



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2025
OF THE CONDITION AND AFFAIRS OF THE
OLD AMERICAN INDEMNITY COMPANY

NAIC Group Code 4762 (Current) 4762 (Prior) NAIC Company Code 11665 Employer's ID Number 61-0533007

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

Incorporated/Organized 11/11/1956 Commenced Business 05/30/1957

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
DALLAS, TX, US 75254 214-561-1991
(Street and Number) (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
DALLAS, TX, US 75254 214-561-1991
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.oldamericanindemnity.com

Statutory Statement Contact MICHELLE STEPHENS 214-561-1965
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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 ANDREW JAMES KIRKPATRICK BRENT LAYNE MCGILL
JAMES LANDO ZECH CLEMENT S DWYER JR 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.

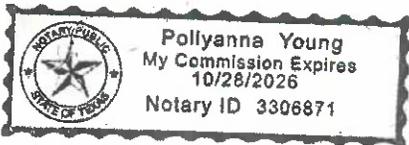
Signature of Andrew James Kirkpatrick
ANDREW JAMES KIRKPATRICK
PRESIDENT

Signature of Melissa Waddell Saylor
MELISSA WADDELL SAYLORS
SECRETARY

Signature of Mark Francis Banar
MARK FRANCIS BANAR
TREASURER

Subscribed and sworn to before me this 11th day of February, 2026
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 2025 OF THE OLD AMERICAN INDEMNITY 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) .....	28,708,356		28,708,356	33,280,754
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 (\$ .....5,814,759, Schedule E - Part 1), cash equivalents (\$ .....870,343, Schedule E - Part 2) and short-term investments (\$ ..... , Schedule DA) .....	6,685,101		6,685,101	8,472,309
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) .....	35,393,457		35,393,457	41,753,063
13. Title plants less \$ ..... charged off (for Title insurers only) .....				
14. Investment income due and accrued .....	147,199		147,199	162,241
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	6,626,074		6,626,074	8,479,091
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	30,105,842		30,105,842	36,572,644
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	12,073,794		12,073,794	12,191,212
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 .....	78,297		78,297	157,347
19. Guaranty funds receivable or on deposit .....	2,380,384		2,380,384	1,844,590
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 .....				3,024
24. Health care (\$ ..... ) and other amounts receivable .....				
25. Aggregate write-ins for other-than-invested assets .....	226,147		226,147	226,956
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	87,031,194		87,031,194	101,390,167
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28. Total (Lines 26 and 27)	87,031,194		87,031,194	101,390,167
<b>DETAILS OF WRITE-INS</b>				
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. MGA/Premium Tax Receivable .....	26,147		26,147	26,956
2502. Security Deposit .....	200,000		200,000	200,000
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	226,147		226,147	226,956

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8) .....	2,252,401	3,417,813
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) .....	378,007	594,600
4. Commissions payable, contingent commissions and other similar charges .....		
5. Other expenses (excluding taxes, licenses and fees) .....	221,315	248,283
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	942,383	1,815,997
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 \$ ..... 41,546,899 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) .....	1,206,612	2,743,265
10. Advance premium .....		
11. Dividends declared and unpaid:		
11.1 Stockholders .....	1,000,000	
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	46,298,233	53,202,193
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20) .....	3,605,937	9,567,974
14. Amounts withheld or retained by company for account of others .....	5,744,191	5,520,596
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 .....	247,169	
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 .....	204,123	172,693
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	62,100,372	77,283,414
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	62,100,372	77,283,414
29. Aggregate write-ins for special surplus funds .....		
30. Common capital stock .....	2,500,000	2,500,000
31. Preferred capital stock .....		
32. Aggregate write-ins for other-than-special surplus funds .....		
33. Surplus notes .....		
34. Gross paid in and contributed surplus .....	17,545,071	17,545,071
35. Unassigned funds (surplus) .....	4,885,751	4,061,681
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) .....	24,930,822	24,106,753
38. TOTALS (Page 2, Line 28, Col. 3)	87,031,194	101,390,167
<b>DETAILS OF WRITE-INS</b>		
2501. MGA Payable .....	204,123	172,693
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)	204,123	172,693
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)		

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**STATEMENT OF INCOME**

	1 Current Year	2 Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4).....	14,726,252	17,106,328
<b>DEDUCTIONS:</b>		
2. Losses incurred (Part 2, Line 35, Column 7) .....	3,660,659	6,155,125
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1) .....	437,636	1,174,379
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2) .....	7,841,409	7,383,606
5. Aggregate write-ins for underwriting deductions .....		
6. Total underwriting deductions (Lines 2 through 5) .....	11,939,704	14,713,111
7. Net income of protected cells .....		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) .....	2,786,548	2,393,217
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	888,079	649,315
10. Net realized capital gains (losses) less capital gains tax of \$ ..... (Exhibit of Capital Gains (Losses) ) .....	(108,628)	42,483
11. Net investment gain (loss) (Lines 9 + 10) .....	779,451	691,798
<b>OTHER INCOME</b>		
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) .....	3,565,999	3,085,015
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) .....	3,565,999	3,085,015
19. Federal and foreign income taxes incurred .....	662,879	688,718
20. Net income (Line 18 minus Line 19)(to Line 22) .....	2,903,120	2,396,297
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) .....	24,106,753	15,930,969
22. Net income (from Line 20) .....	2,903,120	2,396,297
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 .....	(79,050)	29,487
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 .....		5,750,000
33.2 Transferred to capital (stock dividend) .....		
33.3 Transferred from capital .....		
34. Net remittances from or (to) Home Office .....		
35. Dividends to stockholders .....	(2,000,000)	
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) .....	824,069	8,175,784
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	24,930,822	24,106,753
<b>DETAILS OF WRITE-INS</b>		
0501. Premium Deficiency Reserves Incurred .....		
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)		

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**CASH FLOW**

	1	2
	Current Year	Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	14,605,457	28,681,226
2. Net investment income .....	692,653	460,085
3. Miscellaneous income .....		
4. Total (Lines 1 through 3) .....	15,298,110	29,141,310
5. Benefit and loss related payments .....	4,708,653	5,915,438
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		
7. Commissions, expenses paid and aggregate write-ins for deductions .....	9,929,757	8,702,060
8. Dividends paid to policyholders .....		
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	662,879	450,022
10. Total (Lines 5 through 9) .....	15,301,289	15,067,520
11. Net cash from operations (Line 4 minus Line 10) .....	(3,179)	14,073,790
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	5,827,830	3,137,960
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) .....	5,827,830	3,137,960
13. Cost of investments acquired (long-term only exclude cash equivalents and short-term investments):		
13.1 Bonds .....	1,155,846	12,320,480
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) .....	1,155,846	12,320,480
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) .....	4,671,983	(9,182,520)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....		
16.2 Capital and paid in surplus, less treasury stock .....		5,250,000
16.3 Borrowed funds .....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....		
16.5 Dividends to stockholders .....	1,000,000	
16.6 Other cash provided (applied) .....	(5,456,012)	(16,625,582)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(6,456,012)	(11,375,582)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(1,787,207)	(6,484,312)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	8,472,309	14,956,621
19.2 End of period (Line 18 plus Line 19.1) .....	6,685,101	8,472,309

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

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**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) .....	419,892	376,965	98,219	698,639
19.2 Other private passenger auto liability.....	3,277,912	1,778,292	802,527	4,253,677
19.3 Commercial auto no-fault (personal injury protection) .....				
19.4 Other commercial auto liability.....				
21.1 Private passenger auto physical damage .....	1,127,719	588,008	305,867	1,409,860
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 .....	8,364,076			8,364,076
35. TOTALS	13,189,599	2,743,265	1,206,612	14,726,252
<b>DETAILS OF WRITE-INS</b>				
3401. Policy fees .....	8,364,076			8,364,076
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)	8,364,076			8,364,076

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**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) .....	98,219				98,219
19.2 Other private passenger auto liability .....	802,527				802,527
19.3 Commercial auto no-fault (personal injury protection) .....					
19.4 Other commercial auto liability .....					
21.1 Private passenger auto physical damage .....	305,867				305,867
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	1,206,612				1,206,612
36. Accrued retrospective premiums based on experience .....					
37. Earned but unbilled premiums .....					
38. Balance (Sum of Line 35 through 37)					1,206,612
<b>DETAILS OF WRITE-INS</b>					
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) State here basis of computation used in each case The Company uses the daily pro rata method to calculate unearned premium. Policy fees are fully earned at policy issuance.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**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 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
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) .....	13,471,096			927,185	12,124,019	419,892
19.2 Other private passenger auto liability.....	112,955,908			7,798,635	101,879,361	3,277,912
19.3 Commercial auto no-fault (personal injury protection) .....						
19.4 Other commercial auto liability.....						
21.1 Private passenger auto physical damage	40,666,106			2,660,482	36,877,905	1,127,719
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 .....	8,364,076					8,364,076
35. TOTALS	175,457,185			11,386,301	150,881,285	13,189,599
<b>DETAILS OF WRITE-INS</b>						
3401. Policy Fees .....	8,364,076					8,364,076
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)	8,364,076					8,364,076

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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) .....	6,509,139		6,215,360	293,779	146,008	335,245	104,542	15.0
19.2 Other private passenger auto liability .....	74,830,194		71,253,217	3,576,976	1,998,906	2,924,296	2,651,586	62.3
19.3 Commercial auto no-fault (personal injury protection) .....								
19.4 Other commercial auto liability .....								
21.1 Private passenger auto physical damage .....	22,015,619		21,060,303	955,316	107,487	158,272	904,532	64.2
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 .....	103,354,951		98,528,881	4,826,071	2,252,401	3,417,813	3,660,659	24.9
<b>DETAILS OF WRITE-INS</b>								
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 2025 OF THE OLD AMERICAN INDEMNITY 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) .....	1,432,297		1,393,928	38,369	2,416,794		2,309,155	146,008	42,194
19.2 Other private passenger auto liability .....	18,414,791		17,699,031	715,760	31,639,213		30,356,067	1,998,906	324,022
19.3 Commercial auto no-fault (personal injury protection) .....									
19.4 Other commercial auto liability .....									
21.1 Private passenger auto physical damage .....	2,160,798		2,078,380	82,418	726,827		701,757	107,487	11,791
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 .....	22,007,886		21,171,339	836,547	34,782,834		33,366,980	2,252,401	378,007
<b>DETAILS OF WRITE-INS</b>									
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.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct .....	14,585,850			14,585,850
1.2 Reinsurance assumed .....				
1.3 Reinsurance ceded .....	14,148,214			14,148,214
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3) .....	437,636			437,636
2. Commission and brokerage:				
2.1 Direct excluding contingent .....		20,050,795		20,050,795
2.2 Reinsurance assumed, excluding contingent .....				
2.3 Reinsurance ceded, excluding contingent .....		27,396,972		27,396,972
2.4 Contingent - direct .....		154,284		154,284
2.5 Contingent - reinsurance assumed .....				
2.6 Contingent - reinsurance ceded .....				
2.7 Policy and membership fees .....		7,962,281		7,962,281
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) ..		770,388		770,388
3. Allowances to managers and agents .....				
4. Advertising .....		8,909		8,909
5. Boards, bureaus and associations .....		9,052		9,052
6. Surveys and underwriting reports .....		2,189		2,189
7. Audit of assureds' records .....		287,554		287,554
8. Salary and related items:				
8.1 Salaries .....		1,918,173		1,918,173
8.2 Payroll taxes .....		87,107		87,107
9. Employee relations and welfare .....		283,405		283,405
10. Insurance .....		128,781		128,781
11. Directors' fees .....		96,025		96,025
12. Travel and travel items .....		73,352		73,352
13. Rent and rent items .....		91,071		91,071
14. Equipment .....		55,108		55,108
15. Cost or depreciation of EDP equipment and software .....		1,839		1,839
16. Printing and stationery .....		23,833		23,833
17. Postage, telephone and telegraph, exchange and express .....		17,027		17,027
18. Legal and auditing .....		230,473	98,388	328,861
19. Totals (Lines 3 to 18) .....		3,313,898	98,388	3,412,286
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....		2,674,018		2,674,018
20.2 Insurance department licenses and fees .....		626,896		626,896
20.3 Gross guaranty association assessments .....				
20.4 All other (excluding federal and foreign income and real estate) .....		215,131		215,131
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) .....		3,516,045		3,516,045
21. Real estate expenses .....				
22. Real estate taxes .....				
23. Reimbursements by uninsured plans .....				
24. Aggregate write-ins for miscellaneous expenses .....		241,078		241,078
25. Total expenses incurred .....	437,636	7,841,409	98,388 (a)	8,377,432
26. Less unpaid expenses - current year .....	378,007	1,142,808	20,891	1,541,706
27. Add unpaid expenses - prior year .....	594,600	2,041,133	23,147	2,658,880
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)	654,229	8,739,734	100,644	9,494,607
<b>DETAILS OF WRITE-INS</b>				
2401. Professional Fees .....		235,184		235,184
2402. Charitable Contributions .....		5,894		5,894
2403. ....				
2498. Summary of remaining write-ins for Line 24 from overflow page .....				
2499. Totals (Lines 2401 through 2403 plus 2498)(Line 24 above)		241,078		241,078

(a) Includes management fees of \$ 3,341,862 to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**EXHIBIT OF NET INVESTMENT INCOME**

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds .....	(a) ..... 23,241	..... 23,241
1.1 Bonds exempt from U.S. tax .....	(a) .....	.....
1.2 Other bonds (unaffiliated) .....	(a) ..... 932,923	..... 917,838
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) ..... 47,524	..... 45,389
7. Derivative instruments .....	(f) .....	.....
8. Other invested assets .....	.....	.....
9. Aggregate write-ins for investment income .....	.....	.....
10. Total gross investment income .....	1,003,688	986,467
11. Investment expenses .....	.....	(g) ..... 98,388
12. Investment taxes, licenses and fees, excluding federal income taxes .....	.....	(g) .....
13. Interest expense .....	.....	(h) .....
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) .....	.....	98,388
17. Net investment income (Line 10 minus Line 16) .....	.....	888,079
<b>DETAILS OF WRITE-INS</b>		
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) .....	.....	.....
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 \$ ..... 231,667 accrual of discount less \$ ..... 23,455 amortization of premium and less \$ ..... 2,469 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 \$ ..... 6,260 accrual of discount less \$ ..... amortization of premium and less \$ ..... paid for accrued interest on purchases.
- (f) Includes \$ ..... accrual of discount less \$ ..... amortization of premium.
- (g) Includes \$ ..... investment expenses and \$ ..... investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ ..... interest on surplus notes and \$ ..... interest on capital notes.
- (i) Includes \$ ..... 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) .....	..... (108,628)	.....	..... (108,628)	.....	.....
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) .....	(108,628)	.....	(108,628)	.....	.....
<b>DETAILS OF WRITE-INS</b>					
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) .....	.....	.....	.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**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 contracts subject to redetermination .....			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....			
16.2 Funds held by or deposited with reinsured companies .....			
16.3 Other amounts receivable under reinsurance contracts .....			
17. Amounts receivable relating to uninsured plans .....			
18.1 Current federal and foreign income tax recoverable and interest thereon .....			
18.2 Net deferred tax asset .....			
19. Guaranty funds receivable or on deposit .....			
20. Electronic data processing equipment and software .....			
21. Furniture and equipment, including health care delivery assets .....			
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			
23. Receivables from parent, subsidiaries and affiliates .....			
24. Health care and other amounts receivable .....			
25. Aggregate write-ins for other-than-invested assets .....			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....			
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
28. Total (Lines 26 and 27)			
<b>DETAILS OF WRITE-INS</b>			
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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**NOTES TO FINANCIAL STATEMENTS**

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

**A. Accounting Practices**

Old American Indemnity Company (the "Company") was formed as a corporation under the laws of the State of Kentucky on November 11, 1956. The Company, formerly known as Citizens Insurance Company, received its license from the State of Kentucky on May 30, 1957. The Company subsequently changed its name to Viceroy Insurance Company. On June 5, 2012, the Kentucky Department of Insurance approved the change of the Company's name to Old American Indemnity Company. The Texas Department of Insurance approved the Company's request to redomicile to the state of Texas on December 27, 2023.

