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]
- 15.2 If yes, give full information
.....
- 16.1 Does the reporting entity write any warranty business? Yes [] No [X]
If yes, disclose the following information for each of the following types of warranty coverage:

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

* Disclose type of coverage:
.....

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

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

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

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

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

	1 2024	2 2023	3 2022	4 2021	5 2020
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. Liability lines (Lines 11, 16, 17, 18 & 19)	515,087,650	352,560,685	249,475,071	217,700,448	199,840,744
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	164,988,019	140,737,211	95,350,581	77,248,782	69,527,728
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	44,445,020	34,936,574	31,038,546	31,778,384	26,473,199
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	724,520,689	528,234,470	375,864,198	326,727,614	295,841,671
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11, 16, 17, 18 & 19)	(378,423)	(209,830)	(175,365)	(171,000)	(180,780)
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	44,445,020	34,468,972	30,988,497	31,778,384	26,473,199
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)	44,066,597	34,259,142	30,813,132	31,607,384	26,292,419
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	387,750	387,750	387,750	423,324	387,750
14. Net investment gain (loss) (Line 11)	(387,750)	(387,750)	(387,750)	(387,750)	(387,750)
15. Total other income (Line 15)					
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)				35,574	
18. Net income (Line 20)					
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	326,631,978	294,950,463	189,124,434	161,092,162	121,590,200
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	50,015,804	36,526,377	22,000,509	15,503,420	16,309,328
20.2 Deferred and not yet due (Line 15.2)	116,703,543	85,228,212	51,334,520	36,174,646	38,055,099
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	321,631,978	289,950,463	184,124,434	156,092,162	116,590,200
22. Losses (Page 3, Line 1)					
23. Loss adjustment expenses (Page 3, Line 3)					
24. Unearned premiums (Page 3, Line 9)					
25. Capital paid up (Page 3, Lines 30 & 31)					
26. Surplus as regards policyholders (Page 3, Line 37)	5,000,000	5,000,000	5,000,000	5,000,000	5,000,000
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	(1,557,056)	3,052,687	711,976	(279,876)	1,718,948
Risk-Based Capital Analysis					
28. Total adjusted capital	5,000,000	5,000,000	5,000,000	5,000,000	5,000,000
29. Authorized control level risk-based capital	5,000,000	5,000,000	5,000,000	5,000,000	5,000,000
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	74.1	72.9	72.0	72.7	75.5
31. Stocks (Lines 2.1 & 2.2)					
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	25.9	27.1	28.0	27.3	24.5
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)					

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2024	2 2023	3 2022	4 2021	5 2020
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)					
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)					
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11, 16, 17, 18 & 19)	237,956,485	201,811,063	170,276,931	157,951,069	136,754,531
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	84,488,982	70,030,861	54,160,754	42,288,456	36,142,207
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	322,445,467	271,841,924	224,437,685	200,239,525	172,896,738
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11, 16, 17, 18 & 19)					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)					
Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)					
68. Loss expenses incurred (Line 3)					
69. Other underwriting expenses incurred (Line 4)	99.1	98.9	98.7	98.7	98.5
70. Net underwriting gain (loss) (Line 8)	0.9	1.1	1.3	1.3	1.5
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	99.1	98.9	98.7	98.7	98.5
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	881.3	685.2	616.3	632.1	525.8
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)					
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0).....					
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)					
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)					

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2024

NAIC Company Code 29378

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	1,755,833	1,737,460		621,303	247,470	272,115	185,300	2,345	1,585		224,286	33,048
19.2 Other Private Passenger Auto Liability	513,331,817	466,666,302		174,482,767	237,709,015	293,211,864	296,771,073	4,233,816	11,399,209	26,313,714	65,571,656	9,661,764
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	164,988,019	163,787,320		55,274,682	84,488,982	85,288,779	9,729,113	569,481	762,951	1,161,847	21,075,136	3,105,351
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	44,445,020	44,445,020									42,787,053	
35. Total (a)	724,520,689	676,636,103		230,378,752	322,445,467	378,772,758	306,685,487	4,805,642	12,163,744	27,475,561	129,658,131	12,800,162
DETAILS OF WRITE-INS												
3401. Policy Fees	44,445,020	44,445,020									42,787,053	
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	44,445,020	44,445,020									42,787,053	

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

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

19.TX



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2024

NAIC Company Code 29378

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
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2.1 Allied Lines												
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril												
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet Insurance Plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan (b)												
15.9 Other Health (b)												
16. Workers' Compensation												
17.1 Other Liability - Occurrence												
17.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18.1 Products Liability - Occurrence												
18.2 Products Liability - Claims-Made												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)	1,755,833	1,737,460		621,303	247,470	272,115	185,300	2,345	1,585		224,286	33,048
19.2 Other Private Passenger Auto Liability	513,331,817	466,666,302		174,482,767	237,709,015	293,211,864	296,771,073	4,233,816	11,399,209	26,313,714	65,571,656	9,661,764
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	164,988,019	163,787,320		55,274,682	84,488,982	85,288,779	9,729,113	569,481	762,951	1,161,847	21,075,136	3,105,351
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	44,445,020	44,445,020									42,787,053	
35. Total (a)	724,520,689	676,636,103		230,378,752	322,445,467	378,772,758	306,685,487	4,805,642	12,163,744	27,475,561	129,658,131	12,800,162
DETAILS OF WRITE-INS												
3401. Policy Fees	44,445,020	44,445,020									42,787,053	
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	44,445,020	44,445,020									42,787,053	

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

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

19 GT

Schedule F - Part 1 - Assumed Reinsurance

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
AA-1460018	00000	CATLIN RE SWITZERLAND LTD	CHE	2		32		248		137	50			467			467			
AA-3191190	00000	HAMILTON RE LTD	BMU	2						1				1			1			
AA-3190958	00000	FLEMING INTL REINS LTD	BMU	2		(214)		19		16	4			(175)			(176)			
AA-3610566	00000	NEWPOINT REINS CO LTD	KNA	2	11,768	331	133	1,845		3,332	869	2,322		8,831	2,178		6,654			
AA-5320039	00000	PEAK REINS CO LTD	HKG	2	19,263	661	134	3,862	10	4,494	1,067	5,788		16,017	5,228		10,789			
AA-3191298	00000	ANTARES REINS CO LTD	BMU	2		15		133		199	32			379	9		370			
AA-1780078	00000	PARTNER REINS EUROPE SE	IRL	2														31		
AA-1780070	00000	QBE REINS (EUROPE) LTD	IRL	2				8		5	1			14			14			
AA-3770516	00000	SPAR RE PIC LTD	CYM	2	9,038			1,452		1,483	499	3,842		7,277	2,959		4,318			
AA-3191179	00000	THIRD POINT REINS CO LTD	BMU	2																
AA-3191295	00000	THIRD POINT REINS (USA) LTD	BMU	2																
AA-3770492	00000	TOPSAIL REINS SPC LTD	CYM	2	2,492	271	13	1,516	1	1,726	522	629		4,678	247		4,431			
AA-3190859	00000	ARIA (SAC) LTD	BMU	2	294			3		16		262		281	206		75	1,048		
AA-3191250	00000	WATFORD RE LTD	BMU	2		1		63		27	10			101			101			
2699999. Total Unauthorized - Other Non-U.S. Insurers					42,856	1,116	280	9,306	11	11,676	3,089	12,843		38,322	10,836		27,485	916		
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					159,781	3,443	543	35,516	6,608	67,786	8,016	46,516		168,429	24,973		143,456	115,251		
3299999. Total Certified - Affiliates - U.S. Non-Pool																				
3599999. Total Certified - Affiliates - Other (Non-U.S.)																				
3699999. Total Certified - Affiliates																				
CR-1460019	00000	MS AMLIN AG	CHE	2	370	48		248		460	112			867	25		843			
4099999. Total Certified - Other Non-U.S. Insurers					370	48		248		460	112			867	25		843			
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					370	48		248		460	112			867	25		843			
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																				
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																				
5099999. Total Reciprocal Jurisdiction - Affiliates																				
RJ-1126566	00000	LLOYD'S SYNDICATE NUMBER 566 (INCIDENTAL TO 2999)	GBR		35															
RJ-1126609	00000	LLOYD'S SYNDICATE NUMBER 609	GBR		35															
RJ-1126727	00000	LLOYD'S SYNDICATE NUMBER 727	GBR		35															
RJ-1127414	00000	LLOYD'S SYNDICATE NUMBER 1414	GBR		64															
RJ-1120106	00000	LLOYD'S SYNDICATE NUMBER 1969	GBR		111															
RJ-1128121	00000	LLOYD'S SYNDICATE NUMBER 2121	GBR		17															
RJ-1128987	00000	LLOYD'S SYNDICATE NUMBER 2987	GBR		64															
RJ-1460019	00000	MS AMLIN AG	CHE	2	12,152	394	91	1,183		1,946	468	3,264		7,346	3,096		4,250			
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers					12,154	394	91	1,183		1,946	468	3,264		7,346	3,096		4,250			
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					12,154	394	91	1,183		1,946	468	3,264		7,346	3,096		4,250			
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					680,454	18,362	3,372	131,039	6,829	175,646	32,669	230,379		598,297	186,453		411,844	117,941		
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																				
9999999 Totals					680,454	18,362	3,372	131,039	6,829	175,646	32,669	230,379		598,297	186,453		411,844	117,941		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
0499999	Total Authorized - Affiliates - U.S. Non-Pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)			XXX											XXX		
0899999	Total Authorized - Affiliates			XXX											XXX		
75-2701220	ACCC INS CO					74		74	89	89					6		
06-0237820	ACE PROP & CAS INS CO														1		
34-1385465	AFFIRMATIVE INS CO					521		521	625	625					6		
39-1173498	AMERICAN FAMILY CONNECT PROP & CAS I					38,807	75,584	114,392	137,270	38,807	98,463		98,463		3	2,757	
06-1430254	ARCH REINS CO						6	6	7		7		7		2		
39-0712210	CHURCH MUT INS CO S I						3	3	4		4		4		3		
31-0542366	THE CINCINNATI INS CO														2		
38-2145898	DORINCO REINS CO					36,863	74,410	111,273	133,528	36,863	96,665		96,665		3	2,707	
42-0234980	EMPLOYERS MUT CAS CO						3	3	4		4		4		3		
35-2293075	ENDURANCE ASSUR CORP					12,990	20,765	33,756	40,507	12,990	27,517		27,517		2	578	
62-1613506	FIRST ACCEPTANCE INS CO INC					7,360	8,223	8,223	9,867	1,499	8,368	7,360	1,008		6	221	
36-0901240	FIRST CHICAGO INS CO					2,855	2,765	2,765	3,318	999	2,318		2,318		6	70	
73-1507369	GHS INS CO														2		
95-2769232	INSURANCE CO OF THE WEST					4,728	10,963	15,691	18,830	4,728	14,101		14,101		3	395	
61-0392792	KENTUCKY FARM BUR MUT INS CO								1		1		1		3		
04-1543470	LIBERTY MUT INS CO						36	36	43		43		43		3	1	
06-1481194	MARKEL GLOBAL REINS CO						23	23	28		28		28		3	1	
75-1767545	MGA INS CO INC						162	3	4		4		4		4		
75-2248748	MIDDLE STATES INS CO INC		3,500	0016		4,114		4,114	4,937	1,101	3,836	3,500	336		6	105	
31-4259550	MOTORISTS MUT INS CO								1		1		1		3		
25-0687550	NATIONAL UNION FIRE INS CO OF PITTSB														3		
02-0170490	NGM INS CO						3,363	3,363	4,036		4,036		4,036		3	113	
47-0698507	ODYSSEY REINS CO					10,364	16,048	26,412	31,694	10,364	21,331		21,331		2	448	
13-3031176	PARTNER REINS CO OF THE US						62	62	75		75		75		2	2	
30-0703280	RENAISSANCE EUROPE AG US BRANCH					(147)									2		
26-2465659	THE GEN AUTOMOBILE INS CO INC					48,313	46,241	94,554	113,465	48,313	65,152		65,152		3	1,824	
75-1976074	US LLOYDS INS CO					6,497	6,497	6,497	7,797	3,339	4,457	3,161	1,297		6	156	
13-1290712	XL REINS AMER INC														2		
94-1590201	YOSEMITE INS CO					24		24	29		29		29		6		
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		3,500	XXX	13,571	174,139	247,511	421,797	506,157	159,747	346,410	16,343	330,067	XXX	490	9,142	
AA-1460023	RENAISSANCE EUROPE AG					5		5	6		6				2		
1299999	Total Authorized - Other Non-U.S. Insurers			XXX		5		5	6		6			XXX			
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		3,500	XXX	13,571	174,145	247,511	421,802	506,163	159,753	346,410	16,343	330,067	XXX	490	9,142	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30-0708277	ORPHEUS RE LTD					14,611	21,442	21,442	25,730	6,831	18,900	14,611	4,288		6	438	
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other			XXX	14,611	21,442		21,442	25,730	6,831	18,900	14,611	4,288	XXX	438	515	
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	14,611	21,442		21,442	25,730	6,831	18,900	14,611	4,288	XXX	438	515	
2299999	Total Unauthorized - Affiliates			XXX	14,611	21,442		21,442	25,730	6,831	18,900	14,611	4,288	XXX	438	515	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk							
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
98-3398195	GRYPHON OA SERIES PROTECTED CELL		7,658	0006	10,343	28,138		28,138	33,766	10,172	23,594	18,001	5,594	6	540	671
88-0510281	NATIONSBUILDERS INS CO													6		
99-4512751	SIGO INCORPORATED CELL INC					1,375		1,375	1,650	1,375	275		275	6		33
99-1470424	TROFEE REINSURANCE COMPANY, LLC		2,124	0011	1,440	4,814		4,814	5,776	1,562	4,214	3,565	650	6	107	78
65-0145688	UNITED AUTOMOBILE INS CO					74,338		74,338	89,205	89,205				6		
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers		9,782	XXX	11,783	108,665		108,665	130,398	102,314	28,084	21,565	6,518	XXX	647	782
AA-1460019	MS AMLIN AG		111	0001		111		111	133		133	111	22	2		
AA-3191306	BLUEFIRE RE LTD		1,499	0005		340		340	408	(152)	560	560		6		
AA-1460018	CATLIN RE SWITZERLAND LTD		1,819	0002		467		467	561		561	561		2		17
AA-3191190	HAMILTON RE LTD		25	0003		1		1	1		1	1		3		
AA-3190958	FLEMING INTL REINS LTD		51	0004		(175)								6		
AA-3610566	NEWPOINT REINS CO LTD				10,135	8,831		8,831	10,598	2,178	8,420	8,420		6		253
AA-5320039	PEAK REINS CO LTD		10,789	0008		16,017		16,017	19,221	5,228	13,993	10,789	3,203	4		324
AA-3191298	ANTARES REINS CO LTD		750	0014		379		379	455	9	446	446		4		13
AA-1780078	PARTNER REINS EUROPE SE													2		
AA-1780070	QBE REINS (EUROPE) LTD		3,925	0009		14		14	16		16	16		6		
AA-3770516	SPAR RE PIC LTD				4,321	7,277		7,277	8,732	2,959	5,773	4,321	1,452	6		130
AA-3191179	THIRD POINT REINS CO LTD		25	0010										6		
AA-3191295	THIRD POINT REINS (USA) LTD		25	0013										6		
AA-3770492	TOPSAIL REINS SPC LTD		4,681	0007		4,678		4,678	5,614	247	5,367	4,681	686	6		140
AA-3190859	ARIA (SAC) LTD					281		281	337		337			6		
AA-3191250	WATFORD RE LTD		175	0012		101		101	121		121	121		6		4
2699999	Total Unauthorized - Other Non-U.S. Insurers		23,875	XXX	14,456	38,322		38,497	46,196	10,805	35,391	30,027	5,364	XXX	895	363
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		33,657	XXX	40,850	168,429		168,604	202,325	119,950	82,375	66,204	16,170	XXX	1,980	1,660
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX										XXX		
3699999	Total Certified - Affiliates			XXX										XXX		
CR-1460019	MS AMLIN AG		843	0001		867		867	1,041	25	1,016	843	173	2		18
4099999	Total Certified - Other Non-U.S. Insurers		843	XXX		867		867	1,041	25	1,016	843	173	XXX		18
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		843	XXX		867		867	1,041	25	1,016	843	173	XXX		18
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX										XXX		
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX										XXX		
RJ-1126566	LLOYD'S SYNDICATE NUMBER 566 (INCIDENTAL TO 2999)													6		
RJ-1126609	LLOYD'S SYNDICATE NUMBER 609													6		
RJ-1126727	LLOYD'S SYNDICATE NUMBER 727													6		
RJ-1127414	LLOYD'S SYNDICATE NUMBER 1414													6		
RJ-1120106	LLOYD'S SYNDICATE NUMBER 1969													6		
RJ-1128121	LLOYD'S SYNDICATE NUMBER 2121													6		
RJ-1128987	LLOYD'S SYNDICATE NUMBER 2987													6		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk							
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
RJ-1460019	MS AMLIN AG		1,445	0001	4,541	2,805		7,346	8,815	3,096	5,719	1,445	4,274	2	30	90
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		1,445	XXX	4,541	2,805		7,346	8,815	3,096	5,719	1,445	4,274	XXX	30	90
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		1,445	XXX	4,541	2,805		7,346	8,815	3,096	5,719	1,445	4,274	XXX	30	90
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		39,445	XXX	347,981	250,316		598,620	718,343	282,824	435,520	84,835	350,685	XXX	2,518	10,895
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999	Totals		39,445	XXX	347,981	250,316		598,620	718,343	282,824	435,520	84,835	350,685	XXX	2,518	10,895

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
0499999. Total Authorized - Affiliates - U.S. Non-Pool																	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																	XXX
0899999. Total Authorized - Affiliates																	XXX
75-2701220 .. ACCO INS CO			5				5			5			100.0				YES
06-0237820 .. ACE PROP & CAS INS CO																	YES
34-1385465 .. AFFIRMATIVE INS CO																	YES
39-1173498 .. AMERICAN FAMILY CONNECT PROP & CAS I	5,657						5,657			5,657							YES
06-1430254 .. ARCH REINS CO																	YES
39-0712210 .. CHURCH MUT INS CO S I																	YES
31-0542366 .. THE CINCINNATI INS CO																	YES
38-2145898 .. DORINCO REINS CO	6,014	30					6,044			6,044			0.5				YES
42-0234980 .. EMPLOYERS MUT CAS CO																	YES
35-2293075 .. ENDURANCE ASSUR CORP	1,796		1				1,798			1,798			0.1				YES
62-1613506 .. FIRST ACCEPTANCE INS CO INC	470						470			470							YES
36-0901240 .. FIRST CHICAGO INS CO	296	167	178				345			641			53.9				YES
73-1507369 .. GHS INS CO																	YES
95-2769232 .. INSURANCE CO OF THE WEST	809						809			809							YES
61-0392792 .. KENTUCKY FARM BUR MUT INS CO																	YES
04-1543470 .. LIBERTY MUT INS CO	(1)						(1)			(1)							YES
06-1481194 .. MARKEL GLOBAL REINS CO	(1)	9					9			8			118.4				YES
75-1767545 .. MGA INS CO INC																	YES
75-2248748 .. MIDDLE STATES INS CO INC	250						250			250							YES
31-4259550 .. MOTORISTS MUT INS CO																	YES
25-0687550 .. NATIONAL UNION FIRE INS CO OF PITTSB													(6.7)				YES
02-0170490 .. NGM INS CO	139	17					17			156			11.0				YES
47-0698507 .. ODYSSEY REINS CO	1,540						1,540			1,540							YES
13-3031176 .. PARTNER REINS CO OF THE US	2						2			2			6.2				YES
30-0703280 .. RENAISSANCE EUROPE AG US BRANCH	(161)		1				(160)			(160)			(0.3)				YES
26-2465659 .. THE GEN AUTOMOBILE INS CO INC																	YES
75-1976074 .. US LLOYDS INS CO																	YES
13-1290712 .. XL REINS AMER INC																	YES
94-1590201 .. YOSEMITE INS CO																	YES
0999999. Total Authorized - Other U.S. Unaffiliated Insurers	16,808	229	179				408			17,216			2.4				XXX
AA-1460023 .. RENAISSANCE EUROPE AG																	YES
1299999. Total Authorized - Other Non-U.S. Insurers																	XXX
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	16,808	229	179				408			17,216			2.4				XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																	XXX
30-0708277 .. ORPHEUS RE LTD	798	1					1			799			0.1				YES
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.) - Other	798	1					1			799			0.1				XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)	798	1					1			799			0.1				XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
2299999	Total Unauthorized - Affiliates	798	1				799		799			0.1				XXX	
98-3398195	GRYPHON OA SERIES PROTECTED CELL	1,414					1,414		1,414							YES	
88-0510281	NATIONSBUILDERS INS CO															YES	
99-4512751	SIGO INCORPORATED CELL INC	84					84		84							YES	
99-1470424	TROFEE REINSURANCE COMPANY, LLC	294					294		294							YES	
65-0145688	UNITED AUTOMOBILE INS CO															YES	
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers	1,791					1,791		1,791							XXX	
AA-1460019	MS AML IN AG	5					5		5							YES	
AA-3191306	BLUEFIRE RE LTD	14					14		14							YES	
AA-1460018	CATLIN RE SWITZERLAND LTD	32					32		32							YES	
AA-3191190	HAMILTON RE LTD															YES	
AA-3190958	FLEMING INTL REINS LTD	(226)	12				(214)		(214)			(5.6)				YES	
AA-3610566	NEWPOINT REINS CO LTD	463					463		463							YES	
AA-5320039	PEAK REINS CO LTD	796					796		796							YES	
AA-3191298	ANTARES REINS CO LTD	15					15		15							YES	
AA-1780078	PARTNER REINS EUROPE SE															YES	
AA-1780070	QBE REINS (EUROPE) LTD															YES	
AA-3770516	SPAR RE PIC LTD															YES	
AA-3191179	THIRD POINT REINS CO LTD															YES	
AA-3191295	THIRD POINT REINS (USA) LTD															YES	
AA-3770492	TOPSAIL REINS SPC LTD	284					284		284							YES	
AA-3190859	ARIA (SAC) LTD															YES	
AA-3191250	WATFORD RE LTD	1					1		1							YES	
2699999	Total Unauthorized - Other Non-U.S. Insurers	1,384	12				1,396		1,396			0.9				XXX	
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	3,973	13				3,986		3,986			0.3				XXX	
3299999	Total Certified - Affiliates - U.S. Non-Pool															XXX	
3599999	Total Certified - Affiliates - Other (Non-U.S.)															XXX	
3699999	Total Certified - Affiliates															XXX	
CR-1460019	MS AML IN AG	48					48		48							YES	
4099999	Total Certified - Other Non-U.S. Insurers	48					48		48							XXX	
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	48					48		48							XXX	
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool															XXX	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)															XXX	
5099999	Total Reciprocal Jurisdiction - Affiliates															XXX	
RJ-1126566	LLOYD'S SYNDICATE NUMBER 566 (INCIDENTAL TO 2999)															YES	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50			
		37 Current	38 Overdue				42 Total Overdue Cols. 38+39 +40+41	43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)													
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days															
RJ-1126609 ..	LLOYD'S SYNDICATE NUMBER 609																				
RJ-1126727 ..	LLOYD'S SYNDICATE NUMBER 727																				
RJ-1127414 ..	LLOYD'S SYNDICATE NUMBER 1414																				
RJ-1120106 ..	LLOYD'S SYNDICATE NUMBER 1969																				
RJ-1128121 ..	LLOYD'S SYNDICATE NUMBER 2121																				
RJ-1128987 ..	LLOYD'S SYNDICATE NUMBER 2987																				
RJ-1460019 ..	MS AML IN AG	485						485			485										
5499999.	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers	485						485			485									XXX	
5699999.	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	485						485			485										XXX
5799999.	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	21,313	241	179				421			21,734			1.9							XXX
5899999.	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																				XXX
9999999	Totals	21,313	241	179				421			21,734			1.9							XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
75-2701220	ACCC INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
06-0237820	ACE PROP & CAS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34-1385465	AFFIRMATIVE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39-1173498	AMERICAN FAMILY CONNECT PROP & CAS I	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
06-1430254	ARCH REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
39-0712210	CHURCH MUT INS CO S I	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31-0542366	THE CINCINNATI INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
38-2145898	DORINCO REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35-2293075	ENDURANCE ASSUR CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
62-1613506	FIRST ACCEPTANCE INS CO INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
36-0901240	FIRST CHICAGO INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
73-1507369	GHS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
95-2769232	INSURANCE CO OF THE WEST	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
61-0392792	KENTUCKY FARM BUR MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
04-1543470	LIBERTY MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
06-1481194	MARKEL GLOBAL REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
75-1767545	MGA INS CO INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
75-2248748	MIDDLE STATES INS CO INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31-4259550	MOTORISTS MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
25-0687550	NATIONAL UNION FIRE INS CO OF PITTSB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
02-0170490	NGM INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-0698507	ODYSSEY REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-3031176	PARTNER REINS CO OF THE US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30-0703280	RENAISSANCE EUROPE AG US BRANCH	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
26-2465659	THE GEN AUTOMOBILE INS CO INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
75-1976074	US LLOYDS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-1290712	XL REINS AMER INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
94-1590201	YOSEMITE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460023	RENAISSANCE EUROPE AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1299999. Total Authorized - Other Non-U.S. Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
30-0708277	ORPHEUS RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.) - Other				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
2299999. Total Unauthorized - Affiliates																		
98-3398195	GRYPHON OA SERIES PROTECTED CELL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
88-0510281	NATIONSBUILDERS INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
99-4512751	SIGO INCORPORATED CELL INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
99-1470424	TROFEE REINSURANCE COMPANY, LLC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
65-0145688	UNITED AUTOMOBILE INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2399999. Total Unauthorized - Other U.S. Unaffiliated Insurers																		
AA-1460019	MS AMLIN AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191306	BLUEFIRE RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460018	CATLIN RE SWITZERLAND LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191190	HAMILTON RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190958	FLEMING INTL REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3610566	NEUPOINT REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5320039	PEAK REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191298	ANTARES REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1780078	PARTNER REINS EUROPE SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1780070	QBE REINS (EUROPE) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3770516	SPAR RE PIC LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191179	THIRD POINT REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191295	THIRD POINT REINS (USA) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3770492	TOPSAIL REINS SPC LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190859	ARIA (SAC) LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191250	WATFORD RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999. Total Unauthorized - Other Non-U.S. Insurers																		
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2599999 and 2699999)																		
3299999. Total Certified - Affiliates - U.S. Non-Pool																		
3599999. Total Certified - Affiliates - Other (Non-U.S.)																		
3699999. Total Certified - Affiliates																		
CR-1460019	MS AMLIN AG	3	03/08/2022	20.0		843	169	100.0	100.0		843							
4099999. Total Certified - Other Non-U.S. Insurers																		
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																		
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																		
5099999. Total Reciprocal Jurisdiction - Affiliates																		
RJ-1126566	LLOYD'S SYNDICATE NUMBER 566 (INCIDENTAL TO 2999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126609	LLOYD'S SYNDICATE NUMBER 609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1126727	LLOYD'S SYNDICATE NUMBER 727	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1127414	LLOYD'S SYNDICATE NUMBER 1414	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1120106	LLOYD'S SYNDICATE NUMBER 1969	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
RJ-1128121 ..	LLOYD'S SYNDICATE NUMBER 2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1128987 ..	LLOYD'S SYNDICATE NUMBER 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1460019 ..	MS AMLIN AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5499999.	Total Reciprocal Jurisdiction - Other Non-U. S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999.	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999.	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX			843		169	XXX	XXX							
5899999.	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX						XXX	XXX							
9999999	Totals			XXX			843		169	XXX	XXX							

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
0499999	Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX				XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX				XXX	XXX	
0899999	Total Authorized - Affiliates		XXX	XXX				XXX	XXX	
75-2701220	ACCC INS CO		XXX	XXX				XXX	XXX	
06-0237820	ACE PROP & CAS INS CO		XXX	XXX				XXX	XXX	
34-1385465	AFFIRMATIVE INS CO		XXX	XXX				XXX	XXX	
39-1173498	AMERICAN FAMILY CONNECT PROP & CAS I		XXX	XXX				XXX	XXX	
06-1430254	ARCH REINS CO		XXX	XXX				XXX	XXX	
39-0712210	CHURCH MUT INS CO S I		XXX	XXX				XXX	XXX	
31-0542366	THE CINCINNATI INS CO		XXX	XXX				XXX	XXX	
38-2145898	DORINCO REINS CO		XXX	XXX				XXX	XXX	
42-0234980	EMPLOYERS MUT CAS CO		XXX	XXX				XXX	XXX	
35-2293075	ENDURANCE ASSUR CORP		XXX	XXX				XXX	XXX	
62-1613506	FIRST ACCEPTANCE INS CO INC		XXX	XXX				XXX	XXX	
36-0901240	FIRST CHICAGO INS CO		XXX	XXX				XXX	XXX	
73-1507369	GHS INS CO		XXX	XXX				XXX	XXX	
95-2769232	INSURANCE CO OF THE WEST		XXX	XXX				XXX	XXX	
61-0392792	KENTUCKY FARM BUR MUT INS CO		XXX	XXX				XXX	XXX	
04-1543470	LIBERTY MUT INS CO		XXX	XXX				XXX	XXX	
06-1481194	MARKEL GLOBAL REINS CO		XXX	XXX				XXX	XXX	
75-1767545	MGA INS CO INC		XXX	XXX				XXX	XXX	
75-2248748	MIDDLE STATES INS CO INC		XXX	XXX				XXX	XXX	
31-4259550	MOTORISTS MUT INS CO		XXX	XXX				XXX	XXX	
25-0687550	NATIONAL UNION FIRE INS CO OF PITTSB		XXX	XXX				XXX	XXX	
02-0170490	NGM INS CO		XXX	XXX				XXX	XXX	
47-0698507	ODYSSEY REINS CO		XXX	XXX				XXX	XXX	
13-3031176	PARTNER REINS CO OF THE US		XXX	XXX				XXX	XXX	
30-0703280	RENAISSANCE EUROPE AG US BRANCH		XXX	XXX				XXX	XXX	
26-2465659	THE GEN AUTOMOBILE INS CO INC		XXX	XXX				XXX	XXX	
75-1976074	US LLOYDS INS CO		XXX	XXX				XXX	XXX	
13-1290712	XL REINS AMER INC		XXX	XXX				XXX	XXX	
94-1590201	YOSEMITE INS CO		XXX	XXX				XXX	XXX	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX				XXX	XXX	
AA-1460023	RENAISSANCE EUROPE AG		XXX	XXX				XXX	XXX	
1299999	Total Authorized - Other Non-U.S. Insurers		XXX	XXX				XXX	XXX	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX				XXX	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX		XXX	
30-0708277	ORPHEUS RE LTD				XXX	XXX	XXX		XXX	
2099999	Total Unauthorized - Affiliates - Other (Non-U.S.) - Other				XXX	XXX	XXX		XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance				
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ((Col. 47 * 20%) + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
											76	77	78
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX		XXX		
2299999	Total Unauthorized - Affiliates				XXX	XXX	XXX		XXX		
98-3398195	GRYPHON OA SERIES PROTECTED CELL				XXX	XXX	XXX		XXX		
88-0510281	NATIONSBUILDERS INS CO				XXX	XXX	XXX		XXX		
99-4512751	SIGO INCORPORATED CELL INC				XXX	XXX	XXX		XXX		
99-1470424	TROFEE REINSURANCE COMPANY, LLC				XXX	XXX	XXX		XXX		
65-0145688	UNITED AUTOMOBILE INS CO				XXX	XXX	XXX		XXX		
2399999	Total Unauthorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX		XXX		
AA-1460019	MS AML IN AG				XXX	XXX	XXX		XXX		
AA-3191306	BLUEFIRE RE LTD				XXX	XXX	XXX		XXX		
AA-1460018	CATLIN RE SWITZERLAND LTD				XXX	XXX	XXX		XXX		
AA-3191190	HAMILTON RE LTD				XXX	XXX	XXX		XXX		
AA-3190958	FLEMING INTL REINS LTD				XXX	XXX	XXX		XXX		
AA-3610566	NEWPOINT REINS CO LTD				XXX	XXX	XXX		XXX		
AA-5320039	PEAK REINS CO LTD				XXX	XXX	XXX		XXX		
AA-3191298	ANTARES REINS CO LTD				XXX	XXX	XXX		XXX		
AA-1780078	PARTNER REINS EUROPE SE				XXX	XXX	XXX		XXX		
AA-1780070	QBE REINS (EUROPE) LTD				XXX	XXX	XXX		XXX		
AA-3770516	SPAR RE PIC LTD				XXX	XXX	XXX		XXX		
AA-3191179	THIRD POINT REINS CO LTD				XXX	XXX	XXX		XXX		
AA-3191295	THIRD POINT REINS (USA) LTD				XXX	XXX	XXX		XXX		
AA-3770492	TOPSAIL REINS SPC LTD				XXX	XXX	XXX		XXX		
AA-3190859	ARIA (SAC) LTD				XXX	XXX	XXX		XXX		
AA-3191250	WATFORD RE LTD				XXX	XXX	XXX		XXX		
2699999	Total Unauthorized - Other Non-U.S. Insurers				XXX	XXX	XXX		XXX		
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX		XXX		
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
CR-1460019	MS AML IN AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4099999	Total Certified - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX					XXX	XXX	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX					XXX	XXX	
5099999	Total Reciprocal Jurisdiction - Affiliates		XXX	XXX					XXX	XXX	
RJ-1126566	LLOYD'S SYNDICATE NUMBER 566 (INCIDENTAL TO 2999)		XXX	XXX					XXX	XXX	
RJ-1126609	LLOYD'S SYNDICATE NUMBER 609		XXX	XXX					XXX	XXX	
RJ-1126727	LLOYD'S SYNDICATE NUMBER 727		XXX	XXX					XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
RJ-1127414 ..	LLOYD'S SYNDICATE NUMBER 1414 .....	.....	XXX.....	XXX.....	.....	.....	.....	XXX.....	XXX.....	.....
RJ-1120106 ..	LLOYD'S SYNDICATE NUMBER 1969 .....	.....	XXX.....	XXX.....	.....	.....	.....	XXX.....	XXX.....	.....
RJ-1128121 ..	LLOYD'S SYNDICATE NUMBER 2121 .....	.....	XXX.....	XXX.....	.....	.....	.....	XXX.....	XXX.....	.....
RJ-1128987 ..	LLOYD'S SYNDICATE NUMBER 2987 .....	.....	XXX.....	XXX.....	.....	.....	.....	XXX.....	XXX.....	.....
RJ-1460019 ..	MS AML IN AG .....	.....	XXX.....	XXX.....	.....	.....	.....	XXX.....	XXX.....	.....
5499999.	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		XXX	XXX				XXX	XXX	
5699999.	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX				XXX	XXX	
5799999.	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)									
5899999.	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)									
9999999	Totals									