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 #	2025	2024
<b>NET INCOME</b>					
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 2,903,120	\$ 2,396,297
(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	\$ 2,903,120	\$ 2,396,297
<b>SURPLUS</b>					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 24,930,822	\$ 24,106,753
(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	\$ 24,930,822	\$ 24,106,753

**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 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.

(12) - (13) Not Applicable

**D. Going Concern**

According to management's evaluation, as of December 31, 2025, 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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**NOTES TO FINANCIAL STATEMENTS**

**NOTE 4 Discontinued Operations**

Not Applicable

**NOTE 5 Investments**

A. Mortgage Loans, including Mezzanine Real Estate Loans  
Not Applicable

B. Debt Restructuring  
Not Applicable

C. Reverse Mortgages  
Not Applicable

D. Asset-Backed Securities

(1) Prepayment assumptions for asset-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 is 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) 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.  
Not Applicable

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. Investments in Tax Credit Structures (tax credit investments)  
Not Applicable

L. Restricted Assets

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6	7
	1	2	3	4	5		
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets 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	\$ 2,195,930				\$ 2,195,930	\$ 2,192,538	\$ 3,392
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. Collateral assets received and on balance sheet					\$ -	\$ -	\$ -
p. Assets held under modco reinsurance agreements					\$ -	\$ -	\$ -
q. Assets held under funds withheld reinsurance agreements					\$ -	\$ -	\$ -
r. Total restricted assets (Sum of a through q)	\$ 2,195,930	\$ -	\$ -	\$ -	\$ 2,195,930	\$ 2,192,538	\$ 3,392

(a) Subset of Column 1

(b) Subset of Column 3

**NOTES TO FINANCIAL STATEMENTS**

Restricted Asset Category	Current Year						
	8  Total Non-admitted Restricted	9  Total Admitted Restricted (5 minus 8)	Percentage		12  Reported in General Interrogatories	13  Difference from Note and GI	14  GI Ref
			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%	XXX	XXX	XXX
b. Collateral held under security lending agreements		\$ -	0.000%	0.000%	\$ -	\$ -	25.04 + 25.05
c. Subject to repurchase agreements		\$ -	0.000%	0.000%		\$ -	26.21
d. Subject to reverse repurchase agreements		\$ -	0.000%	0.000%		\$ -	26.22
e. Subject to dollar repurchase agreements		\$ -	0.000%	0.000%		\$ -	26.23
f. Subject to dollar reverse repurchase agreements		\$ -	0.000%	0.000%		\$ -	26.24
g. Placed under option contracts		\$ -	0.000%	0.000%		\$ -	26.25
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		\$ -	0.000%	0.000%		\$ -	26.26
i. FHLB capital stock		\$ -	0.000%	0.000%		\$ -	26.27
j. On deposit with states		\$ 2,195,930	2.523%	2.523%	\$ 2,195,930	\$ -	26.28
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%		\$ -	26.29
l. Pledged collateral to FHLB (including assets backing funding agreements)		\$ -	0.000%	0.000%		\$ -	26.31
m. Pledged as collateral not captured in other categories		\$ -	0.000%	0.000%		\$ -	26.30
n. Other restricted assets		\$ -	0.000%	0.000%		\$ -	26.32
o. Collateral assets received and on balance sheet		\$ -	0.000%	0.000%	XXX	XXX	XXX
p. Assets held under modco reinsurance agreements		\$ -	0.000%	0.000%	XXX	XXX	XXX
q. Assets held under funds withheld reinsurance agreements		\$ -	0.000%	0.000%	XXX	XXX	XXX
r. Total restricted assets (Sum of a through q)	\$ -	\$ 2,195,930	2.523%	2.523%	XXX	XXX	XXX

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

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

GI Reference	Difference between Note and GI (Per Column 13 above)	Explanation
25.04 + 25.05	\$ -	
26.21	\$ -	
26.22	\$ -	
26.23	\$ -	
26.24	\$ -	
26.25	\$ -	
26.26	\$ -	
26.27	\$ -	
26.28	\$ -	
26.29	\$ -	
26.31	\$ -	
26.30	\$ -	
26.32	\$ -	

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

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

4. Collateral Received and Assets Held under Modco/Funds Withheld (FWH) Reinsurance Agreements Reflected as Assets Within the Reporting Entity's Financial Statements  
Not Applicable

5. Disclose whether any of the assets held as collateral or under modified coinsurance (Modco) or funds withheld reinsurance (FWH) agreements have been pledged for another purpose specific to the insurance reporting entity (not for the benefit of the reinsurer). For example, if the insurance reporting entity has used these assets as the collateral in a securities lending agreement, a repo transaction, pledged as collateral to the FHLB, etc. (For Modco/FWH assets, items pledged on behalf of the reinsurer shall not be captured.)  
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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**NOTES TO FINANCIAL STATEMENTS**

Q. Prepayment Penalty and Acceleration Fees

	General Account	Protected Cell
1. Number of CUSIPs	0	
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 Bases.  
Surplus excludes due and accrued investment income if amounts are over 90 days past due.
- B. Total Amount of Due and Accrued Income Excluded.  
At December 31, 2025, 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.

	Amount
Interest Income Due and Accrued	
1. Gross	\$ 147,199
2. Nonadmitted	
3. Admitted	\$ 147,199

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

**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.

	As of End of Current Period			12/31/2024			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	\$ 78,297		\$ 78,297	\$ 157,347		\$ 157,347	\$ (79,050)	\$ -	\$ (79,050)
(b) Statutory Valuation Allowance Adjustment			\$ -			\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 78,297	\$ -	\$ 78,297	\$ 157,347	\$ -	\$ 157,347	\$ (79,050)	\$ -	\$ (79,050)
(d) Deferred Tax Assets Nonadmitted			\$ -			\$ -	\$ -	\$ -	\$ -
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 78,297	\$ -	\$ 78,297	\$ 157,347	\$ -	\$ 157,347	\$ (79,050)	\$ -	\$ (79,050)
(f) Deferred Tax Liabilities			\$ -			\$ -	\$ -	\$ -	\$ -
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 78,297	\$ -	\$ 78,297	\$ 157,347	\$ -	\$ 157,347	\$ (79,050)	\$ -	\$ (79,050)

2.

	As of End of Current Period			12/31/2024			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)	\$ 78,297		\$ 78,297	\$ 157,347		\$ 157,347	\$ (79,050)	\$ -	\$ (79,050)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ 78,297		\$ 78,297	\$ 157,347		\$ 157,347	\$ (79,050)	\$ -	\$ (79,050)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	\$ 3,727,879	XXX	XXX	\$ 3,592,411	XXX	XXX	\$ 135,468
(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))	\$ 78,297	\$ -	\$ 78,297	\$ 157,347	\$ -	\$ 157,347	\$ (79,050)	\$ -	\$ (79,050)

3.

a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	2025	2024
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	715.439%	756.363%
	\$ 24,852,525	\$ 23,949,406

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**NOTES TO FINANCIAL STATEMENTS**

4.

	As of End of Current Period		12/31/2024		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	(Col. 1 - 3) Ordinary	(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)	\$ 78,297	\$ -	\$ 157,347	\$ -	\$ (79,050)	\$ -
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)	\$ 78,297	\$ -	\$ 157,347	\$ -	\$ (79,050)	\$ -
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

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:

	(1) As of End of Current Period	(2) 12/31/2024	(3) (Col. 1 - 2) Change
1. Current Income Tax			
(a) Federal	\$ 669,809	\$ 677,340	\$ (7,531)
(b) Foreign			\$ -
(c) Subtotal (1a+1b)	\$ 669,809	\$ 677,340	\$ (7,531)
(d) Federal income tax on net capital gains			\$ -
(e) Utilization of capital loss carry-forwards			\$ -
(f) Other	\$ (6,930)	\$ 11,378	\$ (18,308)
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 662,879	\$ 688,718	\$ (25,839)
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ 27,619	\$ 42,130	\$ (14,511)
(2) Unearned premium reserve	\$ 50,678	\$ 115,217	\$ (64,539)
(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)	\$ 78,297	\$ 157,347	\$ (79,050)
(b) Statutory valuation allowance adjustment			\$ -
(c) Nonadmitted			\$ -
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 78,297	\$ 157,347	\$ (79,050)
(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)	\$ 78,297	\$ 157,347	\$ (79,050)
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)	\$ 78,297	\$ 157,347	\$ (79,050)

D. Significant Book to Tax Adjustments

The Company does not have any significant book to tax adjustments.

## NOTES TO FINANCIAL STATEMENTS

**E. Additional Disclosures.**

1. The Company does not have any net operating losses available for carryforward to future periods under its tax allocation agreement with Old American Capital Corporation.
2. There is no provision for federal and foreign income taxes incurred as of December 31, 2025.
3. The Company does not have any deposits admitted under Section 6603 of the Internal Revenue Service Code.

**F. Consolidation of Federal Income Tax Return**

1. The Company's Federal Income Tax Return is consolidated with Old American Capital Corporation.
2. Under the terms of a tax allocation agreement between Old American Capital Corporation ("Old American Capital"), formerly known as Portsmouth Capital Corporation), a Delaware corporation, and its subsidiaries, the tax liability of each subsidiary of Old American Capital, including that of the Company, is based upon separate return calculations. The Company is required to make payment to Old American Capital of an amount equal to its share of tax liability no earlier than thirty days prior to Old American Capital's filing date and no later than thirty days after the filing date. In the event the Company would be entitled to a refund of federal income tax for any tax year if it had filed a separate tax return, Old American Capital is required to pay the Company the refund amount when the Consolidated Return is filed by Old American Capital, and no later than thirty days after the refund amount is calculated. If for any taxable period the Company has an item of credit or loss that is not used to reduce its federal income tax liability for that period, that item of credit or loss shall be retained by the Company for possible future use in computing its separate return tax liability or its right to a refund.

In the event the Company has a tax liability that would be due to Old American Capital, but not paid because Old American Capital does not have a tax liability to be paid to the Internal Revenue Service, the Company's liability will be recognized as a surplus contribution from the Parent, Old American Capital.

**G. Federal or Foreign Income Tax Loss Contingencies.**

The Company does not have any federal or foreign income tax loss contingencies.

**H. Repatriation Transition Tax (RTT)**

The Company is not subject to the Repatriation Transition Tax (RTT).

**I. Alternative Minimum Tax (AMT) Credit**

The Company does not have an Alternative Minimum Tax (AMT) Credit.

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

**A. Relationship of Parent, Subsidiaries and Affiliates**

The Company is 100% owned by Old American Capital Corporation.

**B. Transaction Information**

Under the terms of an administrative agreement, Old American Services is responsible for providing administrative support services to the Company, including accounting and information technology, product development, underwriting management and claims audit services in exchange for a fee. This fee is based on 2% of the gross written premium of the Company. In 2025 and 2024, the Company recorded \$3,341,862 and \$3,647,745, respectively, in 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, 2025, the Company reported \$26,795 due to the Parent and \$220,374 due to affiliates.