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
0001	2	026002574	BARCLAYS BANK, PLC NEW YORK BRANCH	528
0001	2	981390502	LLOYDS BANK CORPORATE MARKETS PLC, NEW YORK BRANCH	528
0001	2	026007728	NATIONAL AUSTRALIA BANK LIMITED	480
0001	2	026007689	BNP PARIBAS, NEW YORK BRANCH	432
0001	2	026008044	COMMERZBANK, A.G.	432
0002	3	021000089	CITIBANK NA	1,819
0003	1	026007993	UBS AG, STANFORD BRANCH	25
0004	1	111000753	COMERICA BANK, DETROIT, MI	51
0005	1	021272778	MORGAN STANLEY	1,499
0006	3	111000753	COMERICA BANK, DETROIT, MI	7,658
0007	1	101000019	COMMERCE BANK	4,681
0008	1	026001591	STANDARD CHARTERED	8,973
0008	1	026008073	CREDIT AGRICOLE CORPORATE AND INVESTMENT BANK NY BRANCH	1,816
0009	1	021000089	CITIBANK NA	3,925
0010	1	021000089	CITIBANK NA	25
0011	1	111000753	COMERICA BANK, FARMINGTON HILLS, MI	2,124
0012	1	981390502	LLOYDS BANK CORPORATE MARKETS PLC, NEW YORK	175
0013	1	021000089	CITIBANK NA	25
0014	1	026009917	AUSTRALIA AND NEW ZEALAND BANKING GROUP LTD	750
0016	1	113011258	AMEGY BANK, TX	3,500
Total				39,445

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	1 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1.	UNITED AUTOMOBILE INS CO	27.750	58,050
2.	FIRST CHICAGO INS CO	27.000	2,970
3.	AMERICAN FAMILY CONNECT P&C INS CO	23.000	5,292
4.	INSURANCE COMPANY OF THE WEST	23.000	662
5.	PEAK REINSURANCE CO LTD	23.000	662

B. Report the five largest reinsurance recoverables reported in Schedule F, Part 3, Column 15, due from any one reinsurer (based on the total recoverables, Schedule F, Part 3, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6.	AMERICAN FAMILY CONNECT P&C INS CO	114,392	130,308	Yes [] No [X]
7.	DORINCO REINS CO	111,273	137,133	Yes [] No [X]
8.	THE GEN AUTOMOBILE INS CO INC	94,554	114,171	Yes [] No [X]
9.	UNITED AUTOMOBILE INS CO	74,338	58,049	Yes [] No [X]
10.	ENDURANCE ASSUR CORP	33,756	43,454	Yes [] No [X]

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	136,862,336		136,862,336
2. Premiums and considerations (Line 15)	166,719,347		166,719,347
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	21,733,939	(21,733,939)	
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	1,316,356		1,316,356
6. Net amount recoverable from reinsurers		293,902,686	293,902,686
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	326,631,978	272,168,747	598,800,725
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)		346,184,191	346,184,191
10. Taxes, expenses, and other obligations (Lines 4 through 8)	4,432,174		4,432,174
11. Unearned premiums (Line 9)		230,378,752	230,378,752
12. Advance premiums (Line 10)			
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	186,453,178	(186,453,178)	
15. Funds held by company under reinsurance treaties (Line 13)	117,941,019	(117,941,019)	
16. Amounts withheld or retained by company for account of others (Line 14)	11,057,475		11,057,475
17. Provision for reinsurance (Line 16)			
18. Other liabilities	1,748,133		1,748,133
19. Total liabilities excluding protected cell business (Line 26)	321,631,978	272,168,747	593,800,725
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	5,000,000	XXX	5,000,000
22. Totals (Line 38)	326,631,978	272,168,747	598,800,725

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

If yes, give full explanation:

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	63	63	12	12	3	3			XXX
2. 2015.....	336,430	336,571	(141)	240,092	240,092	4,602	4,602	24,999	24,999			XXX
3. 2016.....	371,350	371,495	(145)	280,877	280,877	5,132	5,132	30,076	30,076			XXX
4. 2017.....	373,676	373,831	(155)	246,751	246,751	3,766	3,766	32,713	32,713			XXX
5. 2018.....	361,626	361,802	(176)	222,558	222,558	4,399	4,399	25,985	25,985			XXX
6. 2019.....	352,802	352,982	(180)	220,806	220,806	4,078	4,078	25,265	25,265			XXX
7. 2020.....	293,335	293,515	(181)	166,587	166,587	4,150	4,150	21,395	21,395			XXX
8. 2021.....	293,104	293,275	(171)	210,215	210,215	3,568	3,568	22,130	22,130			XXX
9. 2022.....	317,160	317,335	(175)	227,792	227,792	2,822	2,822	22,968	22,968			XXX
10. 2023.....	429,479	429,689	(210)	243,138	243,138	1,730	1,730	29,642	29,642			XXX
11. 2024.....	632,191	632,570	(378)	163,460	163,460	963	963	34,977	34,977			XXX
12. Totals	XXX	XXX	XXX	2,222,338	2,222,338	35,221	35,221	270,154	270,154			XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	86	86	513	513			7	7	1	1			6
2. 2015.....	31	31	1	1	2	2	1	1					7
3. 2016.....	109	109	13	13	8	8	7	7	5	5			10
4. 2017.....	343	343	126	126	23	23	28	28	16	16			38
5. 2018.....	265	265	351	351	49	49	32	32	18	18			33
6. 2019.....	1,009	1,009	1,303	1,303	174	174	132	132	57	57			115
7. 2020.....	1,265	1,265	2,854	2,854	406	406	125	125	69	69			150
8. 2021.....	3,023	3,023	7,144	7,144	850	850	310	310	184	184			332
9. 2022.....	7,654	7,654	12,871	12,871	1,490	1,490	777	777	518	518			812
10. 2023.....	26,340	26,340	33,910	33,910	1,918	1,918	3,530	3,530	2,042	2,042			2,819
11. 2024.....	90,913	90,913	116,561	116,561	1,908	1,908	15,699	15,699	9,113	9,113			18,222
12. Totals	131,039	131,039	175,646	175,646	6,829	6,829	20,646	20,646	12,023	12,023			22,544

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015.....	269,729	269,729		80.2	80.1						
3. 2016.....	316,226	316,226		85.2	85.1						
4. 2017.....	283,765	283,765		75.9	75.9						
5. 2018.....	253,656	253,656		70.1	70.1						
6. 2019.....	252,824	252,824		71.7	71.6						
7. 2020.....	196,851	196,851		67.1	67.1						
8. 2021.....	247,423	247,423		84.4	84.4						
9. 2022.....	276,893	276,893		87.3	87.3						
10. 2023.....	342,250	342,250		79.7	79.7						
11. 2024.....	433,595	433,595		68.6	68.5						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	1											
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
12. Totals												

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024			
1. Prior.....	000											XXX	XXX
2. 2015.....												XXX	XXX
3. 2016.....	XXX											XXX	XXX
4. 2017.....	XXX	XXX										XXX	XXX
5. 2018.....	XXX	XXX	XXX									XXX	XXX
6. 2019.....	XXX	XXX	XXX	XXX								XXX	XXX
7. 2020.....	XXX	XXX	XXX	XXX	XXX							XXX	XXX
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						XXX	XXX
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												
3. 2016.....												
4. 2017.....												
5. 2018.....												
6. 2019.....												
7. 2020.....												
8. 2021.....												
9. 2022.....												
10. 2023.....												
11. 2024.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
12. Totals													

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2015.....											
3. 2016.....											
4. 2017.....											
5. 2018.....											
6. 2019.....											
7. 2020.....											
8. 2021.....											
9. 2022.....											
10. 2023.....											
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	90.....	90.....	11.....	11.....	3.....	3.....		XXX.....	
2. 2015.....	222,610.....	222,751.....	(141).....	170,531.....	170,531.....	4,151.....	4,151.....	18,061.....	18,061.....		89,024.....	
3. 2016.....	249,344.....	249,489.....	(145).....	193,590.....	193,590.....	4,454.....	4,454.....	21,210.....	21,210.....		106,489.....	
4. 2017.....	264,247.....	264,402.....	(155).....	183,305.....	183,305.....	3,385.....	3,385.....	23,310.....	23,310.....		95,509.....	
5. 2018.....	259,026.....	259,202.....	(176).....	172,221.....	172,221.....	4,040.....	4,040.....	19,221.....	19,221.....		89,922.....	
6. 2019.....	255,551.....	255,731.....	(180).....	172,754.....	172,754.....	3,633.....	3,633.....	18,857.....	18,857.....		59,031.....	
7. 2020.....	215,548.....	215,729.....	(181).....	132,585.....	132,585.....	3,784.....	3,784.....	16,280.....	16,280.....		40,853.....	
8. 2021.....	217,298.....	217,469.....	(171).....	163,765.....	163,765.....	3,069.....	3,069.....	16,913.....	16,913.....		44,242.....	
9. 2022.....	230,952.....	231,127.....	(175).....	171,403.....	171,403.....	2,417.....	2,417.....	17,114.....	17,114.....		43,347.....	
10. 2023.....	307,904.....	308,113.....	(210).....	168,879.....	168,879.....	1,324.....	1,324.....	21,569.....	21,569.....		50,755.....	
11. 2024.....	468,404.....	468,782.....	(378).....	94,575.....	94,575.....	605.....	605.....	26,505.....	26,505.....		60,669.....	
12. Totals.....	XXX.....	XXX.....	XXX.....	1,623,697.....	1,623,697.....	30,874.....	30,874.....	199,044.....	199,044.....		XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	86.....	86.....	513.....	513.....			7.....	7.....	1.....	1.....			6.....
2. 2015.....	31.....	31.....	1.....	1.....	2.....	2.....	1.....	1.....					7.....
3. 2016.....	109.....	109.....	13.....	13.....	8.....	8.....	7.....	7.....	5.....	5.....			10.....
4. 2017.....	343.....	343.....	126.....	126.....	23.....	23.....	28.....	28.....	16.....	16.....			38.....
5. 2018.....	261.....	261.....	351.....	351.....	44.....	44.....	32.....	32.....	18.....	18.....			31.....
6. 2019.....	1,009.....	1,009.....	1,303.....	1,303.....	174.....	174.....	132.....	132.....	57.....	57.....			115.....
7. 2020.....	1,263.....	1,263.....	2,854.....	2,854.....	406.....	406.....	125.....	125.....	69.....	69.....			150.....
8. 2021.....	3,015.....	3,015.....	7,135.....	7,135.....	821.....	821.....	309.....	309.....	183.....	183.....			330.....
9. 2022.....	7,649.....	7,649.....	13,250.....	13,250.....	1,346.....	1,346.....	776.....	776.....	517.....	517.....			811.....
10. 2023.....	26,113.....	26,113.....	35,053.....	35,053.....	1,819.....	1,819.....	3,509.....	3,509.....	2,012.....	2,012.....			2,785.....
11. 2024.....	83,374.....	83,374.....	113,104.....	113,104.....	1,684.....	1,684.....	15,060.....	15,060.....	8,034.....	8,034.....			16,079.....
12. Totals.....	123,254.....	123,254.....	173,702.....	173,702.....	6,328.....	6,328.....	19,985.....	19,985.....	10,912.....	10,912.....			20,362.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	192,779.....	192,779.....		86.6.....	86.5.....						
3. 2016.....	219,394.....	219,394.....		88.0.....	87.9.....						
4. 2017.....	210,535.....	210,535.....		79.7.....	79.6.....						
5. 2018.....	196,188.....	196,188.....		75.7.....	75.7.....						
6. 2019.....	197,919.....	197,919.....		77.4.....	77.4.....						
7. 2020.....	157,367.....	157,367.....		73.0.....	72.9.....						
8. 2021.....	195,210.....	195,210.....		89.8.....	89.8.....						
9. 2022.....	214,473.....	214,473.....		92.9.....	92.8.....						
10. 2023.....	260,278.....	260,278.....		84.5.....	84.5.....						
11. 2024.....	342,942.....	342,942.....		73.2.....	73.2.....						
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		

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

N O N E

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

N O N E

Schedule P - Part 1E - Commercial Multiple Peril

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 1H - Section 1 - Other Liability - Occurrence

N O N E

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made

N O N E

Schedule P - Part 1I - Special Property (Fire, Allied Lines...)

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(26).....	(26).....	1.....	1.....					XXX.....
2. 2015.....	113,820.....	113,820.....		69,561.....	69,561.....	451.....	451.....	6,938.....	6,938.....			25,753.....
3. 2016.....	122,006.....	122,006.....		87,287.....	87,287.....	678.....	678.....	8,866.....	8,866.....			34,977.....
4. 2017.....	109,429.....	109,429.....		63,446.....	63,446.....	381.....	381.....	9,403.....	9,403.....			24,590.....
5. 2018.....	102,600.....	102,600.....		50,336.....	50,336.....	358.....	358.....	6,764.....	6,764.....			18,028.....
6. 2019.....	97,251.....	97,251.....		48,052.....	48,052.....	445.....	445.....	6,408.....	6,408.....			11,867.....
7. 2020.....	77,786.....	77,786.....		34,002.....	34,002.....	365.....	365.....	5,115.....	5,115.....			10,047.....
8. 2021.....	75,806.....	75,806.....		46,450.....	46,450.....	499.....	499.....	5,217.....	5,217.....			17,200.....
9. 2022.....	86,208.....	86,208.....		56,389.....	56,389.....	405.....	405.....	5,854.....	5,854.....			18,266.....
10. 2023.....	121,575.....	121,575.....		74,259.....	74,259.....	406.....	406.....	8,074.....	8,074.....			23,566.....
11. 2024.....	163,787.....	163,787.....		68,886.....	68,886.....	357.....	357.....	8,472.....	8,472.....			25,509.....
12. Totals.....	XXX.....	XXX.....	XXX.....	598,641.....	598,641.....	4,347.....	4,347.....	71,111.....	71,111.....			XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....	5.....	5.....			5.....	5.....							2.....
6. 2019.....													
7. 2020.....	2.....	2.....											
8. 2021.....	9.....	9.....	8.....	8.....	29.....	29.....	1.....	1.....	1.....	1.....			2.....
9. 2022.....	5.....	5.....	(379).....	(379).....	143.....	143.....	1.....	1.....	1.....	1.....			1.....
10. 2023.....	226.....	226.....	(1,143).....	(1,143).....	99.....	99.....	21.....	21.....	30.....	30.....			34.....
11. 2024.....	7,539.....	7,539.....	3,458.....	3,458.....	224.....	224.....	638.....	638.....	1,079.....	1,079.....			2,143.....
12. Totals.....	7,785.....	7,785.....	1,944.....	1,944.....	501.....	501.....	661.....	661.....	1,111.....	1,111.....			2,182.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	76,950.....	76,950.....		67.6.....	67.6.....						
3. 2016.....	96,832.....	96,832.....		79.4.....	79.4.....						
4. 2017.....	73,230.....	73,230.....		66.9.....	66.9.....						
5. 2018.....	57,468.....	57,468.....		56.0.....	56.0.....						
6. 2019.....	54,905.....	54,905.....		56.5.....	56.5.....						
7. 2020.....	39,484.....	39,484.....		50.8.....	50.8.....						
8. 2021.....	52,214.....	52,214.....		68.9.....	68.9.....						
9. 2022.....	62,420.....	62,420.....		72.4.....	72.4.....						
10. 2023.....	81,972.....	81,972.....		67.4.....	67.4.....						
11. 2024.....	90,653.....	90,653.....		55.3.....	55.3.....						
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		

Schedule P - Part 1K - Fidelity/Surety

NONE

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

NONE

Schedule P - Part 1M - International

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence

NONE

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

NONE

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

NONE

Schedule P - Part 1T - Warranty

NONE

Schedule P - Part 1U - Pet Insurance Plans

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....	1											
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

NONE

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

NONE

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

NONE

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

NONE

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

NONE

Schedule P - Part 2I - Special Property

NONE

Schedule P - Part 2J - Auto Physical Damage

NONE

Schedule P - Part 2K - Fidelity/Surety

NONE

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 2M - International

NONE

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

NONE

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

N O N E

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 2T - Warranty

N O N E

Schedule P - Part 2U - Pet Insurance Plans

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024			
1. Prior.....	000.....												
2. 2015.....													
3. 2016.....	XXX.....												
4. 2017.....	XXX.....	XXX.....											
5. 2018.....	XXX.....	XXX.....	XXX.....										
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....											39,508	8,313
2. 2015.....												43,549	45,468
3. 2016.....	XXX.....											51,512	54,967
4. 2017.....	XXX.....	XXX.....										46,963	48,508
5. 2018.....	XXX.....	XXX.....	XXX.....									39,870	50,021
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								27,794	31,122
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							22,108	18,595
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						23,628	20,284
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					22,654	19,882
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				24,493	23,477
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		20,521	24,069

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

1. Prior.....	000.....												
2. 2015.....													
3. 2016.....	XXX.....												
4. 2017.....	XXX.....	XXX.....											
5. 2018.....	XXX.....	XXX.....	XXX.....										
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....												
2. 2015.....													
3. 2016.....	XXX.....												
4. 2017.....	XXX.....	XXX.....											
5. 2018.....	XXX.....	XXX.....	XXX.....										
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....												
2. 2015.....													
3. 2016.....	XXX.....												
4. 2017.....	XXX.....	XXX.....											
5. 2018.....	XXX.....	XXX.....	XXX.....										
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024			
1. Prior.....	000.....												
2. 2015.....													
3. 2016.....	XXX.....												
4. 2017.....	XXX.....	XXX.....											
5. 2018.....	XXX.....	XXX.....	XXX.....										
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....												
2. 2015.....													
3. 2016.....	XXX.....												
4. 2017.....	XXX.....	XXX.....											
5. 2018.....	XXX.....	XXX.....	XXX.....										
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 2015.....												XXX.....	XXX.....
3. 2016.....	XXX.....											XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

NONE

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

1. Prior.....	000.....												
2. 2015.....													
3. 2016.....	XXX.....												
4. 2017.....	XXX.....	XXX.....											
5. 2018.....	XXX.....	XXX.....	XXX.....										
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

1. Prior.....	000.....												
2. 2015.....													
3. 2016.....	XXX.....												
4. 2017.....	XXX.....	XXX.....											
5. 2018.....	XXX.....	XXX.....	XXX.....										
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior	000										XXX	XXX
2. 2015											XXX	XXX
3. 2016	XXX										XXX	XXX
4. 2017	XXX	XXX									XXX	XXX
5. 2018	XXX	XXX	XXX								XXX	XXX
6. 2019	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	000										26,058	(1)
2. 2015											25,754	(1)
3. 2016	XXX										34,945	32
4. 2017	XXX	XXX									24,548	42
5. 2018	XXX	XXX	XXX								17,975	51
6. 2019	XXX	XXX	XXX	XXX							11,787	80
7. 2020	XXX	XXX	XXX	XXX	XXX						9,267	780
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					10,288	6,910
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				10,392	7,873
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			13,855	9,677
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,306	10,060

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	000										XXX	XXX
2. 2015											XXX	XXX
3. 2016	XXX										XXX	XXX
4. 2017	XXX	XXX									XXX	XXX
5. 2018	XXX	XXX	XXX								XXX	XXX
6. 2019	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

1. Prior	000										XXX	XXX
2. 2015											XXX	XXX
3. 2016	XXX										XXX	XXX
4. 2017	XXX	XXX									XXX	XXX
5. 2018	XXX	XXX	XXX								XXX	XXX
6. 2019	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior	000										XXX	XXX
2. 2015											XXX	XXX
3. 2016	XXX										XXX	XXX
4. 2017	XXX	XXX									XXX	XXX
5. 2018	XXX	XXX	XXX								XXX	XXX
6. 2019	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

N O N E

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made

N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 3T - Warranty

N O N E

Schedule P - Part 3U - Pet Insurance Plans

N O N E

Schedule P - Part 4A - Homeowners/Farmowners

N O N E

Schedule P - Part 4B - Private Passenger Auto Liability/Medical

N O N E

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical

N O N E

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)

N O N E

Schedule P - Part 4E - Commercial Multiple Peril

N O N E

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made

NONE

Schedule P - Part 4G - Special Liability

NONE

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

NONE

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

NONE

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J - Auto Physical Damage

NONE

Schedule P - Part 4K - Fidelity/Surety

NONE

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 4M - International

NONE

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 4T - Warranty

N O N E

Schedule P - Part 4U - Pet Insurance Plans

N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 1

N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 2

N O N E

Schedule P - Part 5A - Homeowners/Farmowners - Section 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	14,726	13,059	11,463	9,911	4,952	48	27	20	19	9
2. 2015.....	23,290	31,526	36,886	41,929	43,349	43,398	43,473	43,517	43,529	43,549
3. 2016.....	XXX	25,246	35,849	45,813	50,987	51,216	51,362	51,442	51,487	51,512
4. 2017.....	XXX	XXX	19,960	33,106	46,164	46,573	46,789	46,893	46,939	46,963
5. 2018.....	XXX	XXX	XXX	22,254	37,310	38,868	39,479	39,723	39,827	39,870
6. 2019.....	XXX	XXX	XXX	XXX	17,713	24,561	26,852	27,430	27,681	27,794
7. 2020.....	XXX	XXX	XXX	XXX	XXX	14,315	20,008	21,511	21,902	22,108
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	14,501	21,270	23,121	23,628
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,778	20,691	22,654
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,009	24,493
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,521

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	3,464	1,624	358	92	51	84	58	30	11	6
2. 2015.....	12,353	2,586	445	174	69	161	90	40	21	7
3. 2016.....	XXX	14,018	2,822	618	337	328	166	88	37	10
4. 2017.....	XXX	XXX	9,499	2,563	1,528	479	239	128	72	38
5. 2018.....	XXX	XXX	XXX	10,119	2,420	1,040	444	191	72	31
6. 2019.....	XXX	XXX	XXX	XXX	9,714	3,175	1,014	474	220	115
7. 2020.....	XXX	XXX	XXX	XXX	XXX	8,450	2,069	743	367	150
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	10,298	2,362	854	330
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,483	2,720	811
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,103	2,785
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,079

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	11,277	19,559	16,921	16,490	9,586	96	1			2
2. 2015.....	63,061	67,808	75,173	83,997	88,870	89,020	89,021	89,021	89,021	89,024
3. 2016.....	XXX	66,883	76,910	92,679	106,248	106,481	106,485	106,487	106,488	106,489
4. 2017.....	XXX	XXX	53,196	70,416	96,102	95,494	95,503	95,507	95,509	95,509
5. 2018.....	XXX	XXX	XXX	63,177	89,707	89,881	89,910	89,918	89,918	89,922
6. 2019.....	XXX	XXX	XXX	XXX	54,551	58,748	58,954	59,002	59,016	59,031
7. 2020.....	XXX	XXX	XXX	XXX	XXX	38,360	40,601	40,806	40,840	40,853
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	40,968	43,951	44,194	44,242
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40,151	43,082	43,347
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	47,189	50,755
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	60,669

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 1

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 2

N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 3

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

NONE

Schedule P - Part 5H - Other Liability - Occurrence - Section 1A

NONE

Schedule P - Part 5H - Other Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5H - Other Liability - Occurrence - Section 3A

NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

NONE

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 5T - Warranty - Section 1

NONE

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 6E - Commercial Multiple Peril - Section 1

N O N E

Schedule P - Part 6E - Commercial Multiple Peril - Section 2

N O N E

Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

N O N E

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

N O N E

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

N O N E

Schedule P - Part 6M - International - Section 1

N O N E

Schedule P - Part 6M - International - Section 2

N O N E

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A

NONE

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A

NONE

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B

NONE

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

SCHEDULE P INTERROGATORIES

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

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior .....	.....	.....
1.602	2015 .....	.....	.....
1.603	2016 .....	.....	.....
1.604	2017 .....	.....	.....
1.605	2018 .....	.....	.....
1.606	2019 .....	.....	.....
1.607	2020 .....	.....	.....
1.608	2021 .....	.....	.....
1.609	2022 .....	.....	.....
1.610	2023 .....	.....	.....
1.611	2024 .....	.....	.....
1.612	Totals	.....	.....

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
 Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums in force at the end of the year for:
 (in thousands of dollars) 5.1 Fidelity
 5.2 Surety
6. Claim count information is reported per claim or per claimant (Indicate which) per claimant.....
 If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]
- 7.2 (An extended statement may be attached.)

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. District of Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	L	724,520,689	676,636,103	322,445,467	378,772,758	306,685,487		
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							
59. Totals	XXX	724,520,689	676,636,103		322,445,467	378,772,758	306,685,487		
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX								
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX								

(a) Active Status Counts:

- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1
- 2. R - Registered - Non-domiciled RRGs.....
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI).....
- 4. Q - Qualified - Qualified or accredited reinsurer.....
- 5. D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile.....
- 6. N - None of the above - Not allowed to write business in the state..... 56

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

The Company writes in only one state, Texas, and premiums are allocated as such.

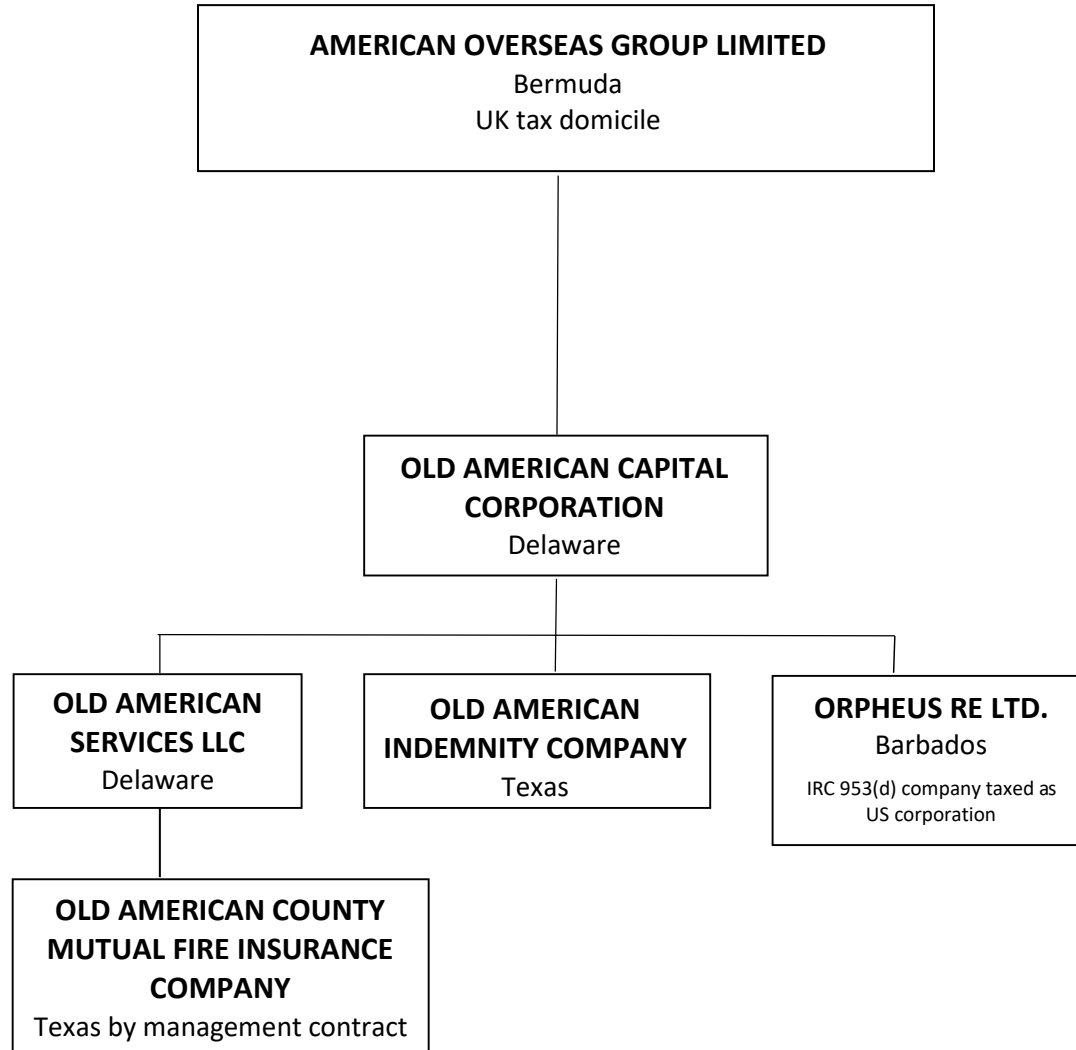
**SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

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

NONE

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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 Loca-tion	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 Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0000 ...	.....	. 00000 .....	.....	.....	.....	BERMUDA STOCK EXCHANGE ..	AMERICAN OVERSEAS GROUP LTD .....	. BMJ	UIP .....	.....	.....	.....	AMERICAN OVERSEAS GROUP LTD .....	.. NO .....	.....
. 0000 ...	.....	. 00000	27-2941857 ..	.....	.....	.....	OLD AMERICAN CAPITAL CORPORATION .....	. DE	UDP	AMERICAN OVERSEAS GROUP LTD	Ownership.....	100.000	AMERICAN OVERSEAS GROUP LTD .....	.. NO .....	.....
. 0000 ...	.....	. 00000	27-2941985 ..	.....	.....	.....	OLD AMERICAN SERVICES LLC .....	. DE	NIA	OLD AMERICAN CAPITAL CORPORATION	Ownership.....	100.000	AMERICAN OVERSEAS GROUP LTD .....	.. NO .....	.....
. 4762 ...	ORPHEUS GROUP LTD .....	. 29378	75-0728676 ..	.....	.....	.....	OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY .....	. TX	RE	OLD AMERICAN SERVICES LLC	Management.....	.....	AMERICAN OVERSEAS GROUP LTD .....	.. NO .....	.....
. 4762 ...	ORPHEUS GROUP LTD .....	. 11665	61-0533007 ..	.....	.....	.....	OLD AMERICAN INDEMNITY COMPANY .....	. TX	IA	OLD AMERICAN CAPITAL CORPORATION	Ownership.....	100.000	AMERICAN OVERSEAS GROUP LTD .....	.. NO .....	.....
. 0000 ...	.....	. 00000	30-0708277 ..	.....	.....	.....	ORPHEUS RE LTD .....	. BRB	IA	OLD AMERICAN CAPITAL CORPORATION	Ownership.....	100.000	AMERICAN OVERSEAS GROUP LTD .....	.. NO .....	.....