**E. Management, Service Contracts, Cost Sharing Arrangements**

The Company's affiliate, Old American Services, provides administrative support for the Company, 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-downs for Impairment 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**

Not Applicable

**B. FHLB (Federal Home Loan Bank) Agreements**

Not Applicable

**C. Unused commitments and lines of credit for financing arrangements:**

Not Applicable

## NOTES TO FINANCIAL STATEMENTS

**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  
The Company has 2,000,000 Class A common shares authorized, issued, and outstanding. The Company has no preferred stock outstanding.
- B. Dividend Rate of Preferred Stock  
Not Applicable
- C. Dividend Restrictions  
Without prior approval of its domiciliary commissioner, dividends to shareholders may not be paid except out of that part of the Company's surplus funds which is derived from any realized net profits. Surplus funds for the purposes of this calculation are defined as the excess of assets over liabilities, including capital stock as liability. There are no other restrictions placed on the portion of the Company profits that may be paid as ordinary dividends to shareholders.
- D. Dates and Amounts of Dividends Paid  
The Company paid an ordinary dividend of \$1,000,000 on August 29, 2025 and declared an ordinary dividend of \$1,000,000 on December 31, 2025. In 2024, the Company did not pay an ordinary dividend.
- E. Amount of Ordinary Dividends that may be Paid  
Under the insurance regulations of Texas, there are no other limitations to the amount of ordinary dividends that can be paid, other than what is listed in paragraph C above.
- F. Restrictions on Unassigned Funds  
There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
- G. Mutual Surplus Advances  
Not Applicable
- H. Company Stock Held for Special Purposes  
Not Applicable
- I. Changes in Special Surplus Funds  
Not Applicable
- J. Change in Unassigned Surplus  
The Company did not have a surplus contribution in 2025. In 2024, the Company had a contributed surplus of \$5,750,000.
- K. The Company issued the following surplus debentures or similar obligations:  
Not Applicable
- L. The impact of any restatement due to prior quasi-reorganizations is as follows:  
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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**NOTES TO FINANCIAL STATEMENTS**

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

- A. Transfers of Receivables Reported as Sales  
Not Applicable
- B. Transfer and Servicing of Financial Assets  
Not Applicable
- C. Wash Sales  
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 2025, the direct written premium of \$167,093,109 before policy fees was written by 6 active managing general agents. All 6 of the managing general agents wrote premium that 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
Aggressive Insurance Services, LLC 28470 Avenue Stanford, Suite 250 Santa Clarita, CA 91355	20-8521100	No	Personal auto liability, physical damage and accidental death & dismemberment	U, B, P	\$ 73,407,897
Alpine Rio Insurance Services, LLC 777 International Parkway, Suite 200 Flower Mound, TX 75028	81-0902139	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 2,345,314
AmWins Specialty Auto of Florida, LLC 1580 Sawgrass Corporate Parkway, Suite 402 Sunrise, FL 33323	81-3334172	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 26,745,991
Connect MGA 3700 W 15th St., Suite 200 Plano, TX 75075	45-1475095	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 7,047,413
Insurescan MGA, LLC P.O. Box 3005 Auburn, AL 36831	87-2984529	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 5,974,929
Save Money Car Insurance 6528 E 101st St., Suite D1 #422 Tulsa, OK 74133	46-5338509	No	Personal auto liability and physical damage	U, C, CA, B, P	\$ 51,571,564
<b>Total</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>\$ 167,093,109</b>

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 2025, 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, 2025, the fair value of the Company's financial instruments is summarized as below.

- A. Fair Value Measurements at Reporting Date  
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 - Issuer Credit Obligations	\$ 25,894,581	\$ 27,957,497	\$ 944,778	\$ 24,949,803			
Bonds - Asset Backed Securities	\$ 753,738	\$ 750,860		\$ 753,738			
Cash, Cash Equivalents, and Short Term Investments	\$ 6,685,101	\$ 6,685,101	\$ 6,435,420	\$ 249,681			

- D. Not Practicable to Estimate Fair Value  
Not Applicable
- E. Instruments Measured at NAV  
Not Applicable

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**NOTES TO FINANCIAL STATEMENTS**

**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  
(1) 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**

On February 13, 2026, the Company paid a \$1,000,000 ordinary dividend to its parent, Old American Capital Corporation. This dividend was declared on December 31, 2025.

**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	\$ 21,757,748

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	\$ 12,691,883
3219	35-2293075	ENDURANCE ASSUR CORP	\$ 5,043,771
0922	95-2769232	INSURANCE COMPANY OF THE WEST	\$ 790,726
0158	47-0698507	ODYSSEY REINS CO	\$ 5,533,306

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	\$ 12,691,883
0473	02-0170490	NGM INS CO	\$ 152,546
<b>Total</b>			<b>\$ 12,844,429</b>

- 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			\$ 3,068,741	\$ 529,952	\$ (3,068,741)	\$ (529,952)
b. All Other			\$ 38,478,158	\$ 6,481,910	\$ (38,478,158)	\$ (6,481,910)
c. Total (a+b)	\$ -	\$ -	\$ 41,546,899	\$ 7,011,862	\$ (41,546,899)	\$ (7,011,862)
d. Direct Unearned Premium Reserve						\$ 42,753,512

- 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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**NOTES TO FINANCIAL STATEMENTS**

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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 Changes in Incurred Losses and Loss Adjustment Expenses**

A. Development of Prior Year Losses and Loss Adjustment Expenses

As of December 31, 2024, net reserves totaled \$4,012,413. As of December 31, 2025, \$2,436,990 has been paid for losses and loss adjustment expenses related to insured events of prior years. Reserves remaining for prior years are now \$714,335 as a result of reevaluations of unpaid claims and claim adjustment expenses. Therefore, during 2025, prior year losses and loss adjustment expenses developed favorably by \$861,088. The favorable development is generally the result of ongoing analysis of recent loss development trends.

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**

1. Liability carried for premium deficiency reserves	\$	-
2. Date of the most recent evaluation of this liability	12/31/2025	
3. Was anticipated investment income utilized in the calculation?	Yes [X]	No [ ]

**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

**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. .... 12/31/2023
- 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). .... 04/22/2025
- 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 .....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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, 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 [ ]
- 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 2025 OF THE OLD AMERICAN INDEMNITY 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 2025 OF THE OLD AMERICAN INDEMNITY 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 ..... \$ ..... 2,195,930  
     26.29 On deposit with other regulatory bodies ..... \$ .....  
     26.30 Pledged as collateral - excluding collateral pledged to an FHLB ..... \$ .....  
     26.31 Pledged as collateral to FHLB - including assets backing funding agreements ..... \$ .....  
     26.32 Other ..... \$ .....

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

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

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

- 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? ..... Yes [ ] No [ ]  
 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 2025 OF THE OLD AMERICAN INDEMNITY COMPANY**  
**GENERAL INTERROGATORIES**

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

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

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

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

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

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

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

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Registered With	4 Investment Management Agreement (IMA) Filed
105900 .....	NEW ENGLAND ASSET MANAGEMENT, INC. ....	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 2025 OF THE OLD AMERICAN INDEMNITY 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	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Issuer Credit Obligations .....	28,207,178	26,144,262	(2,062,915)
31.2 Asset-Backed Securities .....	750,860	753,738	2,879
31.3 Preferred stocks .....			
31.4 Totals	28,958,037	26,898,001	(2,060,037)

31.5 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: LSEG (Reuters), S&P Global Market Intelligence, S&P Capital IQ Pro, Bloomberg, PricingDirect, ICE Data Services or Solve. 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 ]

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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? ..... \$ ..... 10,067

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
AIPSO .....	6,967

41.1 Amount of payments for legal expenses, if any? ..... \$ ..... 131,155

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 TRAURIG, P.A. ....	131,155

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 .....	14,726,252	17,106,328
2.3 Premium Ratio (2.1/2.2) .....	0.000	0.000
2.4 Reserve Numerator .....		
2.5 Reserve Denominator .....	3,837,021	6,755,678
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 [ ]

5.2 If yes, is the commission paid:

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

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

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 [ ]

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 Alabama, Arizona, Florida, Louisiana, Oklahoma, South Carolina, and Utah. The Company evaluates its exposures by zip code and country. ....
- 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's marketing efforts have been focused on achieving a spread of risk to minimize catastrophe exposure. The Company participates in multiple reinsurance contracts as well as 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. 62 - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? ..... Yes [ ] No [ X ]
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:  
(a) The entity does not utilize reinsurance; or, ..... Yes [ ] No [ X ]  
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or ..... Yes [ ] 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): ..... \$ \_\_\_\_\_ 10,000
- 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. .... 6
- 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 [ X ] No [ ]
- 19.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ ]

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**FIVE-YEAR HISTORICAL DATA**

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

	1 2025	2 2024	3 2023	4 2022	5 2021
<b>Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11, 16, 17, 18 & 19) .....	126,427,004	142,950,975	105,107,079	56,516,119	66,975,940
2. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	40,666,106	39,436,275	27,541,016	16,847,144	21,641,125
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) .....	8,364,076	7,798,869	5,747,794	3,843,433	5,172,615
5. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
6. Total (Line 35) .....	175,457,185	190,186,119	138,395,889	77,206,696	93,789,680
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11, 16, 17, 18 & 19) .....	3,697,804	7,767,109	5,163,559	2,745,046	3,279,798
8. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	1,127,719	1,902,195	1,274,676	797,357	1,037,056
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) .....	8,364,076	7,798,869	5,657,404	3,681,258	4,832,509
11. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
12. Total (Line 35) .....	13,189,599	17,468,172	12,095,639	7,223,661	9,149,363
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8) .....	2,786,548	2,393,217	1,528,238	766,955	(1,234,322)
14. Net investment gain (loss) (Line 11) .....	779,451	691,798	460,023	239,143	524,548
15. Total other income (Line 15) .....					
16. Dividends to policyholders (Line 17) .....					
17. Federal and foreign income taxes incurred (Line 19) .....	662,879	688,718	417,535	117,358	
18. Net income (Line 20) .....	2,903,120	2,396,297	1,570,726	888,740	(709,774)
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3) .....	87,031,194	101,390,167	106,997,960	53,848,038	68,076,972
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1) .....	6,626,074	8,479,091	16,191,926	5,341,331	6,054,451
20.2 Deferred and not yet due (Line 15.2) .....	30,105,842	36,572,644	36,403,295	16,027,537	18,893,678
20.3 Accrued retrospective premiums (Line 15.3) .....					
21. Total liabilities excluding protected cell business (Page 3, Line 26) .....	62,100,372	77,283,414	91,066,992	42,115,975	57,226,676
22. Losses (Page 3, Line 1) .....	2,252,401	3,417,813	2,275,755	1,751,965	1,758,746
23. Loss adjustment expenses (Page 3, Line 3) .....	378,007	594,600	375,762	274,066	289,740
24. Unearned premiums (Page 3, Line 9) .....	1,206,612	2,743,265	2,381,420	986,095	1,146,540
25. Capital paid up (Page 3, Lines 30 & 31) .....	2,500,000	2,500,000	2,500,000	2,500,000	2,500,000
26. Surplus as regards policyholders (Page 3, Line 37) .....	24,930,822	24,106,753	15,930,969	11,732,062	10,850,296
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11) .....	(3,179)	14,073,790	(2,838,360)	21,164	(523,986)
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital .....	24,930,822	24,106,753	15,930,969	11,732,062	10,850,296
29. Authorized control level risk-based capital .....	3,473,747	3,166,392	2,217,367	1,484,543	2,753,309
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0</b>					
30. Bonds (Line 1) .....	81.1	79.7	61.5	92.9	94.5
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) .....	18.9	20.3	38.5	7.1	5.5
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
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds (Schedule D, Summary, Line 9 + 15, Col. 1) .....					
43. Affiliated preferred stocks (Schedule D, Summary, Line 22, Col. 1) .....					
44. Affiliated common stocks (Schedule D, Summary, Line 28, Col. 1) .....					
45. Affiliated mortgage loans on real estate .....					
46. All other affiliated .....					
47. Total of above Lines 42 to 46 .....					
48. Total Investment in Parent included in Lines 42 to 46 above .....					
49. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 47 above divided by Page 3, Col. 1, Line 37 x 100.0)					

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2025	2 2024	3 2023	4 2022	5 2021
<b>Capital and Surplus Accounts (Page 4)</b>					
50. Net unrealized capital gains (losses) (Line 24) .....					
51. Dividends to stockholders (Line 35) .....	(2,000,000)		(221,883)		(750,000)
52. Change in surplus as regards policyholders for the year (Line 38) .....	824,069	8,175,784	4,198,908	881,766	(987,854)
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
53. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	81,339,333	77,331,764	46,357,560	46,866,196	39,162,733
54. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	22,015,619	18,441,990	11,340,367	11,674,733	14,075,871
55. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....					
56. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....			(200)		10,372
57. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
58. Total (Line 35) .....	103,354,951	95,773,754	57,697,727	58,540,929	53,248,976
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
59. Liability lines (Lines 11, 16, 17, 18 & 19) .....	3,870,755	4,030,466	2,317,382	2,338,212	1,925,711
60. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	955,316	982,602	567,949	583,731	704,451
61. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....					
62. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....			(5)		519
63. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....					
64. Total (Line 35) .....	4,826,071	5,013,068	2,885,326	2,921,943	2,630,681
<b>Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0</b>					
65. Premiums earned (Line 1) .....	100.0	100.0	100.0	100.0	100.0
66. Losses incurred (Line 2) .....	24.9	36.0	31.9	39.5	38.5
67. Loss expenses incurred (Line 3) .....	3.0	6.9	5.7	4.6	5.7
68. Other underwriting expenses incurred (Line 4) .....	53.2	43.2	48.1	46.4	69.2
69. Net underwriting gain (loss) (Line 8) .....	18.9	14.0	14.3	10.4	(13.9)
<b>Other Percentages</b>					
70. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) .....	59.5	42.3	42.6	46.6	67.5
71. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .....	27.8	42.8	37.6	44.0	44.2
72. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0) .....	52.9	72.5	75.9	61.6	84.3
<b>One Year Loss Development (\$000 omitted)</b>					
73. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11) .....	(821)	(242)	(251)	5	(63)
74. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 73 above divided by Page 4, Line 21, Col. 1 x 100.0).....	(3.4)	(1.5)	(2.1)	0.1	(0.5)
<b>Two Year Loss Development (\$000 omitted)</b>					
75. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) .....	(350)	(322)	(63)	(118)	(50)
76. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 75 above divided by Page 4, Line 21, Col. 2 x 100.0) .....	(2.2)	(2.7)	(0.6)	(1.0)	(0.5)

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



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2025

NAIC Company Code 11665

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

(a) Finance and service charges not included in Lines 1 to 35 \$ .....
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2025

NAIC Company Code 11665

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

(a) Finance and service charges not included in Lines 1 to 35 \$ .....
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

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**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY**  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 4762

BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2025

NAIC Company Code 11665

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)	12,750,648	16,151,497		3,747,080	5,926,229	3,261,001	3,938,142	(1,109,087)	802,755	1,789,075		258,592
19.2 Other private passenger auto liability	10,380,598	11,108,956		3,355,242	5,464,369	4,246,700	2,164,924	(85,536)	159,032	1,456,528		210,526
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	3,614,745	3,842,478		1,144,238	1,193,212	1,255,010	42,121	(10,719)	1,495	507,194		73,310
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	1,013,411	1,013,411									960,207	
35. Total (a)	27,759,402	32,116,342		8,246,560	12,583,810	8,762,711	6,145,186	(1,205,342)	963,282	4,713,004		542,428
<b>DETAILS OF WRITE-INS</b>												
3401. Policy Fees	1,013,411	1,013,411									960,207	
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)	1,013,411	1,013,411									960,207	

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

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

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2025

NAIC Company Code 11665

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

(a) Finance and service charges not included in Lines 1 to 35 \$ .....
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

19 GA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 4762

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2025

NAIC Company Code 11665

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)												
19.2 Other private passenger auto liability						(4,082)	3,017		(415)	307		1,282
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage						27						462
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												
35. Total (a)						(4,055)	3,017		(415)	307		1,744
<b>DETAILS OF WRITE-INS</b>												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ .....  
 (b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

19.IN



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2025

NAIC Company Code 11665

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

19 KY

(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 .....