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	27-2941857	OLD AMERICAN CAPITAL CORPORATION		(5,750,000)							(5,750,000)	
00000	27-2941985	OLD AMERICAN SERVICES LLC					18,566,145				18,566,145	
29378	75-0728676	OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY					(14,918,400)	(1,072,107)			(15,990,508)	21,441,850
11665	61-0533007	OLD AMERICAN INDEMNITY COMPANY		5,750,000			(3,647,745)	(342,038)			1,760,217	8,921,367
00000	30-0708277	ORPHEUS RE LTD						1,414,145			1,414,145	(30,363,217)
9999999 Control Totals												
									XXX			

SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

1	2	3	4	5	6	7	8
Insurers in Holding Company	Owners with Greater Than 10% Ownership	Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control Affiliation of Column 2 Over Column 1 (Yes/No)	Ultimate Controlling Party	U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control Affiliation of Column 5 Over Column 6 (Yes/No)
OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY	ORPHEUS GROUP LTD	100.000	NO.....
OLD AMERICAN INDEMNITY COMPANY	OLD AMERICAN CAPITAL CORPORATION	100.000	NO.....	AMERICAN OVERSEAS GROUP LTD	ORPHEUS GROUP LTD	100.000	NO.....
ORPHEUS RE LTD	OLD AMERICAN CAPITAL CORPORATION	100.000	NO.....	AMERICAN OVERSEAS GROUP LTD
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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

MARCH FILING

- | | Responses |
|---|-----------------|
| 1. Will an actuarial opinion be filed by March 1? | YES |
| 2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? | YES |
| 3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? | SEE EXPLANATION |
| 4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? | SEE EXPLANATION |

APRIL FILING

- | | |
|--|-----|
| 5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? | YES |
| 6. Will Management's Discussion and Analysis be filed by April 1? | YES |
| 7. Will the Supplemental Investment Risk Interrogatories be filed by April 1? | YES |

MAY FILING

- | | |
|--|-----|
| 8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1? | YES |
|--|-----|

JUNE FILING

- | | |
|--|-----|
| 9. Will an audited financial report be filed by June 1? | YES |
| 10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? | YES |

SUPPLEMENTAL FILINGS

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

MARCH FILING

- | | |
|--|-----|
| 11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | NO |
| 12. Will the Financial Guaranty Insurance Exhibit be filed by March 1? | NO |
| 13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | NO |
| 14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? | NO |
| 15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? | NO |
| 16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? | NO |
| 17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? ... | YES |
| 18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?.. | YES |
| 20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? | YES |
| 21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? | NO |
| 22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? | NO |
| 25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | NO |
| 26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | NO |
| 27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1? | NO |
| 28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1? | NO |
| 29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1? | YES |

APRIL FILING

- | | |
|--|----|
| 30. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? | NO |
| 31. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? | NO |
| 32. Will the Accident and Health Policy Experience Exhibit be filed by April 1? | NO |
| 33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1? | NO |
| 34. Will the Cybersecurity Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? | NO |
| 35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? | NO |
| 36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? | NO |
| 37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1? | NO |

AUGUST FILING

- | | |
|--|-----|
| 38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? | YES |
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Explanations:

- | |
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| 3. The Company's minimum surplus is determined by the Texas Insurance Code or Regulation and is not subject to the NAIC RBC. |
| 4. The Company's minimum surplus is determined by the Texas Insurance Code or Regulation and is not subject to the NAIC RBC. |

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Bar Codes:

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| 11. SIS Stockholder Information Supplement [Document Identifier 420] |
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| 12. Financial Guaranty Insurance Exhibit [Document Identifier 240] |
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| 13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360] |
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| 14. Supplement A to Schedule T [Document Identifier 455] |
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| 15. Trusteed Surplus Statement [Document Identifier 490] |
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| 16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385] |
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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

18. Medicare Part D Coverage Supplement [Document Identifier 365]



21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]



22. Bail Bond Supplement [Document Identifier 500]



23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]



24. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]



25. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]



26. Relief from the Requirements for Audit Committees [Document Identifier 226]



27. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]



28. Exhibit of Other Liabilities by Lines of Business [Document Identifier 570]



30. Credit Insurance Experience Exhibit [Document Identifier 230]



31. Long-Term Care Experience Reporting Forms [Document Identifier 306]



32. Accident and Health Policy Experience Exhibit [Document Identifier 210]



33. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]



34. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]



35. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]



36. Private Flood Insurance Supplement [Document Identifier 560]



37. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



NONE

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 13	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage of Column 5 Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. governments	24,849,706	18.157	24,849,706		24,849,706	18.157
1.02 All other governments		0.000				0.000
1.03 U.S. states, territories and possessions, etc. guaranteed	900,001	0.658	900,001		900,001	0.658
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed	8,048,909	5.881	8,048,909		8,048,909	5.881
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed	7,317,596	5.347	7,317,596		7,317,596	5.347
1.06 Industrial and miscellaneous	60,290,311	44.052	60,290,311		60,290,311	44.052
1.07 Hybrid securities		0.000				0.000
1.08 Parent, subsidiaries and affiliates		0.000				0.000
1.09 SVO identified funds		0.000				0.000
1.10 Unaffiliated bank loans		0.000				0.000
1.11 Unaffiliated certificates of deposit		0.000				0.000
1.12 Total long-term bonds	101,406,523	74.094	101,406,523		101,406,523	74.094
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)		0.000				0.000
2.02 Parent, subsidiaries and affiliates		0.000				0.000
2.03 Total preferred stocks		0.000				0.000
3. Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)		0.000				0.000
3.02 Industrial and miscellaneous Other (Unaffiliated)		0.000				0.000
3.03 Parent, subsidiaries and affiliates Publicly traded		0.000				0.000
3.04 Parent, subsidiaries and affiliates Other		0.000				0.000
3.05 Mutual funds		0.000				0.000
3.06 Unit investment trusts		0.000				0.000
3.07 Closed-end funds		0.000				0.000
3.08 Exchange traded funds		0.000				0.000
3.09 Total common stocks		0.000				0.000
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages		0.000				0.000
4.02 Residential mortgages		0.000				0.000
4.03 Commercial mortgages		0.000				0.000
4.04 Mezzanine real estate loans		0.000				0.000
4.05 Total valuation allowance		0.000				0.000
4.06 Total mortgage loans		0.000				0.000
5. Real estate (Schedule A):						
5.01 Properties occupied by company		0.000				0.000
5.02 Properties held for production of income		0.000				0.000
5.03 Properties held for sale		0.000				0.000
5.04 Total real estate		0.000				0.000
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)	33,956,829	24.811	33,956,829		33,956,829	24.811
6.02 Cash equivalents (Schedule E, Part 2)		0.000				0.000
6.03 Short-term investments (Schedule DA)	1,498,984	1.095	1,498,984		1,498,984	1.095
6.04 Total cash, cash equivalents and short-term investments	35,455,813	25.906	35,455,813		35,455,813	25.906
7. Contract loans		0.000				0.000
8. Derivatives (Schedule DB)		0.000				0.000
9. Other invested assets (Schedule BA)		0.000				0.000
10. Receivables for securities		0.000				0.000
11. Securities Lending (Schedule DL, Part 1).....		0.000		XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11)		0.000				0.000
13. Total invested assets	136,862,336	100.000	136,862,336		136,862,336	100.000

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1. Book/adjusted carrying value, December 31 of prior year
2. Cost of acquired:
 - 2.1 Actual cost at time of acquisition (Part 2, Column 6)
 - 2.2 Additional investment made after acquisition (Part 2, Column 9)
3. Current year change in encumbrances:
 - 3.1 Totals, Part 1, Column 13
 - 3.2 Totals, Part 3, Column 11
4. Total gain (loss) on disposals, Part 3, Column 18
5. Deduct amounts received on disposals, Part 3, Column 15
6. Total foreign exchange change in book/adjusted carrying value:
 - 6.1 Totals, Part 1, Column 15
 - 6.2 Totals, Part 3, Column 13
7. Deduct current year's other-than-temporary impairment recognized:
 - 7.1 Totals, Part 1, Column 12
 - 7.2 Totals, Part 3, Column 10
8. Deduct current year's depreciation:
 - 8.1 Totals, Part 1, Column 11
 - 8.2 Totals, Part 3, Column 9
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 BETWEEN YEARS

Mortgage Loans

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 (Part 2, Column 7)
 - 2.2 Additional investment made after acquisition (Part 2, Column 8)
3. Capitalized deferred interest and other:
 - 3.1 Totals, Part 1, Column 12
 - 3.2 Totals, Part 3, Column 11
4. Accrual of discount
5. Unrealized valuation increase/(decrease):
 - 5.1 Totals, Part 1, Column 9
 - 5.2 Totals, Part 3, Column 8
6. Total gain (loss) on disposals, Part 3, Column 18
7. Deduct amounts received on disposals, Part 3, Column 15
8. Deduct amortization of premium and mortgage interest points and commitment fees
9. Total foreign exchange change in book value/recorded investment excluding accrued interest:
 - 9.1 Totals, Part 1, Column 13
 - 9.2 Totals, Part 3, Column 13
10. Deduct current year's other-than-temporary impairment recognized:
 - 10.1 Totals, Part 1, Column 11
 - 10.2 Totals, Part 3, Column 10
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 of mortgages owned at end of current period (Line 13 minus Line 14)

NONE

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year	
2.	Cost of acquired:	
	2.1 Actual cost at time of acquisition (Part 2, Column 8)	
	2.2 Additional investment made after acquisition (Part 2, Column 9)	
3.	Capitalized deferred interest and other:	
	3.1 Totals, Part 1, Column 16	
	3.2 Totals, Part 3, Column 12	
4.	Accrual of discount	
5.	Unrealized valuation increase/(decrease):	
	5.1 Totals, Part 1, Column 13	
	5.2 Totals, Part 3, Column 9	
6.	Total gain (loss) on disposals, Part 3, Column 19	
7.	Deduct amounts received on disposals, Part 3, Column 16	
8.	Deduct amortization of premium and depreciation	
9.	Total foreign exchange change in book/adjusted carrying value:	
	9.1 Totals, Part 1, Column 17	
	9.2 Totals, Part 3, Column 14	
10.	Deduct current year's other-than-temporary impairment recognized:	
	10.1 Totals, Part 1, Column 15	
	10.2 Totals, Part 3, Column 11	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year	101,505,820
2.	Cost of bonds and stocks acquired, Part 3, Column 7	15,059,815
3.	Accrual of discount	599,509
4.	Unrealized valuation increase/(decrease):	
	4.1. Part 1, Column 12	
	4.2. Part 2, Section 1, Column 15	
	4.3. Part 2, Section 2, Column 13	
	4.4. Part 4, Column 11	
5.	Total gain (loss) on disposals, Part 4, Column 19	
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	15,703,375
7.	Deduct amortization of premium	55,246
8.	Total foreign exchange change in book/adjusted carrying value:	
	8.1. Part 1, Column 15	
	8.2. Part 2, Section 1, Column 19	
	8.3. Part 2, Section 2, Column 16	
	8.4. Part 4, Column 15	
9.	Deduct current year's other-than-temporary impairment recognized:	
	9.1. Part 1, Column 14	
	9.2. Part 2, Section 1, Column 17	
	9.3. Part 2, Section 2, Column 14	
	9.4. Part 4, Column 13	
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	101,406,523
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	101,406,523

SCHEDULE D - SUMMARY BY COUNTRY

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

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States	24,849,706	24,929,303	24,742,470	25,070,389
	2. Canada				
	3. Other Countries				
	4. Totals	24,849,706	24,929,303	24,742,470	25,070,389
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals	900,001	844,284	900,048	900,000
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals	8,048,909	7,846,791	7,903,439	8,540,000
U.S. Special Revenue and Special Assessment Obligations and all Non- Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7. Totals	7,317,596	7,036,960	7,292,539	7,883,192
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans, Unaffiliated Certificates of Deposit and Hybrid Securities (unaffiliated)	8. United States	60,290,311	60,078,829	59,761,448	61,135,192
	9. Canada				
	10. Other Countries				
	11. Totals	60,290,311	60,078,829	59,761,448	61,135,192
Parent, Subsidiaries and Affiliates	12. Totals				
	13. Total Bonds	101,406,523	100,736,168	100,599,943	103,528,773
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States				
	15. Canada				
	16. Other Countries				
	17. Totals				
Parent, Subsidiaries and Affiliates	18. Totals				
	19. Total Preferred Stocks				
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds	20. United States				
	21. Canada				
	22. Other Countries				
	23. Totals				
Parent, Subsidiaries and Affiliates	24. Totals				
	25. Total Common Stocks				
	26. Total Stocks				
	27. Total Bonds and Stocks	101,406,523	100,736,168	100,599,943	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 1A - SECTION 1

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments												
1.1 NAIC 1	12,647,046	13,499,224	140,400	58,773	3,247	XXX	26,348,690	25.6	29,664,292	28.7	26,348,690	
1.2 NAIC 2						XXX						
1.3 NAIC 3						XXX						
1.4 NAIC 4						XXX						
1.5 NAIC 5						XXX						
1.6 NAIC 6						XXX						
1.7 Totals	12,647,046	13,499,224	140,400	58,773	3,247	XXX	26,348,690	25.6	29,664,292	28.7	26,348,690	
2. All Other Governments												
2.1 NAIC 1						XXX						
2.2 NAIC 2						XXX						
2.3 NAIC 3						XXX						
2.4 NAIC 4						XXX						
2.5 NAIC 5						XXX						
2.6 NAIC 6						XXX						
2.7 Totals						XXX						
3. U.S. States, Territories and Possessions etc., Guaranteed												
3.1 NAIC 1	125,001	775,000				XXX	900,001	0.9	900,010	0.9	900,001	
3.2 NAIC 2						XXX						
3.3 NAIC 3						XXX						
3.4 NAIC 4						XXX						
3.5 NAIC 5						XXX						
3.6 NAIC 6						XXX						
3.7 Totals	125,001	775,000				XXX	900,001	0.9	900,010	0.9	900,001	
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1 NAIC 1	927,148	3,401,942	3,656,625	63,193		XXX	8,048,908	7.8	7,162,907	6.9	8,048,908	
4.2 NAIC 2						XXX						
4.3 NAIC 3						XXX						
4.4 NAIC 4						XXX						
4.5 NAIC 5						XXX						
4.6 NAIC 6						XXX						
4.7 Totals	927,148	3,401,942	3,656,625	63,193		XXX	8,048,908	7.8	7,162,907	6.9	8,048,908	
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1	736,003	3,724,256	2,008,256	732,340	116,741	XXX	7,317,596	7.1	5,736,264	5.5	7,317,596	
5.2 NAIC 2						XXX						
5.3 NAIC 3						XXX						
5.4 NAIC 4						XXX						
5.5 NAIC 5						XXX						
5.6 NAIC 6						XXX						
5.7 Totals	736,003	3,724,256	2,008,256	732,340	116,741	XXX	7,317,596	7.1	5,736,264	5.5	7,317,596	

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 1A - SECTION 1 (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)												
6.1 NAIC 1	19,874,262	30,381,969	4,055,453			XXX	54,311,685	52.8	55,712,484	53.8	54,311,685	
6.2 NAIC 2	1,122,955	4,328,619	527,054			XXX	5,978,628	5.8	4,301,663	4.2	5,978,628	
6.3 NAIC 3						XXX						
6.4 NAIC 4						XXX						
6.5 NAIC 5						XXX						
6.6 NAIC 6						XXX						
6.7 Totals	20,997,217	34,710,588	4,582,507			XXX	60,290,312	58.6	60,014,147	58.0	60,290,312	
7. Hybrid Securities												
7.1 NAIC 1						XXX						
7.2 NAIC 2						XXX						
7.3 NAIC 3						XXX						
7.4 NAIC 4						XXX						
7.5 NAIC 5						XXX						
7.6 NAIC 6						XXX						
7.7 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1						XXX						
8.2 NAIC 2						XXX						
8.3 NAIC 3						XXX						
8.4 NAIC 4						XXX						
8.5 NAIC 5						XXX						
8.6 NAIC 6						XXX						
8.7 Totals						XXX						
9. SVO Identified Funds												
9.1 NAIC 1	XXX	XXX	XXX	XXX	XXX							
9.2 NAIC 2	XXX	XXX	XXX	XXX	XXX							
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX							
9.4 NAIC 4	XXX	XXX	XXX	XXX	XXX							
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX							
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX							
9.7 Totals	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.1 NAIC 1						XXX						
10.2 NAIC 2						XXX						
10.3 NAIC 3						XXX						
10.4 NAIC 4						XXX						
10.5 NAIC 5						XXX						
10.6 NAIC 6						XXX						
10.7 Totals						XXX						
11. Unaffiliated Certificates of Deposit												
11.1 NAIC 1						XXX						
11.2 NAIC 2						XXX						
11.3 NAIC 3						XXX						
11.4 NAIC 4						XXX						
11.5 NAIC 5						XXX						
11.6 NAIC 6						XXX						
11.7 Totals						XXX						