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 4762

BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2025

NAIC Company Code 11665

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)		33,238		7,293	12,932	15,464	9,882		258	1,005	4,612	526
19.2 Other private passenger auto liability	58,865,401	63,560,135		12,467,983	38,689,002	32,967,306	20,432,489	188	(1,162,735)	1,585,089	8,167,151	930,743
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	14,509,258	15,821,006		2,959,907	7,439,180	7,475,538	822,250		(26,243)	13,256	2,013,055	229,411
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	4,153,587	4,153,587									3,978,970	
35. Total (a)	77,561,484	83,572,095		15,435,183	46,141,114	40,458,308	21,264,620	188	(1,188,720)	1,599,350	14,163,788	1,160,680
<b>DETAILS OF WRITE-INS</b>												
3401. Policy Fees	4,153,587	4,153,587									3,978,970	
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)	4,153,587	4,153,587									3,978,970	

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

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

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2025

NAIC Company Code 11665

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

(a) Finance and service charges not included in Lines 1 to 35 \$ .....
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2025

NAIC Company Code 11665

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Federal flood, etc., ending with a Total (a) of 1,300.

(a) Finance and service charges not included in Lines 1 to 35 \$ .....
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

19 NM



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2025

NAIC Company Code 11665

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Federal flood, etc., ending with a Total (a) of 3,100.

(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 NC



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2025

NAIC Company Code 11665

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Federal flood, etc., ending with a Total (a) row showing 638.

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(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 .....



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2025

NAIC Company Code 11665

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

(a) Finance and service charges not included in Lines 1 to 35 \$ .....
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2025

NAIC Company Code 11665

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Auto, Life, etc., and a 'DETAILS OF WRITE-INS' section.

(a) Finance and service charges not included in Lines 1 to 35 \$ .....
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2025

NAIC Company Code 11665

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

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(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 .....



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2025

NAIC Company Code 11665

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance categories like Fire, Multiple peril crop, Federal flood, etc., ending with a Total (a) of 59,948.

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

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

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 4762

BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2025

NAIC Company Code 11665

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)	640,175	955,898		162,333	562,978	368,621	(109,176)	7,083	5,716	3,742	76,314	15,465
19.2 Other private passenger auto liability	3,987,630	5,404,738		1,152,519	4,364,850	3,258,545	5,138,114	121,571	211,858	534,585	475,358	96,333
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	806,359	1,146,773		222,879	1,162,162	1,272,159	407,732	23,283	20,573	2,033	96,125	19,480
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	110,612	110,612									104,805	
35. Total (a)	5,544,776	7,618,021		1,537,731	6,089,990	4,899,325	5,436,670	151,937	238,147	540,360	752,602	131,279
<b>DETAILS OF WRITE-INS</b>												
3401. Policy Fees	110,612	110,612									104,805	
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)	110,612	110,612									104,805	

(a) Finance and service charges not included in Lines 1 to 35 \$ .....  
 (b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4762

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2025

NAIC Company Code 11665

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

(a) Finance and service charges not included in Lines 1 to 35 \$ .....
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

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Schedule F - Part 1 - Assumed Reinsurance

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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			
0499999. Total authorized - affiliates - U.S. non-pool																				
0799999. Total authorized - affiliates - other (non-U.S.)																				
0899999. Total authorized - affiliates																				
39-1173498	.29068	AMERICAN FAMILY CONNECT PROP & CAS I	WI	2	28,507	1,604	388	4,169	46	5,334	1,520	8,341		21,402		8,710		12,692		
31-0542366	.10677	THE CINCINNATI INS CO	OH		12															
38-2145898	.33499	DORINCO REINS CO	MI	2	47,200	3,462	435	6,186	12	10,976	2,685	12,261		36,016		14,258		21,758		
35-2293075	.11551	ENDURANCE ASSUR CORP	DE	2	10,910	656	83	1,724		2,275	570	2,383		7,691		2,648		5,044		
95-2769232	.27847	INSURANCE CO OF THE WEST	CA	2	2,688	112	18	261		387	77	556		1,410		620		791		
04-1543470	.23043	LIBERTY MUT INS CO	MA	2		(2)				1				(1)				(1)		
02-0170490	.14788	NGM INS CO	FL	2		60	1	33		41	20			155		3		153		
47-0698507	.23680	ODYSSEY REINS CO	CT	2	14,808	751	101	1,829		2,608	604	3,126		9,019		3,486		5,533		
13-3031176	.38636	PARTNER REINS CO OF THE US	NY	2				1		2	1			4				4		
30-0703280	.15529	RENAISSANCE EUROPE AG US BRANCH	NY	2																
0999999. Total authorized - other U.S. unaffiliated insurers						104,125	6,643	1,025	14,202	58	21,625	5,477	26,666	75,696		29,724		45,973		
AA-1460023	.00000	RENAISSANCE EUROPE AG	CHE	2		(3)		3											2	
1299999. Total authorized - other non-U.S. insurers							(3)	3												2
1499999. Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)						104,125	6,640	1,028	14,202	58	21,625	5,477	26,666	75,696		29,724		45,973		2
1899999. Total unauthorized - affiliates - U.S. non-pool																				
30-0708277	.00000	ORPHEUS RE LTD	BRB	2	11,386	562	91	1,408	7	2,122	527	3,069		7,785		3,136		4,649		
2099999. Total unauthorized - affiliates - other (non-U.S.) - other						11,386	562	91	1,408	7	2,122	527	3,069	7,785		3,136		4,649		
2199999. Total unauthorized - affiliates - other (non-U.S.)						11,386	562	91	1,408	7	2,122	527	3,069	7,785		3,136		4,649		
2299999. Total unauthorized - affiliates						11,386	562	91	1,408	7	2,122	527	3,069	7,785		3,136		4,649		
98-3398195	.00000	GRYPHON OA SERIES PROTECTED CELL	TN	2	2,419	359	50	407	24	1,151	322	668		2,981		775		2,206	14	
2399999. Total unauthorized - other U.S. unaffiliated insurers						2,419	359	50	407	24	1,151	322	668	2,981		775		2,206	14	
AA-1460019	.00000	MS AMLIN AG	CHE	2		36		3		5	2			46				46	29	
AA-3191306	.00000	BLUEFIRE RE LTD	BMU	2				18		15	9			43				43	3,502	
AA-1460018	.00000	CATLIN RE SWITZERLAND LTD	CHE	2		52		7		8	4			70				70		
AA-5320039	.00000	PEAK REINS CO LTD	HKG	2	8,619	445	61	1,087		1,497	342	1,789		5,221		2,005		3,216		
	.00000	PEAK REINSURANCE NORTH AMERICA LTD	BMU	2	49		1	2		1		47		51		41		10		
AA-3191298	.00000	ANTARES REINS CO LTD	BMU	2		18		15		12	7			52				52		
AA-3190859	.00000	ARIA (SAC) LTD	BMU	2	18,050	1,170	132	2,157		4,536	1,106	4,935		14,035		5,709		8,326		
AA-3770492	.00000	TOPSAIL REINS SPC LTD	CYM	2	9,912	807	224	1,036	23	1,195	372	2,845		6,501		3,205		3,296	60	
AA-3191250	.00000	WATFORD RE LTD	BMU	2		10								10				10		
2699999. Total unauthorized - other non-U.S. insurers						36,630	2,539	417	4,323	23	7,268	1,842	9,616	26,029		10,959		15,070	3,591	
2899999. Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)						50,435	3,461	559	6,139	54	10,541	2,690	13,353	36,796		14,870		21,925	3,604	
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		6		25		19	13			63				63		
4099999. Total certified - other non-U.S. insurers							6	25		19	13			63				63		
4299999. Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)							6	25		19	13			63				63		
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		15															

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Com- pany 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				
RJ-1126609	.00000	LLOYD'S SYNDICATE NUMBER 609	GBR		15																
RJ-1126727	.00000	LLOYD'S SYNDICATE NUMBER 727	GBR		98																
RJ-1127414	.00000	LLOYD'S SYNDICATE NUMBER 1414	GBR		28																
RJ-1120106	.00000	LLOYD'S SYNDICATE NUMBER 1969	GBR		50																
RJ-1128121	.00000	LLOYD'S SYNDICATE NUMBER 2121	GBR		7																
RJ-1128791	.00000	LLOYD'S SYNDICATE NUMBER 2791	GBR		186																
RJ-1128987	.00000	LLOYD'S SYNDICATE NUMBER 2987	GBR		28																
RJ-1460019	.00000	MS AML IN AG	CHE	2	7,279	331	50	805		1,182	251	1,528		4,147		1,704			2,443		
5499999. Total reciprocal jurisdiction - other non-U.S. insurers					7,707	331	50	805		1,182	251	1,528		4,147		1,704			2,443		
5699999. Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					7,707	331	50	805		1,182	251	1,528		4,147		1,704			2,443		
5799999. Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					162,268	10,437	1,637	21,171	111	33,367	8,432	41,547		116,702		46,298			70,404	3,606	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																					
9999999 Totals					162,268	10,437	1,637	21,171	111	33,367	8,432	41,547		116,702		46,298			70,404	3,606	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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		
39-1173498	AMERICAN FAMILY CONNECT PROP & CAS I					8,710	12,692	21,402	25,682	8,710	16,972		16,972	3		475	
31-0542366	THE CINCINNATI INS CO													2			
38-2145898	DORINCO REINS CO					14,258	21,758	36,016	43,219	14,258	28,961		28,961	3		811	
35-2293075	ENDURANCE ASSUR CORP					2,648	5,044	7,691	9,230	2,648	6,582		6,582	2		138	
95-2769232	INSURANCE CO OF THE WEST					620	791	1,410	1,693	620	1,073		1,073	3		30	
04-1543470	LIBERTY MUT INS CO					(1)								3			
02-0170490	NGM INS CO					3	153	155	186	3	184		184	3		5	
47-0698507	ODYSSEY REINS CO					3,486	5,533	9,019	10,823	3,486	7,337		7,337	2		154	
13-3031176	PARTNER REINS CO OF THE US						4	4	4	4	4		4	2			
30-0703280	RENAISSANCE EUROPE AG US BRANCH													2			
0999999	Total authorized - other U.S. unaffiliated insurers			XXX		29,723	45,974	75,697	90,837	29,724	61,113		61,113	XXX		1,614	
AA-1460023	RENAISSANCE EUROPE AG													2			
1299999	Total authorized - other non-U.S. insurers			XXX											XXX		
1499999	Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX		29,723	45,974	75,697	90,837	29,724	61,113		61,113	XXX		1,614	
1899999	Total unauthorized - affiliates - U.S. non-pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
30-0708277	ORPHEUS RE LTD					4,720	7,785	7,785	9,342	3,136	6,207	4,720	1,487	6	142	178	
2099999	Total unauthorized - affiliates - other (non-U.S.) - other			XXX		4,720	7,785	7,785	9,342	3,136	6,207	4,720	1,487	XXX	142	178	
2199999	Total unauthorized - affiliates - other (non-U.S.)			XXX		4,720	7,785	7,785	9,342	3,136	6,207	4,720	1,487	XXX	142	178	
2299999	Total unauthorized - affiliates			XXX		4,720	7,785	7,785	9,342	3,136	6,207	4,720	1,487	XXX	142	178	
98-3398195	GRYPHON OA SERIES PROTECTED CELL					2,171	2,981	2,981	3,578	789	2,789	2,631	157	6	79	19	
2399999	Total unauthorized - other U.S. unaffiliated insurers			XXX		2,171	2,981	2,981	3,578	789	2,789	2,631	157	XXX	79	19	
AA-1460019	MS AMLIN AG					18	46	46	56	29	27	18	9	2			
AA-3191306	BLUEFIRE RE LTD					1,574	43	43	51	51				6			
AA-1460018	CATLIN RE SWITZERLAND LTD					511	70	70	84	84				6		3	
AA-5320039	PEAK REINS CO LTD					3,510	5,221	5,221	6,265	2,005	4,260	3,510	751	4	105	25	
	PEAK REINSURANCE NORTH AMERICA LTD					100	51	51	61	41	20	20		4		1	
AA-3191298	ANTARES REINS CO LTD					260	52	52	62	62				4		2	
AA-3190859	ARIA (SAC) LTD						8,326	14,035	16,842	5,709	11,133	8,326	2,807	6	250	337	
AA-3770492	TOPSAIL REINS SPC LTD					3,237	6,501	6,501	7,801	3,264	4,537	3,237	1,300	6	97	156	
AA-3191250	WATFORD RE LTD					15	10	10	12		12			6			
2699999	Total unauthorized - other non-U.S. insurers			XXX		9,224	8,326	26,029	31,235	11,098	20,136	15,269	4,867	XXX	458	518	
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX		11,395	13,506	36,796	44,155	15,023	29,131	22,620	6,511	XXX	678	715	
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					64	63	63	76		76	64	12	2	1		

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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)
4099999. Total certified - other non-U.S. insurers			64	XXX		63			63	76		76	64	12	XXX	1
4299999. Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			64	XXX		63			63	76		76	64	12	XXX	1
4699999. Total reciprocal jurisdiction - affiliates - U.S. non-pool				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-1128791 ... LLOYD'S SYNDICATE NUMBER 2791															6	
RJ-1128987 ... LLOYD'S SYNDICATE NUMBER 2987															6	
RJ-1460019 ... MS AMLIN AG			3,492	0001		4,147			4,147	4,976	1,704	3,272	3,272		2	69
5499999. Total reciprocal jurisdiction - other non-U.S. insurers			3,492	XXX		4,147			4,147	4,976	1,704	3,272	3,272		XXX	69
5699999. Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			3,492	XXX		4,147			4,147	4,976	1,704	3,272	3,272		XXX	69
5799999. Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			14,950	XXX		70,728			116,703	140,043	46,451	93,592	25,956	67,636	XXX	749
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals			14,950	XXX		70,728			116,703	140,043	46,451	93,592	25,956	67,636	XXX	749