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY
SCHEDULE D - PART 1A - SECTION 1 (Continued)

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
12. Total Bonds Current Year												
12.1 NAIC 1	(d) 34,309,461	51,782,391	9,860,735	854,306	119,988		96,926,880	94.2	XXX	XXX	96,926,880	
12.2 NAIC 2	(d) 1,122,955	4,328,619	527,054				5,978,628	5.8	XXX	XXX	5,978,628	
12.3 NAIC 3	(d)								XXX	XXX		
12.4 NAIC 4	(d)								XXX	XXX		
12.5 NAIC 5	(d)								XXX	XXX		
12.6 NAIC 6	(d)								XXX	XXX		
12.7 Totals	35,432,416	56,111,009	10,387,789	854,306	119,988		(b) 102,905,507	100.0	XXX	XXX	102,905,507	
12.8 Line 12.7 as a % of Col. 7	34.4	54.5	10.1	0.8	0.1		100.0	XXX	XXX	XXX	100.0	
13. Total Bonds Prior Year												
13.1 NAIC 1	17,106,444	71,184,689	8,698,222	2,025,158	161,445		XXX	XXX	99,175,957	95.8	99,175,957	
13.2 NAIC 2	975,370	2,591,064	735,229				XXX	XXX	4,301,663	4.2	4,301,663	
13.3 NAIC 3							XXX	XXX				
13.4 NAIC 4							XXX	XXX				
13.5 NAIC 5							XXX	XXX	(c)			
13.6 NAIC 6							XXX	XXX	(c)			
13.7 Totals	18,081,814	73,775,753	9,433,451	2,025,158	161,445		XXX	XXX	(b) 103,477,620	100.0	103,477,620	
13.8 Line 13.7 as a % of Col. 9	17.5	71.3	9.1	2.0	0.2		XXX	XXX	100.0	XXX	100.0	
14. Total Publicly Traded Bonds												
14.1 NAIC 1	34,309,461	51,782,391	9,860,735	854,306	119,988		96,926,880	94.2	99,175,957	95.8	96,926,880	XXX
14.2 NAIC 2	1,122,955	4,328,619	527,054				5,978,628	5.8	4,301,663	4.2	5,978,628	XXX
14.3 NAIC 3												XXX
14.4 NAIC 4												XXX
14.5 NAIC 5												XXX
14.6 NAIC 6												XXX
14.7 Totals	35,432,416	56,111,009	10,387,789	854,306	119,988		102,905,507	100.0	103,477,620	100.0	102,905,507	XXX
14.8 Line 14.7 as a % of Col. 7	34.4	54.5	10.1	0.8	0.1		100.0	XXX	XXX	XXX	100.0	XXX
14.9 Line 14.7 as a % of Line 12.7, Col. 7, Section 12	34.4	54.5	10.1	0.8	0.1		100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.1 NAIC 1											XXX	
15.2 NAIC 2											XXX	
15.3 NAIC 3											XXX	
15.4 NAIC 4											XXX	
15.5 NAIC 5											XXX	
15.6 NAIC 6											XXX	
15.7 Totals											XXX	
15.8 Line 15.7 as a % of Col. 7									XXX	XXX	XXX	
15.9 Line 15.7 as a % of Line 12.7, Col. 7, Section 12									XXX	XXX	XXX	

(a) Includes \$ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
 (b) Includes \$ current year of bonds with Z designations and \$ prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.
 (c) Includes \$ current year, \$ prior year of bonds with 5GI designations and \$ current year, \$ prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.
 (d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$1,498,984 ; NAIC 2 \$; NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
1. U.S. Governments												
1.01 Issuer Obligations	12,491,891	13,218,551				XXX	25,710,442	25.0	28,976,063	28.0	25,710,442	
1.02 Residential Mortgage-Backed Securities	155,155	280,673	140,400	58,773	3,247	XXX	638,248	0.6	688,229	0.7	638,248	
1.03 Commercial Mortgage-Backed Securities						XXX						
1.04 Other Loan-Backed and Structured Securities ...						XXX						
1.05 Totals	12,647,046	13,499,224	140,400	58,773	3,247	XXX	26,348,690	25.6	29,664,292	28.7	26,348,690	
2. All Other Governments												
2.01 Issuer Obligations						XXX						
2.02 Residential Mortgage-Backed Securities						XXX						
2.03 Commercial Mortgage-Backed Securities						XXX						
2.04 Other Loan-Backed and Structured Securities ...						XXX						
2.05 Totals						XXX						
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations	125,001	775,000				XXX	900,001	0.9	900,010	0.9	900,001	
3.02 Residential Mortgage-Backed Securities						XXX						
3.03 Commercial Mortgage-Backed Securities						XXX						
3.04 Other Loan-Backed and Structured Securities ...						XXX						
3.05 Totals	125,001	775,000				XXX	900,001	0.9	900,010	0.9	900,001	
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01 Issuer Obligations	927,148	3,401,942	3,656,625	63,193		XXX	8,048,908	7.8	7,162,907	6.9	8,048,908	
4.02 Residential Mortgage-Backed Securities						XXX						
4.03 Commercial Mortgage-Backed Securities						XXX						
4.04 Other Loan-Backed and Structured Securities ...						XXX						
4.05 Totals	927,148	3,401,942	3,656,625	63,193		XXX	8,048,908	7.8	7,162,907	6.9	8,048,908	
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed												
5.01 Issuer Obligations	436,211	2,794,812	1,189,672			XXX	4,420,695	4.3	2,569,473	2.5	4,420,695	
5.02 Residential Mortgage-Backed Securities	299,792	929,444	818,584	732,340	116,741	XXX	2,896,901	2.8	3,166,791	3.1	2,896,901	
5.03 Commercial Mortgage-Backed Securities						XXX						
5.04 Other Loan-Backed and Structured Securities ...						XXX						
5.05 Totals	736,003	3,724,256	2,008,256	732,340	116,741	XXX	7,317,596	7.1	5,736,264	5.5	7,317,596	
6. Industrial and Miscellaneous												
6.01 Issuer Obligations	14,329,241	29,247,493	4,582,507			XXX	48,159,241	46.8	49,309,372	47.7	48,159,241	
6.02 Residential Mortgage-Backed Securities						XXX						
6.03 Commercial Mortgage-Backed Securities						XXX						
6.04 Other Loan-Backed and Structured Securities ...	6,667,977	5,463,095				XXX	12,131,072	11.8	10,704,775	10.3	12,131,072	
6.05 Totals	20,997,217	34,710,588	4,582,507			XXX	60,290,312	58.6	60,014,147	58.0	60,290,312	
7. Hybrid Securities												
7.01 Issuer Obligations						XXX						
7.02 Residential Mortgage-Backed Securities						XXX						
7.03 Commercial Mortgage-Backed Securities						XXX						
7.04 Other Loan-Backed and Structured Securities ...						XXX						
7.05 Totals						XXX						
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations						XXX						
8.02 Residential Mortgage-Backed Securities						XXX						
8.03 Commercial Mortgage-Backed Securities						XXX						
8.04 Other Loan-Backed and Structured Securities ...						XXX						
8.05 Affiliated Bank Loans - Issued						XXX						
8.06 Affiliated Bank Loans - Acquired						XXX						
8.07 Totals						XXX						

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued						XXX						
10.02 Unaffiliated Bank Loans - Acquired						XXX						
10.03 Totals						XXX						
11. Unaffiliated Certificates of Deposit												
11.01 Totals						XXX						
12. Total Bonds Current Year												
12.01 Issuer Obligations	28,309,492	49,437,797	9,428,805	63,193		XXX	87,239,287	84.8	XXX	XXX	87,239,287	
12.02 Residential Mortgage-Backed Securities	454,947	1,210,117	958,984	791,113	119,988	XXX	3,535,149	3.4	XXX	XXX	3,535,149	
12.03 Commercial Mortgage-Backed Securities						XXX			XXX	XXX		
12.04 Other Loan-Backed and Structured Securities	6,667,977	5,463,095				XXX	12,131,072	11.8	XXX	XXX	12,131,072	
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX				XXX	XXX		
12.06 Affiliated Bank Loans						XXX			XXX	XXX		
12.07 Unaffiliated Bank Loans						XXX			XXX	XXX		
12.08 Unaffiliated Certificates of Deposit						XXX			XXX	XXX		
12.09 Totals	35,432,416	56,111,009	10,387,789	854,306	119,988		102,905,507	100.0	XXX	XXX	102,905,507	
12.10 Line 12.09 as a % of Col. 7	34.4	54.5	10.1	0.8	0.1		100.0	XXX	XXX	XXX	100.0	
13. Total Bonds Prior Year												
13.01 Issuer Obligations	14,989,768	64,420,624	8,397,419	1,110,015		XXX	XXX	XXX	88,917,825	85.9	88,917,825	
13.02 Residential Mortgage-Backed Securities	458,830	1,283,570	1,036,032	915,143	161,445	XXX	XXX	XXX	3,855,020	3.7	3,855,020	
13.03 Commercial Mortgage-Backed Securities						XXX			XXX	XXX		
13.04 Other Loan-Backed and Structured Securities	2,633,216	8,071,559				XXX	XXX	XXX	10,704,775	10.3	10,704,775	
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX				XXX	XXX		
13.06 Affiliated Bank Loans						XXX			XXX	XXX		
13.07 Unaffiliated Bank Loans						XXX			XXX	XXX		
13.08 Unaffiliated Certificates of Deposit						XXX			XXX	XXX		
13.09 Totals	18,081,814	73,775,753	9,433,451	2,025,158	161,445		XXX	XXX	103,477,620	100.0	103,477,620	
13.10 Line 13.09 as a % of Col. 9	17.5	71.3	9.1	2.0	0.2		XXX	XXX	100.0	XXX	100.0	
14. Total Publicly Traded Bonds												
14.01 Issuer Obligations	28,309,492	49,437,797	9,428,805	63,193		XXX	87,239,287	84.8	88,917,825	85.9	87,239,287	XXX
14.02 Residential Mortgage-Backed Securities	454,947	1,210,117	958,984	791,113	119,988	XXX	3,535,149	3.4	3,855,020	3.7	3,535,149	XXX
14.03 Commercial Mortgage-Backed Securities						XXX			XXX	XXX		XXX
14.04 Other Loan-Backed and Structured Securities	6,667,977	5,463,095				XXX	12,131,072	11.8	10,704,775	10.3	12,131,072	XXX
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX				XXX	XXX		XXX
14.06 Affiliated Bank Loans						XXX			XXX	XXX		XXX
14.07 Unaffiliated Bank Loans						XXX			XXX	XXX		XXX
14.08 Unaffiliated Certificates of Deposit						XXX			XXX	XXX		XXX
14.09 Totals	35,432,416	56,111,009	10,387,789	854,306	119,988		102,905,507	100.0	103,477,620	100.0	102,905,507	XXX
14.10 Line 14.09 as a % of Col. 7	34.4	54.5	10.1	0.8	0.1		100.0	XXX	XXX	XXX	100.0	XXX
14.11 Line 14.09 as a % of Line 12.09, Col. 7, Section 12	34.4	54.5	10.1	0.8	0.1		100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.01 Issuer Obligations						XXX					XXX	
15.02 Residential Mortgage-Backed Securities						XXX					XXX	
15.03 Commercial Mortgage-Backed Securities						XXX					XXX	
15.04 Other Loan-Backed and Structured Securities						XXX					XXX	
15.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX						XXX	
15.06 Affiliated Bank Loans						XXX					XXX	
15.07 Unaffiliated Bank Loans						XXX					XXX	
15.08 Unaffiliated Certificates of Deposit						XXX					XXX	
15.09 Totals											XXX	
15.10 Line 15.09 as a % of Col. 7									XXX	XXX	XXX	
15.11 Line 15.09 as a % of Line 12.09, Col. 7, Section 12									XXX	XXX	XXX	

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year	1,971,800	1,971,800			
2. Cost of short-term investments acquired	1,488,345	1,488,345			
3. Accrual of discount	38,839	38,839			
4. Unrealized valuation increase/(decrease)					
5. Total gain (loss) on disposals					
6. Deduct consideration received on disposals	2,000,000	2,000,000			
7. Deduct amortization of premium					
8. Total foreign exchange change in book/adjusted carrying value					
9. Deduct current year's other-than-temporary impairment recognized					
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	1,498,984	1,498,984			
11. Deduct total nonadmitted amounts					
12. Statement value at end of current period (Line 10 minus Line 11)	1,498,984	1,498,984			

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment: US Treasury Note

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

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

NONE

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

NONE

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

NONE

Schedule E - Part 2 - Verification - Cash Equivalents

NONE

Schedule A - Part 1 - Real Estate Owned

NONE

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

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 1 - Mortgage Loans Owned

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 1

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

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	Code	F o r e i g n	Bond Char	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
744560-BR-6	PUBLIC SERVICE ELECTRIC	1			1.F FE	674,850	.963140	722,355	750,000	715,839		18,730			2.250	5.074	MS	4,969	16,875	09/27/2022	09/15/2026
744560-BX-3	PUBLIC SERVICE ELECTRIC	1			1.F FE	93,965	.962070	96,207	100,000	96,073		957			3.650	4.832	MS	1,217	3,650	09/22/2022	09/01/2028
756109-AW-4	REALTY INCOME CORP	1			1.G FE	224,765	.931640	232,909	250,000	231,841		3,547			3.250	5.093	JD	361	8,125	12/12/2022	06/15/2029
756109-BR-4	REALTY INCOME CORP	1			1.G FE	790,504	.997710	798,165	800,000	792,865		1,172			4.850	5.047	MS	11,424	38,800	01/09/2023	03/15/2030
857477-AT-0	STATE STREET CORP	1			1.F FE	1,018,650	.992780	992,775	1,000,000	1,003,630		(5,627)			3.550	2.964	FA	13,115	35,500	03/31/2022	08/18/2025
857477-BQ-5	STATE STREET CORP	2			1.F FE	100,000	.944250	94,425	100,000	100,000					1.684		MN	201	1,684	11/15/2021	11/18/2027
87612E-BE-5	TARGET CORP	1			1.F FE	420,142	.975560	439,002	450,000	437,187		9,426			2.500	4.807	AO	2,375	11,250	02/28/2023	04/15/2026
883556-CK-6	THERMO FISHER SCIENTIFIC	1			1.G FE	443,819	.897900	471,399	525,000	467,993		13,378			1.750	4.928	AO		9,188	02/28/2023	10/15/2028
89236T-JV-8	TOYOTA MOTOR CREDIT CORP	1			1.E FE	449,532	.948170	426,675	450,000	449,804		94			1.900	1.922	JJ	3,990	8,550	01/10/2022	01/13/2027
89236T-KC-8	TOYOTA MOTOR CREDIT CORP	1			1.E FE	299,715	.996460	298,939	300,000	299,950		97			3.950	3.984	JD	33	17,775	06/27/2022	06/30/2025
89236T-KJ-3	TOYOTA MOTOR CREDIT CORP	1			1.E FE	499,515	1.00950	500,475	500,000	499,723		94			4.550	4.572	MS	6,383	22,750	09/15/2022	09/20/2027
89236T-KQ-7	TOYOTA MOTOR CREDIT CORP	1			1.E FE	299,802	.996960	299,087	300,000	299,875		38			4.625	4.640	JJ	6,514	13,875	01/09/2023	01/12/2028
89236T-NK-8	TOYOTA MOTOR CREDIT CORP	1			1.E FE	149,696	.988440	148,265	150,000	149,717		22			4.550	4.596	FA	2,692		08/06/2024	08/09/2029
89789M-AD-4	TRUIST FINANCIAL CORP	2			2.A FE	161,723	.958270	167,698	175,000	170,862		3,416			1.267	3.347	MS	733	2,217	03/28/2022	03/02/2027
89789M-AG-7	TRUIST FINANCIAL CORP	1			2.A FE	1,250,000	.980840	1,226,045	1,250,000	1,250,000					4.123	4.123	JD	3,579	51,538	06/01/2022	06/06/2028
89789M-AJ-1	TRUIST FINANCIAL CORP	1			2.A FE	250,000	1.004930	251,234	250,000	250,000					5.900	5.900	AO	2,581	14,750	10/26/2022	10/28/2026
89789M-AL-6	TRUIST FINANCIAL CORP	1			1.G FE	200,000	.993870	198,773	200,000	200,000					4.873	4.873	JJ	4,196	9,746	01/23/2023	01/26/2029
90320W-AF-0	UPMC	1			1.F FE	200,492	.958850	191,770	200,000	200,131		(122)			1.803		AO	761	3,606	12/15/2021	04/15/2026
904764-AS-6	UNILEVER CAPITAL CORP	1			1.E FE	200,870	.990980	198,195	200,000	200,088		(148)			3.100	3.023	JJ	2,601	6,200	04/12/2019	07/30/2025
907818-EP-9	UNION PACIFIC CORP	1			1.G FE	91,733	.966640	96,664	100,000	95,568		1,784			3.000	5.077	AO	633	3,000	10/12/2022	04/15/2027
911312-BX-3	UNITED PARCEL SERVICE	1			1.F FE	149,843	.997580	149,637	150,000	149,992		33			3.900	3.923	AO	1,463	5,850	03/19/2020	04/01/2025
91159H-JH-4	US BANCORP	1			1.G FE	250,000	1.005380	251,345	250,000	250,000					5.727	5.727	AO	2,784	14,318	10/18/2022	10/21/2026
91159H-JN-1	US BANCORP	1			1.F FE	1,000,000	1.017870	1,017,867	1,000,000	1,000,000					5.836	5.836	JD	3,080	58,360	06/07/2023	06/12/2034
92826C-AD-4	VISA INC	1			1.D FE	1,494,965	.988060	1,482,087	1,500,000	1,498,013		1,384			3.150	3.245	JD	2,231	47,250	06/13/2022	12/14/2025
95000U-2G-7	WELLS FARGO & COMPANY	1			2.A FE	216,583	.896840	224,210	250,000	224,755		4,480			2.879	5.275	AO	1,220	7,198	02/16/2023	10/30/2030
1019999999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					47,651,900	XXX	47,965,436	49,025,000	48,159,240		266,475			XXX	XXX	XXX	434,122	1,678,123	XXX	XXX
02008D-AC-3	ALLY AUTO RECEIVABLES TRUST 22-3 A3	2	4		1.A FE	90,017	1.001830	90,187	90,023	90,022		(90)			5.070	5.073	MON	203	4,564	12/06/2022	04/15/2027
02582J-JV-3	AMERICAN EXPRESS CREDIT ACCOUN 22-3 A	2	4		1.A FE	1,467,480	.995350	1,493,032	1,500,000	1,492,625		11,425			3.750	4.553	MON	2,500	56,250	09/22/2022	08/16/2027
14043K-AH-8	CAPITAL ONE PRIME AUTO RECEIVA 23-1 A3	2	4		1.A FE	199,962	1.002970	200,593	200,000	199,987		14			4.870	4.878	MON	433	9,740	02/13/2023	02/15/2028
14043Q-AC-6	CAPITAL ONE PRIME AUTO RECEIVA 22-1 A3	2	4		1.A FE	187,791	.992320	186,389	187,832	187,824		(133)			3.170	3.178	MON	265	5,954	04/28/2022	04/15/2027
14290D-AC-5	CARMAX AUTO OWNER TRUST 24-4 A3	2	4		1.A FE	174,967	.997130	174,498	175,000	174,969		2			4.600	4.608	MON	358	894	10/29/2024	10/15/2029
14317C-AD-4	CARMAX AUTO OWNER TRUST 22-1 A4	2	4		1.A FE	149,967	.965510	144,826	150,000	149,991		8			1.700		MON	113	2,550	01/19/2022	08/16/2027
14317H-AC-5	CARMAX AUTO OWNER TRUST 22-2 A3	2	4		1.A FE	144,828	.994530	144,058	144,850	144,846		(165)			3.490	3.496	MON	225	5,055	04/21/2022	02/16/2027
14318X-AC-9	CARMAX AUTO OWNER TRUST 23-4 A3	2	4		1.A FE	124,975	1.017800	127,225	125,000	124,986		9			6.000	6.008	MON	333	7,500	10/12/2023	07/17/2028
161571-HS-6	CHASE ISSUANCE TRUST 22-A1 A	2	4		1.A FE	199,967	.996770	199,353	200,000	199,992		11			3.970	3.976	MON	353	7,940	09/09/2022	09/15/2027
161571-HT-4	CHASE ISSUANCE TRUST 23-A1 A	2	4		1.A FE	374,896	1.011620	379,357	375,000	374,939		33			5.160	5.170	MON	860	19,350	09/07/2023	09/15/2028
17305E-GW-9	CITIBANK CREDIT CARD ISSUANCE 23-A1 A1	2	4		1.A FE	124,984	1.006800	125,850	125,000	124,992		7			5.230	5.237	JD	418	6,483	12/04/2023	12/08/2027
233869-AC-0	DAIMLER TRUCKS RETAIL TRUST 22-1 A3	2	4		1.A FE	102,379	1.001140	102,502	102,386	102,385		(230)			5.230	5.233	MON	238	5,355	10/12/2022	02/17/2026
345295-AD-1	FORD CREDIT AUTO OWNER TRUST 22-D A3	2	4		1.A FE	120,985	1.003640	121,442	121,002	120,997		(86)			5.270	5.276	MON	283	6,377	11/17/2022	05/17/2027
34529N-AD-2	FORD CREDIT AUTO LEASE TRUST 23-B A3	2	4		1.A FE	699,893	1.005580	703,905	700,000	699,974		64			5.910	5.920	MON	1,839	41,370	09/14/2023	10/15/2026
34534L-AD-9	FORD CREDIT AUTO OWNER TRUST 22-B A3	2	4		1.A FE	73,359	.997120	73,151	73,363	73,362		(109)			3.740	3.742	MON	122	2,744	06/22/2022	09/15/2026
34535V-AD-6	FORD CREDIT AUTO OWNER TRUST 24-D A3	2	4		1.A FE	249,992	1.000350	250,088	250,000	249,992					4.610	4.611	MON	512	736	11/19/2024	08/15/2029
36265Q-AD-8	GM FINANCIAL SECURITIZED TERM 22-4 A3	2	4		1.A FE	486,881	1.000860	487,381	486,961	486,943		(258)			4.820	4.827	MON	978	23,472	10/04/2022	08/16/2027
36265W-AD-5	GM FINANCIAL SECURITIZED TERM 22-3 A3	2	4		1.A FE	89,330	.996080	88,980	89,331	89,331		(72)			3.640	3.640	MON	135	3,252	07/06/2022	04/16/2027

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 1

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

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest				Dates		
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	Code	Rating	Bond Char	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
379930-AD-2	GM FINANCIAL SECURITIZED TERM 23-4 A3	2			1.A FE	124,974	101.5800	126,975	125,000	124,986		10			5.780	5.789	MON	301	7,225	10/03/2023	08/16/2028
380120-AD-0	GM FINANCIAL AUTOMOBILE LEASIN 24-3 A3	2			1.A FE	474,944	99.3710	472,012	475,000	474,951		7			4.210	4.217	MON	611	4,388	09/24/2024	10/20/2027
38013J-AD-5	GM FINANCIAL SECURITIZED TERM 23-1 A3	2			1.A FE	98,019	100.0790	98,111	98,034	98,029		2			4.660	4.666	MON	190	4,568	01/09/2023	02/16/2028
380146-AD-2	GM FINANCIAL SECURITIZED TERM 22-1 A4	2,4			1.A FE	149,962	97.0980	145,647	150,000	149,991		10			1.450	1.457	MON	91	2,265	01/11/2022	04/17/2028
437930-AC-4	HONDA AUTO RECEIVABLES OWNER T 24-2 A3	2			1.A FE	324,568	101.2020	328,907	325,000	324,674		106			5.270	5.331	MON	618	9,848	05/23/2024	11/20/2028
438123-AC-5	HONDA AUTO RECEIVABLES OWNER T 23-4 A3	2			1.A FE	149,974	101.5520	152,328	150,000	149,986		10			5.670	5.677	MON	236	8,505	11/01/2023	06/21/2028
43815G-AD-1	HONDA AUTO RECEIVABLES OWNER T 21-4 A4	2,4			1.A FE	249,950	98.6760	246,690	250,000	249,995		14			1.140	1.146	MON	79	2,850	11/16/2021	06/21/2028
448973-AD-9	HYUNDAI AUTO RECEIVABLES TRUST 24-A A3	2			1.A FE	199,956	100.7000	201,400	200,000	199,969		13			4.990	4.999	MON	444	7,346	03/11/2024	02/15/2029
44918C-AD-4	HYUNDAI AUTO RECEIVABLES TRUST 23-C A3	2			1.A FE	199,974	101.3660	202,731	200,000	199,985		10			5.540	5.545	MON	492	11,080	11/03/2023	10/16/2028
449340-AD-3	HYUNDAI AUTO RECEIVABLES TRUST 24-B A3	2			1.A FE	1,706,799	100.3250	1,680,443	1,675,000	1,703,276		(3,523)			4.840	3.970	MON	3,603	20,267	09/25/2024	03/15/2029
58769G-AD-5	MERCEDES-BENZ AUTO LEASE TRUST 24-B A3	2			1.A FE	174,971	99.5580	174,226	175,000	174,974		4			4.230	4.239	MON	329	1,645	09/17/2024	02/15/2028
58770J-AD-6	MERCEDES-BENZ AUTO LEASE TRUST 24-A A3	2			1.A FE	174,980	101.0410	176,821	175,000	174,985		5			5.320	5.326	MON	414	5,224	05/17/2024	01/18/2028
65473F-AD-9	NISSAN AUTO LEASE TRUST 23-B A3	2			1.A FE	217,837	100.3400	218,596	217,855	217,851		(60)			5.690	5.695	MON	551	12,396	06/21/2023	07/15/2026
65480J-AC-4	NISSAN AUTO RECEIVABLES OWNER 22-B A3	2,4			1.A FE	243,662	99.9700	243,639	243,712	243,699		(106)			4.460	4.468	MON	483	10,870	09/20/2022	05/17/2027
89231C-AD-9	TOYOTA AUTO RECEIVABLES OWNER 22-C A3	2,4			1.A FE	106,177	99.5420	105,709	106,195	106,191		(49)			3.760	3.767	MON	177	3,993	08/08/2022	04/15/2027
89238F-AD-5	TOYOTA AUTO RECEIVABLES OWNER 22-B A3	2,4			1.A FE	70,780	99.3990	70,356	70,781	70,781		(74)			2.930	2.931	MON	92	2,074	04/07/2022	09/15/2026
89239F-AD-4	TOYOTA AUTO RECEIVABLES OWNER 23-D A3	2			1.A FE	149,984	101.4610	152,192	150,000	149,991		6			5.540	5.544	MON	369	8,310	11/07/2023	08/15/2028
89239H-AD-0	TOYOTA AUTO RECEIVABLES OWNER 22-D A3	2,4			1.A FE	514,310	100.5650	517,267	514,361	514,348		(55)			5.300	5.304	MON	1,212	27,261	11/01/2022	09/15/2027
92867H-AD-0	VOLKSWAGEN AUTO LOAN ENHANCED 23-1 A3	2			1.A FE	249,938	100.6440	251,610	250,000	249,972		22			5.020	5.030	MON	383	12,550	06/06/2023	06/20/2028
92868K-AD-5	VOLKSWAGEN AUTO LOAN ENHANCED 21-1 A4	2,4			1.A FE	174,980	98.3370	172,089	175,000	174,997		6			1.260	1.263	MON	67	2,205	12/07/2021	10/20/2028
98163K-AD-4	WORLD OMNI AUTO RECEIVABLES TR 21-D A4	2,4			1.A FE	274,906	97.2820	267,525	275,000	274,983		23			1.100	1.109	MON	134	3,025	10/26/2021	11/15/2027
98163Q-AD-1	WORLD OMNI AUTO RECEIVABLES TR 22-B A3	2,4			1.A FE	110,678	99.3650	109,989	110,691	110,689		(80)			3.250	3.255	MON	160	3,597	05/24/2022	07/15/2027
98163V-AD-0	WORLD OMNI AUTO RECEIVABLES TR 22-D A3	2,4			1.A FE	432,965	100.6050	433,730	431,123	431,965		(1,213)			5.610	5.314	MON	1,075	24,186	12/14/2023	02/15/2028
98164J-AD-6	WORLD OMNI AUTO RECEIVABLES TR 23-A A3	2			1.A FE	296,641	100.1700	297,196	296,692	296,676		11			4.830	4.837	MON	637	14,330	02/07/2023	05/15/2028
98164N-AD-7	WORLD OMNI AUTO RECEIVABLES TR 24-C A3	2			1.A FE	174,965	99.6480	174,384	175,000	174,969		4			4.430	4.438	MON	345	2,476	08/13/2024	12/17/2029
1049999999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Other Loan-Backed and Structured Securities					12,109,548	XXX	12,113,393	12,110,192	12,131,072		5,533			XXX	XXX	XXX	23,263	422,072	XXX	XXX
1109999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					59,761,448	XXX	60,078,829	61,135,192	60,290,311		272,008			XXX	XXX	XXX	457,385	2,100,195	XXX	XXX
1309999999	Total - Hybrid Securities						XXX								XXX	XXX	XXX			XXX	XXX
1509999999	Total - Parent, Subsidiaries and Affiliates Bonds						XXX								XXX	XXX	XXX			XXX	XXX
1909999999	Subtotal - Bonds - Unaffiliated Bank Loans						XXX								XXX	XXX	XXX			XXX	XXX
2419999999	Total - Issuer Obligations					84,996,647	XXX	85,222,959	87,380,000	85,740,303		414,181			XXX	XXX	XXX	711,595	2,915,462	XXX	XXX
2429999999	Total - Residential Mortgage-Backed Securities					3,493,748	XXX	3,399,816	4,038,581	3,535,148		73,895			XXX	XXX	XXX	8,791	105,488	XXX	XXX
2439999999	Total - Commercial Mortgage-Backed Securities						XXX								XXX	XXX	XXX			XXX	XXX
2449999999	Total - Other Loan-Backed and Structured Securities					12,109,548	XXX	12,113,393	12,110,192	12,131,072		5,533			XXX	XXX	XXX	23,263	422,072	XXX	XXX
2459999999	Total - SVO Identified Funds						XXX								XXX	XXX	XXX			XXX	XXX
2469999999	Total - Affiliated Bank Loans						XXX								XXX	XXX	XXX			XXX	XXX
2479999999	Total - Unaffiliated Bank Loans						XXX								XXX	XXX	XXX			XXX	XXX
2489999999	Total - Unaffiliated Certificates of Deposit						XXX								XXX	XXX	XXX			XXX	XXX
2509999999	Total Bonds					100,599,943	XXX	100,736,168	103,528,773	101,406,523		493,610			XXX	XXX	XXX	743,649	3,443,023	XXX	XXX

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

Number 1A 1A ..\$42,805,492 1B ..\$5,361,168 1C ..\$3,113,667 1D ..\$6,131,185 1E ..\$12,913,855 1F ..\$14,734,547 1G ..\$10,367,980

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

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

Line Number	1A	1A ..\$	42,805,492	1B ..\$	5,361,168	1C ..\$	3,113,667	1D ..\$	6,131,185	1E ..\$	12,913,855	1F ..\$	14,734,547	1G ..\$	10,367,980
	1B	2A ..\$	5,451,574	2B ..\$	527,054	2C ..\$									
	1C	3A ..\$		3B ..\$		3C ..\$									
	1D	4A ..\$		4B ..\$		4C ..\$									
	1E	5A ..\$		5B ..\$		5C ..\$									
	1F	6 ..\$													