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												42 Total Overdue Cols. 38+39 +40+41
0499999. Total authorized - affiliates - U.S. non-pool																	XXX
0799999. Total authorized - affiliates - other (non-U.S.)																	XXX
0899999. Total authorized - affiliates																	XXX
39-1173498 .. AMERICAN FAMILY CONNECT PROP & CAS I .....	1,991						1,992			1,992		0.0					YES
31-0542366 .. THE CINCINNATI INS CO .....																	YES
38-2145898 .. DORINCO REINS CO .....	3,807	89					3,897			3,897		2.3					YES
35-2293075 .. ENDURANCE ASSUR CORP .....	724	15					738			738		2.0					YES
95-2769232 .. INSURANCE CO OF THE WEST .....	130						130			130							YES
04-1543470 .. LIBERTY MUT INS CO .....	(2)						(2)			(2)		(7.9)					YES
02-0170490 .. NGM INS CO .....	52	9					61			61		15.1					YES
47-0698507 .. ODYSSEY REINS CO .....	852						852			852							YES
13-3031176 .. PARTNER REINS CO OF THE US .....																	YES
30-0703280 .. RENAISSANCE EUROPE AG US BRANCH .....																	YES
0999999. Total authorized - other U.S. unaffiliated insurers	7,554	113	1				114			7,668		1.5					XXX
AA-1460023 .. RENAISSANCE EUROPE AG .....												100.0					YES
1299999. Total authorized - other non-U.S. insurers												100.0					XXX
1499999. Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	7,554	113	1				114			7,668		1.5					XXX
1899999. Total unauthorized - affiliates - U.S. non-pool																	XXX
30-0708277 .. ORPHEUS RE LTD .....	654						654			654							YES
2099999. Total unauthorized - affiliates - other (non-U.S.) - other	654						654			654							XXX
2199999. Total unauthorized - affiliates - other (non-U.S.)	654						654			654							XXX
2299999. Total unauthorized - affiliates	654						654			654							XXX
98-3398195 .. GRYPHON OA SERIES PROTECTED CELL .....	410						410			410							YES
2399999. Total unauthorized - other U.S. unaffiliated insurers	410						410			410							XXX
AA-1460019 .. MS AMLIN AG .....	36						36			36		0.1					YES
AA-3191306 .. BLUEFIRE RE LTD .....																	YES
AA-1460018 .. CATLIN RE SWITZERLAND LTD .....	52						52			52							YES
AA-5320039 .. PEAK REINS CO LTD .....	506						506			506		0.0					YES
.. PEAK REINSURANCE NORTH AMERICA LTD .....	1						1			1							YES
AA-3191298 .. ANTARES REINS CO LTD .....	18						18			18							YES
AA-3190859 .. ARIA (SAC) LTD .....	1,302						1,302			1,302							YES
AA-3770492 .. TOPSAIL REINS SPC LTD .....	894	95	42				1,031			1,031		13.3					YES
AA-3191250 .. WATFORD RE LTD .....	10						10			10							YES
2699999. Total unauthorized - other non-U.S. insurers	2,820	95	42				137			2,956		4.6					XXX
2899999. Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	3,883	95	42				137			4,020		3.4					XXX
3299999. Total certified - affiliates - U.S. non-pool																	XXX
3599999. Total certified - affiliates - other (non-U.S.)																	XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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												42 Total Overdue Cols. 38+39 +40+41
3699999	Total certified - affiliates																XXX
CR-1460019	MS AMLIN AG	6					6			6							YES
4099999	Total certified - other non-U.S. insurers	6					6			6							XXX
4299999	Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	6					6			6							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
RJ-1126609	LLOYD'S SYNDICATE NUMBER 609																YES
RJ-1126727	LLOYD'S SYNDICATE NUMBER 727																YES
RJ-1127414	LLOYD'S SYNDICATE NUMBER 1414																YES
RJ-1120106	LLOYD'S SYNDICATE NUMBER 1969																YES
RJ-1128121	LLOYD'S SYNDICATE NUMBER 2121																YES
RJ-1128791	LLOYD'S SYNDICATE NUMBER 2791																YES
RJ-1128987	LLOYD'S SYNDICATE NUMBER 2987																YES
RJ-1460019	MS AMLIN AG	380					380			380							YES
5499999	Total reciprocal jurisdiction - other non-U.S. insurers	380					380			380							XXX
5699999	Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	380					380			380							XXX
5799999	Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	11,823	208	43			251	12,074		12,074		2.1					XXX
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																XXX
9999999	Totals	11,823	208	43			251	12,074		12,074		2.1					XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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	
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	
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	
35-2293075	ENDURANCE ASSUR CORP	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	
04-1543470	LIBERTY MUT INS CO	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	
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	
2299999	Total unauthorized - affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
98-3398195	GRYPHON OA SERIES PROTECTED CELL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2399999	Total unauthorized - other U.S. unaffiliated insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460019	MS AML IN AG	XXX	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	XXX	
AA-1460018	CATLIN RE SWITZERLAND LTD	XXX	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	XXX	
	PEAK REINSURANCE NORTH AMERICA LTD	XXX	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	XXX	
AA-3190859	ARIA (SAC) LTD	XXX	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	XXX	
AA-3191250	WATFORD RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999	Total unauthorized - other non-U.S. insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3299999	Total certified - affiliates - U.S. non-pool			XXX					XXX	XXX									
3599999	Total certified - affiliates - other (non-U.S.)			XXX					XXX	XXX									
3699999	Total certified - affiliates			XXX					XXX	XXX									
CR-1460019	MS AML IN AG	3	.03/08/2022	20.0			63		13	101.3	100.0				63				

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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		
4099999. Total certified - other non-U.S. insurers			XXX			63	13	XXX	XXX			63						
4299999. Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX			63	13	XXX	XXX			63						
4699999. Total reciprocal jurisdiction - affiliates - U.S. non-pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4999999. Total reciprocal jurisdiction - affiliates - other (non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5099999. Total reciprocal jurisdiction - affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
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	
RJ-1128121	LLOYD'S SYNDICATE NUMBER 2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
RJ-1128791	LLOYD'S SYNDICATE NUMBER 2791	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	
RJ-1460019	MS AML IN AG	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			63	13	XXX	XXX			63						
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX					XXX	XXX									
9999999 Totals			XXX			63	13	XXX	XXX			63						

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance			
			72 Provision for 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	
39-1173498	AMERICAN FAMILY CONNECT PROP & CAS I		XXX	XXX				XXX	XXX	
31-0542366	THE CINCINNATI INS CO		XXX	XXX				XXX	XXX	
38-2145898	DORINCO REINS CO		XXX	XXX				XXX	XXX	
35-2293075	ENDURANCE ASSUR CORP		XXX	XXX				XXX	XXX	
95-2769232	INSURANCE CO OF THE WEST		XXX	XXX				XXX	XXX	
04-1543470	LIBERTY MUT INS CO		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	RENAISSANCERE EUROPE AG US BRANCH		XXX	XXX				XXX	XXX	
0999999	Total authorized - other U.S. unaffiliated insurers		XXX	XXX				XXX	XXX	
AA-1460023	RENAISSANCERE 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	
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	
2399999	Total unauthorized - other U.S. unaffiliated insurers				XXX	XXX	XXX		XXX	
AA-1460019	MS AMLIN 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-5320039	PEAK REINS CO LTD				XXX	XXX	XXX		XXX	
	PEAK REINSURANCE NORTH AMERICA LTD				XXX	XXX	XXX		XXX	
AA-3191298	ANTARES REINS CO LTD				XXX	XXX	XXX		XXX	
AA-3190859	ARIA (SAC) LTD				XXX	XXX	XXX		XXX	
AA-3770492	TOPSAIL REINS SPC 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	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance				
			72 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	74 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)	
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	
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-1128791	LLOYD'S SYNDICATE NUMBER 2791		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 2025 OF THE OLD AMERICAN INDEMNITY 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.	TOPSAIL REINSURANCE SPC, LTD .....	21.000	7,223
2.	ORPHEUS RE LTD .....	20.000	2,410
3.	DORINCO REINS CO .....	19.000	2,576
4.	AMERICAN FAMILY CONNECT P&C INS CO .....	18.000	25,329
5.	ODYSSEY REINS CO .....	18.000	15,379

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.	DORINCO REINS CO .....	36,016	47,200	Yes [ ] No [ X ]
7.	AMERICAN FAMILY CONNECT P&C INS CO .....	21,402	28,507	Yes [ ] No [ X ]
8.	ARIA (SAC) LTD .....	14,035	18,050	Yes [ ] No [ X ]
9.	ODYSSEY REINS CO .....	9,019	14,808	Yes [ ] No [ X ]
10.	ORPHEUS RE LTD .....	7,785	11,386	Yes [ X ] No [ ]

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE F - PART 6**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12) .....	35,393,457		35,393,457
2. Premiums and considerations (Line 15) .....	36,731,916		36,731,916
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	12,073,794	(12,073,794)	
4. Funds held by or deposited with reinsured companies (Line 16.2) .....			
5. Other assets .....	2,832,027		2,832,027
6. Net amount recoverable from reinsurers .....		66,797,822	66,797,822
7. Protected cell assets (Line 27) .....			
8. Totals (Line 28) .....	87,031,194	54,724,028	141,755,222
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	2,630,409	63,081,298	65,711,706
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	1,163,699		1,163,699
11. Unearned premiums (Line 9) .....	1,206,612	41,546,899	42,753,512
12. Advance premiums (Line 10) .....			
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	1,000,000		1,000,000
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....	46,298,233	(46,298,233)	
15. Funds held by company under reinsurance treaties (Line 13) .....	3,605,937	(3,605,937)	
16. Amounts withheld or retained by company for account of others (Line 14) .....	5,744,191		5,744,191
17. Provision for reinsurance (Line 16) .....			
18. Other liabilities .....	451,292		451,292
19. Total liabilities excluding protected cell business (Line 26) .....	62,100,372	54,724,028	116,824,400
20. Protected cell liabilities (Line 27) .....			
21. Surplus as regards policyholders (Line 37)	24,930,822	XXX	24,930,822
22. Totals (Line 38)	87,031,194	54,724,028	141,755,222

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

If yes, give full explanation: .....

Schedule H - Part 1 - Analysis of Underwriting Operations

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

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

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES**  
**SCHEDULE P - PART 1 - SUMMARY**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2016.....	9,113	8,781	332	8,398	8,039	217	208	518	494	119	391	XXX
3. 2017.....	4,326	4,154	172	2,922	2,775	48	47	343	325	7	167	XXX
4. 2018.....	2,341	2,259	83	1,502	1,426	42	40	165	157	5	86	XXX
5. 2019.....	48,299	46,888	1,412	26,500	25,679	46	43	4,365	4,233	50	955	XXX
6. 2020.....	64,755	61,753	3,002	38,132	36,289	95	91	6,836	6,507	115	2,176	XXX
7. 2021.....	83,075	79,035	4,040	70,028	66,527	836	794	7,313	6,947	229	3,909	XXX
8. 2022.....	76,743	73,031	3,711	52,386	49,767	454	431	6,275	5,961	152	2,956	XXX
9. 2023.....	104,837	99,789	5,048	67,168	63,810	525	498	9,951	9,454	182	3,882	XXX
10. 2024.....	178,932	169,624	9,307	98,330	93,001	948	901	17,647	16,678	301	6,346	XXX
11. 2025.....	175,424	169,062	6,362	61,249	58,712	865	825	13,432	12,966	165	3,043	XXX
12. Totals	XXX	XXX	XXX	426,616	406,025	4,076	3,879	66,845	63,723	1,324	23,910	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.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....	27	26	13	12			5	5	2	2		2	2
6. 2020.....	19	18	36	35			14	13	3	3		4	3
7. 2021.....	52	49	227	216	7	6	53	51	14	13		18	9
8. 2022.....	163	155	353	336			77	73	25	23		31	20
9. 2023.....	690	655	1,366	1,297	21	20	268	255	102	97		122	79
10. 2024.....	3,376	3,193	4,945	4,690	23	22	1,384	1,311	449	426		537	407
11. 2025.....	17,681	17,075	27,842	26,781	65	63	3,614	3,472	2,793	2,688		1,916	3,379
12. Totals	22,008	21,171	34,783	33,367	116	111	5,417	5,180	3,388	3,252		2,630	3,899

	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. 2016.....	9,133	8,742	391	100.2	99.6	117.8					
3. 2017.....	3,313	3,147	167	76.6	75.7	97.0					
4. 2018.....	1,709	1,623	86	73.0	71.9	103.8					
5. 2019.....	30,958	30,001	957	64.1	64.0	67.8				2	
6. 2020.....	45,135	42,955	2,180	69.7	69.6	72.6				3	1
7. 2021.....	78,530	74,604	3,927	94.5	94.4	97.2				14	4
8. 2022.....	59,733	56,746	2,987	77.8	77.7	80.5				26	5
9. 2023.....	80,091	76,087	4,005	76.4	76.2	79.3				103	20
10. 2024.....	127,104	120,221	6,883	71.0	70.9	74.0				439	99
11. 2025.....	127,542	122,583	4,959	72.7	72.5	78.0				1,666	250
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	2,252	378

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE P - PART 2 - SUMMARY**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....	129	119	90	88	85	84	85	84	85	85		1
2. 2016.....	375	397	396	375	370	369	368	368	367	367		(1)
3. 2017.....	XXX	179	163	152	147	147	148	148	149	149		1
4. 2018.....	XXX	XXX	93	82	75	76	77	77	78	78		1
5. 2019.....	XXX	XXX	XXX	862	850	834	821	818	818	825	7	8
6. 2020.....	XXX	XXX	XXX	XXX	1,958	1,912	1,869	1,862	1,854	1,851	(2)	(11)
7. 2021.....	XXX	XXX	XXX	XXX	XXX	3,573	3,633	3,577	3,568	3,560	(7)	(17)
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	2,925	2,741	2,687	2,672	(15)	(70)
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,765	3,593	3,502	(91)	(263)
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,603	5,891	(712)	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,388	XXX	XXX
12. Totals											(821)	(350)

**SCHEDULE P - PART 3 - SUMMARY**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025		
1. Prior.....	000	103	133	141	141	141	82	85	85	85	XXX	XXX
2. 2016.....	196	342	362	366	368	368	367	367	367	367	XXX	XXX
3. 2017.....	XXX	85	136	143	144	144	148	148	149	149	XXX	XXX
4. 2018.....	XXX	XXX	45	69	71	75	78	78	78	78	XXX	XXX
5. 2019.....	XXX	XXX	XXX	391	749	793	804	809	811	823	XXX	XXX
6. 2020.....	XXX	XXX	XXX	XXX	996	1,710	1,804	1,832	1,845	1,848	XXX	XXX
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1,891	3,262	3,447	3,510	3,543	XXX	XXX
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	1,465	2,439	2,595	2,642	XXX	XXX
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,723	3,171	3,385	XXX	XXX
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,380	5,377	XXX	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,577	XXX	XXX

**SCHEDULE P - PART 4 - SUMMARY**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....	101	51	10	4	1	2	1			
2. 2016.....	115	48	21	6	1	1				
3. 2017.....	XXX	61	18	6	2	1				
4. 2018.....	XXX	XXX	27	8	2	1				
5. 2019.....	XXX	XXX	XXX	306	61	23	9	4	2	1
6. 2020.....	XXX	XXX	XXX	XXX	615	136	39	16	7	3
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1,042	213	76	32	14
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	945	182	48	22
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,245	285	82
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,087	330
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,203

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS**  
(\$000 OMITTED)

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

**NONE**

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

**NONE**

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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							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. 2016.....	5,593.....	5,362.....	231.....	5,997.....	5,737.....	152.....	145.....	318.....	304.....	28.....	280.....	1,661.....
3. 2017.....	2,702.....	2,579.....	123.....	2,033.....	1,931.....	34.....	33.....	213.....	202.....	1.....	113.....	536.....
4. 2018.....	1,578.....	1,511.....	67.....	1,083.....	1,029.....	26.....	26.....	127.....	121.....	3.....	61.....	290.....
5. 2019.....	38,372.....	37,240.....	1,132.....	22,110.....	21,426.....	24.....	23.....	3,482.....	3,377.....	18.....	790.....	6,666.....
6. 2020.....	50,871.....	48,493.....	2,378.....	30,939.....	29,445.....	62.....	59.....	5,371.....	5,113.....	25.....	1,755.....	8,540.....
7. 2021.....	63,255.....	60,161.....	3,094.....	54,043.....	51,341.....	572.....	544.....	5,584.....	5,305.....	45.....	3,010.....	13,836.....
8. 2022.....	58,710.....	55,855.....	2,855.....	41,663.....	39,580.....	326.....	310.....	4,848.....	4,606.....	39.....	2,342.....	11,018.....
9. 2023.....	82,205.....	78,186.....	4,018.....	54,252.....	51,539.....	356.....	338.....	7,895.....	7,500.....	48.....	3,125.....	13,084.....
10. 2024.....	141,082.....	133,558.....	7,524.....	79,008.....	74,715.....	633.....	601.....	14,149.....	13,373.....	74.....	5,101.....	19,833.....
11. 2025.....	133,998.....	129,046.....	4,952.....	43,382.....	41,584.....	571.....	544.....	10,524.....	10,162.....	52.....	2,186.....	18,313.....
12. Totals.....	XXX.....	XXX.....	XXX.....	334,510.....	318,328.....	2,756.....	2,623.....	52,512.....	50,064.....	333.....	18,764.....	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. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....	27.....	26.....	13.....	12.....		5.....	5.....	2.....	2.....		2.....	2.....	
6. 2020.....	19.....	18.....	36.....	35.....		14.....	13.....	3.....	3.....		4.....	3.....	
7. 2021.....	41.....	39.....	227.....	216.....	7.....	6.....	53.....	51.....	14.....	13.....	17.....	8.....	
8. 2022.....	133.....	126.....	340.....	323.....		77.....	73.....	24.....	23.....		29.....	20.....	
9. 2023.....	681.....	647.....	1,345.....	1,278.....	20.....	19.....	266.....	253.....	101.....	96.....	121.....	78.....	
10. 2024.....	3,072.....	2,904.....	4,916.....	4,662.....	23.....	22.....	1,379.....	1,305.....	441.....	418.....	519.....	394.....	
11. 2025.....	15,875.....	15,334.....	27,178.....	26,139.....	65.....	63.....	3,552.....	3,412.....	2,575.....	2,478.....	1,819.....	2,850.....	
12. Totals.....	19,847.....	19,093.....	34,056.....	32,665.....	115.....	111.....	5,347.....	5,113.....	3,160.....	3,033.....	2,511.....	3,355.....	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2016.....	6,467.....	6,187.....	280.....	115.6.....	115.4.....	121.5.....					
3. 2017.....	2,279.....	2,166.....	113.....	84.4.....	84.0.....	92.2.....					
4. 2018.....	1,236.....	1,175.....	61.....	78.3.....	77.8.....	90.7.....					
5. 2019.....	25,664.....	24,871.....	792.....	66.9.....	66.8.....	70.0.....				2.....	
6. 2020.....	36,444.....	34,685.....	1,759.....	71.6.....	71.5.....	73.9.....				3.....	1.....
7. 2021.....	60,542.....	57,515.....	3,027.....	95.7.....	95.6.....	97.8.....				13.....	4.....
8. 2022.....	47,411.....	45,040.....	2,371.....	80.8.....	80.6.....	83.0.....				24.....	5.....
9. 2023.....	64,916.....	61,671.....	3,246.....	79.0.....	78.9.....	80.8.....				101.....	19.....
10. 2024.....	103,622.....	98,001.....	5,620.....	73.4.....	73.4.....	74.7.....				422.....	98.....
11. 2025.....	103,723.....	99,718.....	4,006.....	77.4.....	77.3.....	80.9.....				1,580.....	239.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	2,145.....	366.....

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 2025 OF THE OLD AMERICAN INDEMNITY 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	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								XXX.....	
2. 2016.....	3,520.....	3,419.....	101.....	2,401.....	2,302.....	65.....	63.....	200.....	190.....	91.....	111.....	1,267.....
3. 2017.....	1,624.....	1,576.....	49.....	889.....	844.....	15.....	14.....	130.....	123.....	6.....	53.....	388.....
4. 2018.....	764.....	748.....	16.....	419.....	397.....	16.....	15.....	38.....	36.....	2.....	25.....	135.....
5. 2019.....	9,927.....	9,647.....	280.....	4,390.....	4,253.....	22.....	21.....	883.....	856.....	32.....	165.....	4,098.....
6. 2020.....	13,884.....	13,261.....	624.....	7,193.....	6,844.....	33.....	31.....	1,465.....	1,395.....	91.....	421.....	5,728.....
7. 2021.....	19,821.....	18,875.....	946.....	15,985.....	15,186.....	264.....	250.....	1,728.....	1,642.....	183.....	899.....	11,459.....
8. 2022.....	18,033.....	17,176.....	857.....	10,723.....	10,187.....	127.....	121.....	1,427.....	1,356.....	113.....	614.....	6,445.....
9. 2023.....	22,632.....	21,603.....	1,029.....	12,916.....	12,271.....	169.....	160.....	2,056.....	1,954.....	134.....	757.....	5,844.....
10. 2024.....	37,849.....	36,066.....	1,783.....	19,322.....	18,286.....	316.....	300.....	3,497.....	3,305.....	227.....	1,245.....	8,843.....
11. 2025.....	41,426.....	40,016.....	1,410.....	17,867.....	17,129.....	294.....	280.....	2,908.....	2,803.....	113.....	857.....	8,693.....
12. Totals.....	XXX.....	XXX.....	XXX.....	92,106.....	87,698.....	1,320.....	1,255.....	14,333.....	13,659.....	991.....	5,147.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....													
7. 2021.....	11.....	11.....										1.....	1.....
8. 2022.....	30.....	29.....	14.....	13.....					1.....	1.....		2.....	
9. 2023.....	9.....	9.....	20.....	19.....	1.....	1.....	2.....	2.....	1.....	1.....		2.....	1.....
10. 2024.....	304.....	289.....	29.....	27.....			5.....	5.....	8.....	8.....		18.....	13.....
11. 2025.....	1,806.....	1,742.....	663.....	642.....			62.....	60.....	218.....	209.....		97.....	529.....
12. Totals.....	2,161.....	2,078.....	727.....	702.....	1.....	1.....	70.....	67.....	228.....	219.....		119.....	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. 2016.....	2,666.....	2,555.....	111.....	75.7.....	74.7.....	109.5.....					
3. 2017.....	1,034.....	981.....	53.....	63.7.....	62.2.....	109.2.....					
4. 2018.....	473.....	448.....	25.....	61.9.....	59.9.....	159.9.....					
5. 2019.....	5,294.....	5,130.....	165.....	53.3.....	53.2.....	58.9.....					
6. 2020.....	8,691.....	8,270.....	421.....	62.6.....	62.4.....	67.5.....					
7. 2021.....	17,989.....	17,089.....	899.....	90.8.....	90.5.....	95.1.....					1.....
8. 2022.....	12,322.....	11,706.....	616.....	68.3.....	68.2.....	71.9.....					2.....
9. 2023.....	15,175.....	14,416.....	759.....	67.0.....	66.7.....	73.7.....					1.....
10. 2024.....	23,482.....	22,219.....	1,263.....	62.0.....	61.6.....	70.8.....					17.....
11. 2025.....	23,819.....	22,865.....	954.....	57.5.....	57.1.....	67.6.....					86.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		107.....

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 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS**

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

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

1. Prior.....	184	179	150	148	145	144	145	144	144	144		
2. 2016.....	276	295	294	273	268	267	266	266	266	266		
3. 2017.....	XXX	132	118	107	102	102	103	103	102	102		
4. 2018.....	XXX	XXX	74	61	54	54	55	55	55	55		
5. 2019.....	XXX	XXX	XXX	720	713	697	684	680	680	687	7	8
6. 2020.....	XXX	XXX	XXX	XXX	1,598	1,562	1,517	1,512	1,503	1,500	(2)	(12)
7. 2021.....	XXX	XXX	XXX	XXX	XXX	2,800	2,824	2,769	2,756	2,747	(9)	(22)
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	2,411	2,202	2,142	2,127	(16)	(75)
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,149	2,974	2,846	(128)	(303)
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,569	4,821	(748)	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,547	XXX	XXX
12. Totals											(896)	(405)

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

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

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

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

**SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL**

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

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

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

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

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

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

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

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

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

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY**  
**SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

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

**SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE**

1. Prior.....	(55)	(60)	(60)	(60)	(60)	(60)	(60)	(60)	(59)	(59)		1
2. 2016.....	99	102	102	102	102	102	102	102	101	101		(1)
3. 2017.....	XXX	47	45	45	45	45	45	45	46	46		1
4. 2018.....	XXX	XXX	19	21	21	22	22	22	23	23		1
5. 2019.....	XXX	XXX	XXX	142	137	137	137	138	138	138		
6. 2020.....	XXX	XXX	XXX	XXX	360	350	352	350	351	351		1
7. 2021.....	XXX	XXX	XXX	XXX	XXX	773	809	808	812	813	1	5
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	514	539	545	545		6
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	615	618	656	37	41
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,034	1,070	36	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	841	XXX	XXX
12. Totals											75	54

**SCHEDULE P - PART 2K - FIDELITY/SURETY**

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

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

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

**SCHEDULE P - PART 2M - INTERNATIONAL**

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

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**NONE**

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

1. Prior.....	000.....	103.....	133.....	141.....	141.....	141.....	141.....	144.....	144.....	144.....	157.....	
2. 2016.....	108.....	240.....	260.....	264.....	266.....	266.....	266.....	266.....	266.....	266.....	1,005.....	656.....
3. 2017.....	XXX.....	44.....	91.....	98.....	99.....	99.....	102.....	102.....	102.....	102.....	360.....	176.....
4. 2018.....	XXX.....	XXX.....	28.....	48.....	50.....	53.....	55.....	55.....	55.....	55.....	195.....	95.....
5. 2019.....	XXX.....	XXX.....	XXX.....	270.....	613.....	657.....	667.....	671.....	672.....	685.....	4,250.....	2,414.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	683.....	1,361.....	1,452.....	1,482.....	1,494.....	1,497.....	5,431.....	3,106.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,213.....	2,459.....	2,640.....	2,699.....	2,731.....	8,552.....	5,276.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,000.....	1,907.....	2,053.....	2,099.....	6,369.....	4,629.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,217.....	2,551.....	2,730.....	7,883.....	5,123.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,513.....	4,325.....	11,699.....	7,740.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,825.....	7,694.....	7,769.....