Schedule D - Part 2 - Section 1 - Preferred Stocks Owned

N O N E

Schedule D - Part 2 - Section 2 - Common Stocks Owned

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends
91282C-JS-1	UNITED STATES TREASURY NOTE		12/17/2024	BMO CAPITAL MARKETS CORP.		1,999,030	2,000,000	37,880
91282C-JT-9	US TREASURY N/B		01/30/2024	NOMURA SECURITIES INTERNATIONAL INC.		597,752	600,000	1,055
91282C-LY-5	UNITED STATES TREASURY NOTE		12/03/2024	BOFA SECURITIES INC.		1,001,644	1,000,000	467
0109999999. Subtotal - Bonds - U.S. Governments						3,598,426	3,600,000	39,402
718814-2E-5	PHOENIX AZ		11/04/2024	MORGAN STANLEY & CO. LLC		1,257,688	1,250,000	13,793
0709999999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						1,257,688	1,250,000	13,793
01179R-LB-4	ALASKA ST MUNI BOND BANK AUTH		09/06/2024	BOFA SECURITIES INC.		355,220	400,000	2,202
54651R-DJ-5	LOUISIANA ST UNCLAIMED PROPERT		08/15/2024	MARKETAXESS		108,501	125,000	1,065
64971X-LV-8	NEW YORK CITY NY TRANSITIONAL		09/05/2024	HILLTOP SECURITIES INC.		193,843	210,000	1,914
68607D-VF-9	OREGON ST DEPT OF TRANSPRTN HI		11/01/2024	MORGAN STANLEY & CO. LLC		216,743	250,000	1,678
898735-UN-3	TUCSON AZ COPS		08/29/2024	MARKETAXESS		342,296	385,000	1,074
914302-IH-4	UNIV OF HOUSTON TX UNIV REVENU		08/14/2024	J.P. MORGAN SECURITIES LLC		150,000	150,000	
914302-IHJ-0	UNIV OF HOUSTON TX UNIV REVENU		08/14/2024	J.P. MORGAN SECURITIES LLC		200,000	200,000	
914302-IHK-7	UNIV OF HOUSTON TX UNIV REVENU		08/14/2024	J.P. MORGAN SECURITIES LLC		325,000	325,000	
914302-IHL-5	UNIV OF HOUSTON TX UNIV REVENU		08/14/2024	J.P. MORGAN SECURITIES LLC		200,000	200,000	
0909999999. Subtotal - Bonds - U.S. Special Revenues						2,091,602	2,245,000	7,933
009158-BH-8	AIR PRODUCTS & CHEMICALS		03/11/2024	U.S. BANCORP INVESTMENTS INC.		199,792	200,000	894
06051G-HV-4	BANK OF AMERICA CORP		08/08/2024	BOFA SECURITIES INC.		463,155	500,000	710
14290D-AC-5	CARMAX AUTO OWNER TRUST 24-4 A3		10/29/2024	BOFA SECURITIES INC.		174,967	175,000	
14913U-AQ-3	CATERPILLAR FINL SERVICE		08/12/2024	BOFA SECURITIES INC.		99,729	100,000	
254687-FL-5	WALT DISNEY COMPANY/THE		09/26/2024	MORGAN STANLEY & CO. LLC		227,445	250,000	361
34535V-AD-6	FORD CREDIT AUTO OWNER TRUST 24-D A3		11/19/2024	BARCLAYS CAPITAL INC.		249,992	250,000	
38012Q-AD-0	GM FINANCIAL AUTOMOBILE LEASIN 24-3 A3		09/24/2024	WELLS FARGO SECURITIES LLC		474,944	475,000	
437930-AC-4	HONDA AUTO RECEIVABLES OWNER T 24-2 A3		05/23/2024	WELLS FARGO SECURITIES LLC		324,568	325,000	333
440452-AF-7	HORMEL FOODS CORP		04/04/2024	MORGAN STANLEY & CO. LLC		417,275	500,000	2,925
448973-AD-9	HYUNDAI AUTO RECEIVABLES TRUST 24-A A3		03/11/2024	BOFA SECURITIES INC.		199,956	200,000	
44934Q-AD-3	HYUNDAI AUTO RECEIVABLES TRUST 24-B A3		09/25/2024	BOFA SECURITIES INC.		1,706,799	1,675,000	2,477
532457-CK-2	ELI LILLY & CO		02/07/2024	CITIGROUP GLOBAL MARKETS INC.		249,835	250,000	
532457-CQ-9	ELI LILLY & CO		08/12/2024	MORGAN STANLEY & CO. LLC		748,358	750,000	
57636Q-BB-9	MASTERCARD INC		09/03/2024	J.P. MORGAN SECURITIES LLC		249,700	250,000	
58769G-AD-5	MERCEDES-BENZ AUTO LEASE TRUST 24-B A3		09/17/2024	MJFG SECURITIES AMERICAS INC.		174,971	175,000	
58770J-AD-6	MERCEDES-BENZ AUTO LEASE TRUST 24-A A3		05/17/2024	MIZUHO SECURITIES USA LLC		174,980	175,000	
66989H-AT-5	NOVARTIS CAPITAL CORP		09/16/2024	GOLDMAN SACHS & CO. LLC		124,696	125,000	
693475-BR-5	PNC FINANCIAL SERVICES		04/11/2024	VARIOUS		499,248	500,000	9,536
693475-BX-2	PNC FINANCIAL SERVICES		09/10/2024	BARCLAYS CAPITAL INC.		183,218	175,000	3,124
693475-CA-1	PNC FINANCIAL SERVICES		10/16/2024	CITIGROUP GLOBAL MARKETS INC.		750,000	750,000	
731572-AB-9	RALPH LAUREN CORP		09/24/2024	J.P. MORGAN SECURITIES LLC		93,812	100,000	819
89236T-IK-8	TOYOTA MOTOR CREDIT CORP		08/06/2024	MIZUHO SECURITIES USA LLC		149,696	150,000	
98164N-AD-7	WORLD OMNI AUTO RECEIVABLES TR 24-C A3		08/13/2024	MJFG SECURITIES AMERICAS INC.		174,965	175,000	
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						8,112,100	8,225,000	21,179
2509999997. Total - Bonds - Part 3						15,059,815	15,320,000	82,308
2509999998. Total - Bonds - Part 5								
2509999999. Total - Bonds								
4509999997. Total - Preferred Stocks - Part 3								
4509999998. Total - Preferred Stocks - Part 5								
4509999999. Total - Preferred Stocks								
5989999997. Total - Common Stocks - Part 3								
5989999998. Total - Common Stocks - Part 5								
5989999999. Total - Common Stocks								
5999999999. Total - Preferred and Common Stocks								
6009999999 - Totals						15,059,815	15,320,000	82,308

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 4

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

Table with 21 columns: 1-10 (CUSIP, Description, Foreign, Disposal Date, Name of Purchaser, Number of Shares of Stock, Consideration, Par Value, Actual Cost, Prior Year Book/Adjusted Carrying Value), 11-15 (Change in 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 (11+12-13), Total Foreign Exchange Change in Book/Adjusted Carrying Value), 16 (Book/Adjusted Carrying Value at Disposal Date), 17 (Foreign Exchange Gain (Loss) on Disposal), 18 (Realized Gain (Loss) on Disposal), 19 (Total Gain (Loss) on Disposal), 20 (Bond Interest/Stock Dividends Received During Year), 21 (Stated Contractual Maturity Date).

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21
										11	12	13	14	15						
CUSIP Identification	Description	Foreign	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 (11+12-13)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date
892361-JX-4	TOYOTA MOTOR CREDIT CORP		03/22/2024	MATURITY 100.0000		175,000	175,000	174,892	174,988		12		12		175,000				2,188	03/22/2024
89238F-AD-5	TOYOTA AUTO RECEIVABLES OWNER 22-B A3		12/15/2024	MBS PAYDOWN 100.0000		104,219	104,219	104,216	104,143		75		75		104,219				1,676	09/15/2026
89239H-AD-0	TOYOTA AUTO RECEIVABLES OWNER 22-D A3		12/15/2024	MBS PAYDOWN 100.0000		35,639	35,639	35,636	35,566		73		73		35,639				1,868	09/15/2027
911312-BL-9	UNITED PARCEL SERVICE		11/15/2024	MATURITY 100.0000		250,000	250,000	245,255	248,230		1,770		1,770		250,000				7,000	11/15/2024
91324P-DR-0	UNITEDHEALTH GROUP INC		08/15/2024	MATURITY 100.0000		250,000	250,000	249,938	249,992		8		8		250,000				5,938	08/15/2024
92868A-AC-9	VOLKSWAGEN AUTO LEASE TRUST 22-A A3		09/20/2024	MBS PAYDOWN 100.0000		125,000	125,000	124,990	124,998		2		2		125,000				1,788	07/21/2025
931142-EL-3	WALMART INC		07/08/2024	MATURITY 100.0000		300,000	300,000	299,634	299,960		40		40		300,000				8,550	07/08/2024
94974B-GA-2	WELLS FARGO & COMPANY		09/09/2024	MATURITY 100.0000		250,000	250,000	253,185	250,442		(442)		(442)		250,000				8,250	09/09/2024
98163Q-AD-1	WORLD OMNI AUTO RECEIVABLES TR 22-B A3		12/15/2024	MBS PAYDOWN 100.0000		89,309	89,309	89,298	89,222		87		87		89,309				2,060	07/15/2027
98163V-AD-0	WORLD OMNI AUTO RECEIVABLES TR 22-D A3		12/15/2024	MBS PAYDOWN 100.0000		93,877	93,877	94,278	94,023		(147)		(147)		93,877				4,737	02/15/2028
98164J-AD-6	WORLD OMNI AUTO RECEIVABLES TR 23-A A3		12/15/2024	MBS PAYDOWN 100.0000		3,308	3,308	3,308	3,302		6		6		3,308				160	05/15/2028
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						8,111,978	8,111,978	8,149,098	8,107,941		4,034		4,034		8,111,978				171,976	XXX
2509999997. Total - Bonds - Part 4						15,703,375	15,703,375	15,602,541	15,652,720		50,653		50,653		15,703,375				394,361	XXX
2509999998. Total - Bonds - Part 5																				XXX
2509999999. Total - Bonds						15,703,375	15,703,375	15,602,541	15,652,720		50,653		50,653		15,703,375				394,361	XXX
4509999997. Total - Preferred Stocks - Part 4							XXX													XXX
4509999998. Total - Preferred Stocks - Part 5							XXX													XXX
4509999999. Total - Preferred Stocks							XXX													XXX
5989999997. Total - Common Stocks - Part 4							XXX													XXX
5989999998. Total - Common Stocks - Part 5							XXX													XXX
5989999999. Total - Common Stocks							XXX													XXX
5999999999. Total - Preferred and Common Stocks							XXX													XXX
6009999999 - Totals						15,703,375	XXX	15,602,541	15,652,720		50,653		50,653		15,703,375				394,361	XXX

Schedule D - Part 5 - Long Term Bonds and Stocks Acquired and Fully Disposed Of

N O N E

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

N O N E

Schedule D - Part 6 - Section 2

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE DA - PART 1

Showing All SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1	Codes		4	5	6	7	Change in Book/Adjusted Carrying Value				12	13	Interest					20	
	2	3					8	9	10	11			14	15	16	17	18		19
Description	Code	For- eign	Date Acquired	Name of Vendor	Maturity Date	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other- Than- Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Par Value	Actual Cost	Amount Due and Accrued Dec. 31 of Current Year on Bond Not in Default	Non- Admitted Due and Accrued	Rate of	Effective Rate of	When Paid	Amount Received During Year	Paid for Accrued Interest
UNITED STATES TREASURY NOTE			02/20/2024	NOMURA SECURITIES INTERNATIONAL INC.	01/31/2025	1,498,984		10,639			1,500,000	1,488,345	25,893		4.125	4.976	JJ	30,938	3,570
0019999999. Subtotal - Bonds - U.S. Governments - Issuer Obligations						1,498,984		10,639			1,500,000	1,488,345	25,893		XXX	XXX	XXX	30,938	3,570
0109999999. Total - U.S. Government Bonds						1,498,984		10,639			1,500,000	1,488,345	25,893		XXX	XXX	XXX	30,938	3,570
0309999999. Total - All Other Government Bonds															XXX	XXX	XXX		
0509999999. Total - U.S. States, Territories and Possessions Bonds															XXX	XXX	XXX		
0709999999. Total - U.S. Political Subdivisions Bonds															XXX	XXX	XXX		
0909999999. Total - U.S. Special Revenues Bonds															XXX	XXX	XXX		
1109999999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds															XXX	XXX	XXX		
1309999999. Total - Hybrid Securities															XXX	XXX	XXX		
1509999999. Total - Parent, Subsidiaries and Affiliates Bonds															XXX	XXX	XXX		
1909999999. Subtotal - Unaffiliated Bank Loans															XXX	XXX	XXX		
2419999999. Total - Issuer Obligations						1,498,984		10,639			1,500,000	1,488,345	25,893		XXX	XXX	XXX	30,938	3,570
2429999999. Total - Residential Mortgage-Backed Securities															XXX	XXX	XXX		
2439999999. Total - Commercial Mortgage-Backed Securities															XXX	XXX	XXX		
2449999999. Total - Other Loan-Backed and Structured Securities															XXX	XXX	XXX		
2459999999. Total - SVO Identified Funds															XXX	XXX	XXX		
2469999999. Total - Affiliated Bank Loans															XXX	XXX	XXX		
2479999999. Total - Unaffiliated Bank Loans															XXX	XXX	XXX		
2509999999. Total Bonds						1,498,984		10,639			1,500,000	1,488,345	25,893		XXX	XXX	XXX	30,938	3,570
7109999999. Total - Parent, Subsidiaries and Affiliates											XXX				XXX	XXX	XXX		
7709999999 - Totals						1,498,984		10,639			XXX	1,488,345	25,893		XXX	XXX	XXX	30,938	3,570

1. Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:
 Number
 1A 1A ...\$ 1,498,984 1B ..\$ 1C ..\$ 1D ..\$ 1E ..\$ 1F ..\$ 1G ..\$
 1B 2A ...\$ 2B ..\$ 2C ..\$
 1C 3A ...\$ 3B ..\$ 3C ..\$
 1D 4A ...\$ 4B ..\$ 4C ..\$
 1E 5A ...\$ 5B ..\$ 5C ..\$
 1F 6\$

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
Depository	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
AMEGY BANK OF TEXAS SALT LAKE CITY, UT					2,430,892	.XXX.
BANK OF TEXAS DALLAS, TX					17,577,363	.XXX.
CITIBANK NEW YORK, NY			267		4,806,580	.XXX.
CITY NATIONAL BANK MIAMI, FL					877,354	.XXX.
FROST BANK FORT WORTH, TX					43,212	.XXX.
JPMORGAN CHASE BANK, N.A. COLUMBUS, OH					1,099,567	.XXX.
PLAINS CAPITAL BANK DALLAS, TX					601,407	.XXX.
RENASANT BANK TUPELO, MS					296,044	.XXX.
SUNFLOWER BANK FIRST NATIONAL .. SALINA, KS					393,956	.XXX.
TRUIST CHARLOTTE, NC					4,662,078	.XXX.
US BANK WASHINGTON, D.C.			14	1	269,263	.XXX.
WELLS FARGO BANK SAN FRANCISCO, CA					899,112	.XXX.
0199998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - open depositories	XXX	XXX				XXX
0199999. Totals - Open Depositories	XXX	XXX	281	1	33,956,829	XXX
0299998 Deposits in ... depositories which do not exceed the allowable limit in any one depository (See instructions) - suspended depositories	XXX	XXX				XXX
0299999. Totals - Suspended Depositories	XXX	XXX				XXX
0399999. Total Cash on Deposit	XXX	XXX	281	1	33,956,829	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX		XXX
0599999 Total - Cash	XXX	XXX	281	1	33,956,829	XXX

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

1. January.....	34,927,973	4. April.....	27,399,090	7. July.....	38,047,904	10. October.....	33,768,971
2. February....	43,455,211	5. May.....	24,485,995	8. August.....	34,615,090	11. November...	29,361,423
3. March.....	35,285,487	6. June.....	30,868,508	9. September ..	35,217,663	12. December ..	33,956,829

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
NONE								
8609999999 - Total Cash Equivalents								

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

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1 Type of Deposit	2 Purpose of Deposit	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
			3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL					
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA					
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	NV					
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM					
33. New York	NY					
34. North Carolina	NC					
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX	ST... Deposit Section 912.305 & 912.306 of Texas Ins. Code is Other Special Deposit			75,000	75,000
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Alien and Other	OT	XXX	XXX			
59. Subtotal	XXX	XXX			75,000	75,000
DETAILS OF WRITE-INS						
5801.						
5802.						
5803.						
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	XXX				
5899. Totals (Lines 5801 through 5803 plus 5898)(Line 58 above)	XXX	XXX				