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

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

**NONE**

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

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

**NONE**

**SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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			
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025			
1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

**NONE**

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

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

**NONE**

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

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

**NONE**

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

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

**NONE**

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

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

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY**  
**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

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

**SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE**

1. Prior	000							(59)	(59)	(59)	(59)		
2. 2016	88	102	102	102	102	102	101	101	101	101	101	675	592
3. 2017	XXX	41	45	45	45	45	46	46	46	46	46	216	172
4. 2018	XXX	XXX	17	21	21	22	23	23	23	23	23	94	41
5. 2019	XXX	XXX	XXX	121	136	136	137	138	138	138	138	1,274	2,824
6. 2020	XXX	XXX	XXX	XXX	313	349	352	350	351	351	351	2,158	3,570
7. 2021	XXX	XXX	XXX	XXX	XXX	678	803	807	812	812	812	5,186	6,272
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	465	532	542	543	543	2,428	4,017
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	506	619	654	654	2,596	3,247
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	867	1,052	1,052	3,799	5,031
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	752	752	3,449	4,715

**SCHEDULE P - PART 3K - FIDELITY/SURETY**

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

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

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

**SCHEDULE P - PART 3M - INTERNATIONAL**

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

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**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS**

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

**NONE**

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

1. Prior.....	101	51	10	4	1	2	1			
2. 2016.....	115	48	21	6	1	1				
3. 2017.....	XXX	61	18	6	2	1				
4. 2018.....	XXX	XXX	27	8	2	1				
5. 2019.....	XXX	XXX	XXX	306	61	23	9	4	2	1
6. 2020.....	XXX	XXX	XXX	XXX	615	136	39	16	7	3
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1,042	213	76	32	14
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	945	182	49	21
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,213	287	81
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,054	327
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,179

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

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

**NONE**

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

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

**NONE**

**SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL**

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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

**NONE**

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

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

**NONE**

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

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

**NONE**

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

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

**NONE**

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

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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,  
 EARTHQUAKE, BURGLARY, AND THEFT)**

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

**NONE**

**SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE**

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				1
9. 2023.....	XXX	32	(2)	1						
10. 2024.....	XXX	33	2							
11. 2025.....	XXX	24								

**SCHEDULE P - PART 4K - FIDELITY/SURETY**

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

**NONE**

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

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

**NONE**

**SCHEDULE P - PART 4M - INTERNATIONAL**

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

**NONE**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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 2025 OF THE OLD AMERICAN INDEMNITY 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior	521	124	23	7	2			1		
2. 2016	648	961	995	1,004	1,005	1,005	1,005	1,005	1,005	1,005
3. 2017	XXX	249	342	353	355	356	360	360	360	360
4. 2018	XXX	XXX	131	179	187	191	194	195	195	195
5. 2019	XXX	XXX	XXX	2,800	4,055	4,199	4,236	4,239	4,247	4,250
6. 2020	XXX	XXX	XXX	XXX	3,594	5,137	5,326	5,378	5,403	5,431
7. 2021	XXX	XXX	XXX	XXX	XXX	5,415	8,142	8,430	8,506	8,552
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	4,153	6,049	6,305	6,369
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,577	7,614	7,883
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,289	11,699
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,694

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior	140	30	9	2	2	1	1			
2. 2016	335	35	12	2	1	1				
3. 2017	XXX	115	25	9	4	3				
4. 2018	XXX	XXX	82	20	6	3	1			
5. 2019	XXX	XXX	XXX	1,016	197	74	34	13	8	2
6. 2020	XXX	XXX	XXX	XXX	1,333	236	79	24	5	3
7. 2021	XXX	XXX	XXX	XXX	XXX	2,526	387	117	44	8
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	1,714	290	89	20
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,830	339	78
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,430	394
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,850

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior	148	30	8	3	2					
2. 2016	1,574	1,646	1,660	1,661	1,661	1,661	1,661	1,661	1,661	1,661
3. 2017	XXX	502	530	536	536	536	536	536	536	536
4. 2018	XXX	XXX	275	289	289	290	290	290	290	290
5. 2019	XXX	XXX	XXX	6,039	6,628	6,640	6,651	6,664	6,666	6,666
6. 2020	XXX	XXX	XXX	XXX	7,803	8,426	8,460	8,495	8,501	8,540
7. 2021	XXX	XXX	XXX	XXX	XXX	12,464	13,607	13,759	13,777	13,836
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	10,049	10,958	11,016	11,018
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,826	13,070	13,084
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,731	19,833
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,313

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**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE P INTERROGATORIES**

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

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

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	L	6,195,192	6,306,437	3,373,855	4,175,657	1,979,651		
2. Alaska	AK	N							
3. Arizona	AZ	L	2,434,436	832,492	300,151	562,753	614,114		
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	L	27,759,402	32,116,342	12,583,810	8,762,711	6,145,186		
11. Georgia	GA	L			40,490	(118,006)	105,527		
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	L				(4,055)	3,017		
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	L							
19. Louisiana	LA	L	77,561,484	83,572,095	46,141,114	40,458,308	21,264,620		
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	L							
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	L							
33. New York	NY	N							
34. North Carolina	NC	L							
35. North Dakota	ND	L							
36. Ohio	OH	N							
37. Oklahoma	OK	L	55,916,432	53,318,877	34,811,523	37,865,724	21,231,602		
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	L	45,462	23,560	14,018	24,350	10,332		
42. South Dakota	SD	N							
43. Tennessee	TN	L							
44. Texas	TX	L							
45. Utah	UT	L	5,544,776	7,618,021	6,089,990	4,899,325	5,436,670		
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		175,457,185	183,787,823	103,354,951	96,626,767	56,790,720		
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..... 16
- 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..... 41

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

The Company allocates premium by risk location.

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

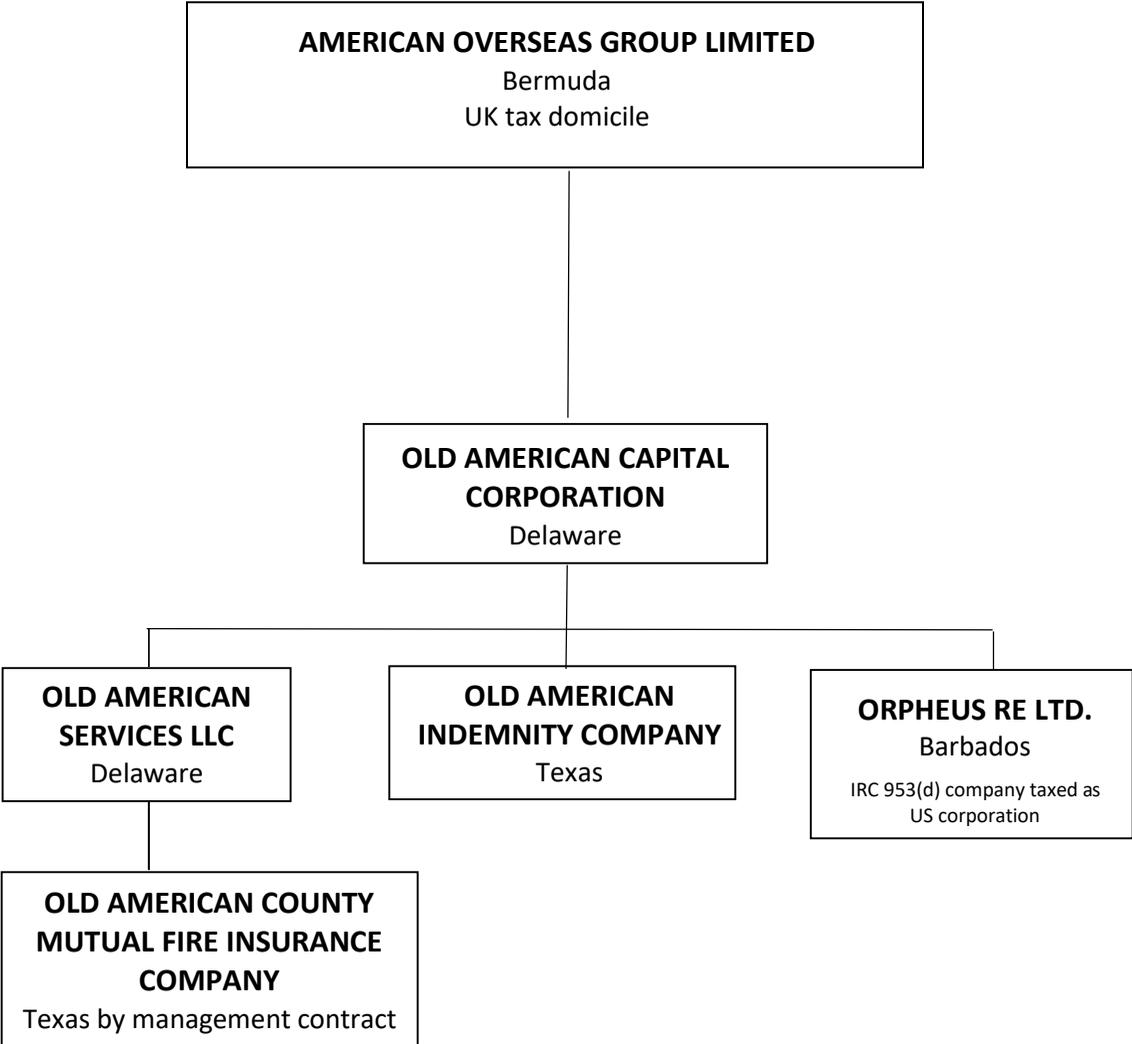
Allocated by States and Territories

States, Etc.		Direct Business Only					6 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**

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE Y**

**PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary 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 .....	IA .....	OLD AMERICAN SERVICES LLC .....	Management .....	.....	AMERICAN OVERSEAS GROUP LTD .....	.. NO .....	.....
. 4762 ...	ORPHEUS GROUP LTD .....	. 11665 .....	61-0533007 ..	.....	.....	.....	OLD AMERICAN INDEMNITY COMPANY .....	. TX .....	RE .....	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 2025 OF THE OLD AMERICAN INDEMNITY 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	2,000,000								2,000,000	
00000	27-2941985	OLD AMERICAN SERVICES LLC					19,815,398				19,815,398	
29378	75-0728676	OLD AMERICAN COUNTY MUTUAL FIRE INSURANCE COMPANY					(16,473,536)	(2,335,445)			(18,808,981)	23,100,735
11665	61-0533007	OLD AMERICAN INDEMNITY COMPANY	(2,000,000)				(3,341,862)	(1,982,045)			(7,323,908)	7,785,413
00000	30-0708277	ORPHEUS RE LTD						4,317,490			4,317,490	(30,886,148)
9999999 Control Totals												
									XXX			



# ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY 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.

	Responses
<b>MARCH FILING</b>	
1. Will an Actuarial Opinion be filed by March 1? .....	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? .....	YES
<b>APRIL FILING</b>	
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
<b>MAY FILING</b>	
8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1? .....	YES
<b>JUNE FILING</b>	
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.

<b>MARCH FILING</b>	
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
<b>APRIL FILING</b>	
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
<b>AUGUST FILING</b>	
38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	YES

**Explanations:**

- 11.
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**Bar Codes:**

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**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 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**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SUMMARY INVESTMENT SCHEDULE**

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 14	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage of Column 5 Line 14
1. Issuer credit obligations (Schedule D, Part 1, Section 1):						
1.01 U.S. government obligations.....	955,895	2.701	955,895		955,895	2.701
1.02 Other U.S. government obligations .....		0.000				0.000
1.03 Non-U.S. sovereign jurisdiction securities.....		0.000				0.000
1.04 Municipal bonds – general obligations (direct & guaranteed) .....	3,262,324	9.217	3,262,324		3,262,324	9.217
1.05 Municipal bonds – special revenue.....	23,341,221	65.948	23,341,221		23,341,221	65.948
1.06 Project finance bonds issued by operating entities .....		0.000				0.000
1.07 Corporate bonds .....	398,057	1.125	398,057		398,057	1.125
1.08 Mandatory convertible bonds .....		0.000				0.000
1.09 Single entity backed obligations .....		0.000				0.000
1.10 SVO-Identified bond exchange traded funds – fair value .....		0.000				0.000
1.11 SVO-Identified bond exchange traded funds – systematic value .....		0.000				0.000
1.12 Bonds issued by funds representing operating entities.....		0.000				0.000
1.13 Bank loans - issued.....		0.000				0.000
1.14 Bank loans - acquired.....		0.000				0.000
1.15 Mortgages loans that qualify as SVO-Identified credit tenant loans.....		0.000				0.000
1.16 Certificates of deposit.....		0.000				0.000
1.17 Other issuer credit obligations.....		0.000				0.000
1.18 Total issuer credit obligations.....	27,957,497	78.991	27,957,497		27,957,497	78.991
2. Asset-backed securities (Schedule D, Part 1, Section 2):						
2.01 Financial asset-backed securities – self-liquidating .....	750,860	2.121	750,860		750,860	2.121
2.02 Financial asset-backed securities – not self-liquidating .....		0.000				0.000
2.03 Non-financial asset-backed securities .....		0.000				0.000
2.04 Total asset-backed securities.....	750,860	2.121	750,860		750,860	2.121
3. Preferred stocks (Schedule D, Part 2, Section 1):						
3.01 Industrial and miscellaneous (unaffiliated).....		0.000				0.000
3.02 Parent, subsidiaries and affiliates.....		0.000				0.000
3.03 Total preferred stocks.....		0.000				0.000
4. Common stocks (Schedule D, Part 2, Section 2):						
4.01 Industrial and miscellaneous - publicly traded (unaffiliated) .....		0.000				0.000
4.02 Industrial and miscellaneous - other (unaffiliated) .....		0.000				0.000
4.03 Parent, subsidiaries and affiliates - publicly traded .....		0.000				0.000
4.04 Parent, subsidiaries and affiliates - other .....		0.000				0.000
4.05 Mutual funds .....		0.000				0.000
4.06 Unit investment trusts .....		0.000				0.000
4.07 Closed-end funds .....		0.000				0.000
4.08 Exchange traded funds .....		0.000				0.000
4.09 Total common stocks .....		0.000				0.000
5. Mortgage loans (Schedule B):						
5.01 Farm mortgages .....		0.000				0.000
5.02 Residential mortgages .....		0.000				0.000
5.03 Commercial mortgages .....		0.000				0.000
5.04 Mezzanine real estate loans .....		0.000				0.000
5.05 Total valuation allowance .....		0.000				0.000
5.06 Total mortgage loans .....		0.000				0.000
6. Real estate (Schedule A):						
6.01 Properties occupied by company .....		0.000				0.000
6.02 Properties held for production of income .....		0.000				0.000
6.03 Properties held for sale .....		0.000				0.000
6.04 Total real estate .....		0.000				0.000
7. Cash, cash equivalents and short-term investments:						
7.01 Cash (Schedule E, Part 1) .....	5,814,759	16.429	5,814,759		5,814,759	16.429
7.02 Cash equivalents (Schedule E, Part 2) .....	870,343	2.459	870,343		870,343	2.459
7.03 Short-term investments (Schedule DA) .....		0.000				0.000
7.04 Total cash, cash equivalents and short-term investments .....	6,685,101	18.888	6,685,101		6,685,101	18.888
8. Contract loans .....		0.000				0.000
9. Derivatives (Schedule DB) .....		0.000				0.000
10. Other invested assets (Schedule BA) .....		0.000				0.000
11. Receivables for securities .....		0.000				0.000
12. Securities Lending (Schedule DL, Part 1).....		0.000		XXX	XXX	XXX
13. Other invested assets (Page 2, Line 11) .....		0.000				0.000
14. Total invested assets	35,393,457	100.000	35,393,457		35,393,457	100.000

Schedule A - Verification - Real Estate

**N O N E**

Schedule B - Verification - Mortgage Loans

**N O N E**

Schedule BA - Verification - Other Long-Term Invested Assets

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE D - VERIFICATION BETWEEN YEARS**

Bonds and Stocks

	1	2	3	4	5
	Total	Issuer Credit Obligations	Asset-Backed Securities	Preferred Stocks	Common Stocks
1. Book/adjusted carrying value, December 31 of prior year.....	33,280,754	33,280,754			
2. Cost of bonds and stocks acquired, Part 3, Column 6.....	1,155,846	397,455	758,392		
3. Accrual of discount .....	231,667	231,660	7		XXX
4. Unrealized valuation increase/(decrease).....					
5. Total gain (loss) on disposals, Part 4, Column 18 .....	(108,628)	(108,628)			
6. Consideration for bonds and stocks disposed, Part 4, Column 6.....	5,827,830	5,824,236	3,594		
7. Amortization of premium .....	23,455	19,509	3,946		XXX
8. Total foreign exchange change in book/adjusted carrying value .....					
9. Current year's other-than-temporary impairment recognized .....					
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2 .....					XXX
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	28,708,356	27,957,496	750,860		
12. Total nonadmitted amounts .....					
13. Statement value at end of current period (Line 11 minus Line 12)	28,708,356	27,957,496	750,860		

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE D - SUMMARY BY COUNTRY**

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

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
<b>BONDS</b>					
Issuer Credit Obligations					
Governments and Municipalities	1. United States .....	27,559,440	25,487,859	27,312,062	28,206,038
	2. Canada .....				
	3. Other Countries.....				
	4. Total	27,559,440	25,487,859	27,312,062	28,206,038
All Other Issuer Credit Obligations (unaffiliated)	5. United States .....	398,057	406,723	397,455	400,000
	6. Canada .....				
	7. Other Countries.....				
8. Total	398,057	406,723	397,455	400,000	
All Other Issuer Credit Obligations (affiliated)	9. Total				
	10. Total Issuer Credit Obligations	27,957,497	25,894,581	27,709,517	28,606,038
Asset-Backed Securities					
Asset-Backed Securities (unaffiliated)	11. United States.....	750,860	753,738	754,748	746,406
	12. Canada.....				
	13. Other Countries				
14. Total	750,860	753,738	754,748	746,406	
Asset-Backed Securities (affiliated)	15. Total				
	16. Total Asset-Backed Securities	750,860	753,738	754,748	746,406
	17. Total Bonds	28,708,356	26,648,319	28,464,264	29,352,444
<b>PREFERRED STOCKS</b>					
Industrial and Miscellaneous (unaffiliated)	18. United States .....				
	19. Canada .....				
	20. Other Countries.....				
	21. Total				
Parent, Subsidiaries and Affiliates	22. Total				
	23. Total Preferred Stocks				
<b>COMMON STOCKS</b>					
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds	24. United States .....				
	25. Canada .....				
	26. Other Countries.....				
	27. Total				
Parent, Subsidiaries and Affiliates	28. Total				
	29. Total Common Stocks				
	30. Total Stocks				
	31. Total Bonds and Stocks	28,708,356	26,648,319	28,464,264	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE D - PART 1A**

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
<b>1. U.S. Government Obligations</b>												
1.1 NAIC 1	249,681	955,895				XXX	1,205,576	4.2	XXX	XXX	1,205,576	
1.2 NAIC 2						XXX			XXX	XXX		
1.3 NAIC 3						XXX			XXX	XXX		
1.4 NAIC 4						XXX			XXX	XXX		
1.5 NAIC 5						XXX			XXX	XXX		
1.6 NAIC 6						XXX			XXX	XXX		
1.7 Totals	249,681	955,895				XXX	1,205,576	4.2	XXX	XXX	1,205,576	
<b>2. Other U.S. Government Securities</b>												
2.1 NAIC 1						XXX			XXX	XXX		
2.2 NAIC 2						XXX			XXX	XXX		
2.3 NAIC 3						XXX			XXX	XXX		
2.4 NAIC 4						XXX			XXX	XXX		
2.5 NAIC 5						XXX			XXX	XXX		
2.6 NAIC 6						XXX			XXX	XXX		
2.7 Totals						XXX			XXX	XXX		
<b>3. Non-U.S. Sovereign Jurisdiction Securities</b>												
3.1 NAIC 1						XXX			XXX	XXX		
3.2 NAIC 2						XXX			XXX	XXX		
3.3 NAIC 3						XXX			XXX	XXX		
3.4 NAIC 4						XXX			XXX	XXX		
3.5 NAIC 5						XXX			XXX	XXX		
3.6 NAIC 6						XXX			XXX	XXX		
3.7 Totals						XXX			XXX	XXX		
<b>4. Municipal Bonds – General Obligations</b>												
4.1 NAIC 1		3,262,324				XXX	3,262,324	11.3	XXX	XXX	3,262,324	
4.2 NAIC 2						XXX			XXX	XXX		
4.3 NAIC 3						XXX			XXX	XXX		
4.4 NAIC 4						XXX			XXX	XXX		
4.5 NAIC 5						XXX			XXX	XXX		
4.6 NAIC 6						XXX			XXX	XXX		
4.7 Totals		3,262,324				XXX	3,262,324	11.3	XXX	XXX	3,262,324	
<b>5. Municipal Bonds – Special Revenue</b>												
5.1 NAIC 1	625,948	7,344,351	11,548,644	2,364,881	616,647	XXX	22,500,471	77.7	XXX	XXX	22,500,471	
5.2 NAIC 2		840,750				XXX	840,750	2.9	XXX	XXX	840,750	
5.3 NAIC 3						XXX			XXX	XXX		
5.4 NAIC 4						XXX			XXX	XXX		
5.5 NAIC 5						XXX			XXX	XXX		
5.6 NAIC 6						XXX			XXX	XXX		
5.7 Totals	625,948	8,185,101	11,548,644	2,364,881	616,647	XXX	23,341,221	80.6	XXX	XXX	23,341,221	
<b>6. Project Finance Bonds Issued by Operating Entities (Unaffiliated)</b>												
6.1 NAIC 1						XXX			XXX	XXX		
6.2 NAIC 2						XXX			XXX	XXX		
6.3 NAIC 3						XXX			XXX	XXX		
6.4 NAIC 4						XXX			XXX	XXX		
6.5 NAIC 5						XXX			XXX	XXX		
6.6 NAIC 6						XXX			XXX	XXX		
6.7 Totals						XXX			XXX	XXX		

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
<b>7. Project Finance Bonds Issued by Operating Entities (Affiliated)</b>												
7.1 NAIC 1 .....						XXX			XXX	XXX		
7.2 NAIC 2 .....						XXX			XXX	XXX		
7.3 NAIC 3 .....						XXX			XXX	XXX		
7.4 NAIC 4 .....						XXX			XXX	XXX		
7.5 NAIC 5 .....						XXX			XXX	XXX		
7.6 NAIC 6 .....						XXX			XXX	XXX		
7.7 Totals						XXX			XXX	XXX		
<b>8. Corporate Bonds (Unaffiliated)</b>												
8.1 NAIC 1 .....		398,057				XXX	398,057	1.4	XXX	XXX	398,057	
8.2 NAIC 2 .....						XXX			XXX	XXX		
8.3 NAIC 3 .....						XXX			XXX	XXX		
8.4 NAIC 4 .....						XXX			XXX	XXX		
8.5 NAIC 5 .....						XXX			XXX	XXX		
8.6 NAIC 6 .....						XXX			XXX	XXX		
8.7 Totals		398,057				XXX	398,057	1.4	XXX	XXX	398,057	
<b>9. Corporate Bonds (Affiliated)</b>												
9.1 NAIC 1 .....						XXX			XXX	XXX		
9.2 NAIC 2 .....						XXX			XXX	XXX		
9.3 NAIC 3 .....						XXX			XXX	XXX		
9.4 NAIC 4 .....						XXX			XXX	XXX		
9.5 NAIC 5 .....						XXX			XXX	XXX		
9.6 NAIC 6 .....						XXX			XXX	XXX		
9.7 Totals						XXX			XXX	XXX		
<b>10. Mandatory Convertible Bonds (Unaffiliated)</b>												
10.1 NAIC 1 .....						XXX			XXX	XXX		
10.2 NAIC 2 .....						XXX			XXX	XXX		
10.3 NAIC 3 .....						XXX			XXX	XXX		
10.4 NAIC 4 .....						XXX			XXX	XXX		
10.5 NAIC 5 .....						XXX			XXX	XXX		
10.6 NAIC 6 .....						XXX			XXX	XXX		
10.7 Totals						XXX			XXX	XXX		
<b>11. Mandatory Convertible Bonds (Affiliated)</b>												
11.1 NAIC 1 .....						XXX			XXX	XXX		
11.2 NAIC 2 .....						XXX			XXX	XXX		
11.3 NAIC 3 .....						XXX			XXX	XXX		
11.4 NAIC 4 .....						XXX			XXX	XXX		
11.5 NAIC 5 .....						XXX			XXX	XXX		
11.6 NAIC 6 .....						XXX			XXX	XXX		
11.7 Totals						XXX			XXX	XXX		
<b>12. Single Entity Backed Obligations (Unaffiliated)</b>												
12.1 NAIC 1 .....						XXX			XXX	XXX		
12.2 NAIC 2 .....						XXX			XXX	XXX		
12.3 NAIC 3 .....						XXX			XXX	XXX		
12.4 NAIC 4 .....						XXX			XXX	XXX		
12.5 NAIC 5 .....						XXX			XXX	XXX		
12.6 NAIC 6 .....						XXX			XXX	XXX		
12.7 Totals						XXX			XXX	XXX		

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
<b>37. Non-Agency – CLOs/CBOs/CDOs (Affiliated)</b>												
37.1 NAIC 1 .....						XXX			XXX	XXX		
37.2 NAIC 2 .....						XXX			XXX	XXX		
37.3 NAIC 3 .....						XXX			XXX	XXX		
37.4 NAIC 4 .....						XXX			XXX	XXX		
37.5 NAIC 5 .....						XXX			XXX	XXX		
37.6 NAIC 6 .....						XXX			XXX	XXX		
37.7 Totals						XXX			XXX	XXX		
<b>38. Other Financial Asset-Backed Securities (Unaffiliated)</b>												
38.1 NAIC 1 .....	410,388	340,471				XXX	750,860	2.6	XXX	XXX	750,860	
38.2 NAIC 2 .....						XXX			XXX	XXX		
38.3 NAIC 3 .....						XXX			XXX	XXX		
38.4 NAIC 4 .....						XXX			XXX	XXX		
38.5 NAIC 5 .....						XXX			XXX	XXX		
38.6 NAIC 6 .....						XXX			XXX	XXX		
38.7 Totals	410,388	340,471				XXX	750,860	2.6	XXX	XXX	750,860	
<b>39. Other Financial Asset-Backed Securities (Affiliated)</b>												
39.1 NAIC 1 .....						XXX			XXX	XXX		
39.2 NAIC 2 .....						XXX			XXX	XXX		
39.3 NAIC 3 .....						XXX			XXX	XXX		
39.4 NAIC 4 .....						XXX			XXX	XXX		
39.5 NAIC 5 .....						XXX			XXX	XXX		
39.6 NAIC 6 .....						XXX			XXX	XXX		
39.7 Totals						XXX			XXX	XXX		
<b>40. Equity-Backed Securities (Unaffiliated)</b>												
40.1 NAIC 1 .....						XXX			XXX	XXX		
40.2 NAIC 2 .....						XXX			XXX	XXX		
40.3 NAIC 3 .....						XXX			XXX	XXX		
40.4 NAIC 4 .....						XXX			XXX	XXX		
40.5 NAIC 5 .....						XXX			XXX	XXX		
40.6 NAIC 6 .....						XXX			XXX	XXX		
40.7 Totals						XXX			XXX	XXX		
<b>41. Equity-Backed Securities (Affiliated)</b>												
41.1 NAIC 1 .....						XXX			XXX	XXX		
41.2 NAIC 2 .....						XXX			XXX	XXX		
41.3 NAIC 3 .....						XXX			XXX	XXX		
41.4 NAIC 4 .....						XXX			XXX	XXX		
41.5 NAIC 5 .....						XXX			XXX	XXX		
41.6 NAIC 6 .....						XXX			XXX	XXX		
41.7 Totals						XXX			XXX	XXX		
<b>42. Other Financial Asset-Backed Securities – Not Self-Liquidating (Unaffiliated)</b>												
42.1 NAIC 1 .....						XXX			XXX	XXX		
42.2 NAIC 2 .....						XXX			XXX	XXX		
42.3 NAIC 3 .....						XXX			XXX	XXX		
42.4 NAIC 4 .....						XXX			XXX	XXX		
42.5 NAIC 5 .....						XXX			XXX	XXX		
42.6 NAIC 6 .....						XXX			XXX	XXX		
42.7 Totals						XXX			XXX	XXX		

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

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

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 52.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
<b>52. Total Bonds Current Year</b>												
52.1 NAIC 1	(d) 1,286,017	12,301,098	11,548,644	2,364,881	616,647		28,117,287	97.1	XXX	XXX	28,117,287	
52.2 NAIC 2	(d) 840,750						840,750	2.9	XXX	XXX	840,750	
52.3 NAIC 3	(d)								XXX	XXX		
52.4 NAIC 4	(d)								XXX	XXX		
52.5 NAIC 5	(d)								XXX	XXX		
52.6 NAIC 6	(d)								XXX	XXX		
52.7 Totals	1,286,017	13,141,848	11,548,644	2,364,881	616,647		(b) 28,958,037	100.0	XXX	XXX	28,958,037	
52.8 Line 52.7 as a % of Col. 7	4.4	45.4	39.9	8.2	2.1		100.0	XXX	XXX	XXX	100.0	
<b>53. Total Bonds Prior Year</b>												
53.1 NAIC 1	2,853,869	13,268,894	14,110,881	2,169,061	810,992		XXX	XXX	33,213,698	97.6	33,213,698	
53.2 NAIC 2		811,939					XXX	XXX	811,939	2.4	811,939	
53.3 NAIC 3							XXX	XXX				
53.4 NAIC 4							XXX	XXX				
53.5 NAIC 5							XXX	XXX	(c)			
53.6 NAIC 6							XXX	XXX	(c)			
53.7 Totals	2,853,869	14,080,833	14,110,881	2,169,061	810,992		XXX	XXX	(b) 34,025,637	100.0	34,025,637	
53.8 Line 53.7 as a % of Col. 9	8.4	41.4	41.5	6.4	2.4		XXX	XXX	100.0	XXX	100.0	
<b>54. Total Publicly Traded Bonds</b>												
54.1 NAIC 1	1,286,017	12,301,098	11,548,644	2,364,881	616,647		28,117,287	97.1	XXX	XXX	28,117,287	XXX
54.2 NAIC 2		840,750					840,750	2.9	XXX	XXX	840,750	XXX
54.3 NAIC 3									XXX	XXX		XXX
54.4 NAIC 4									XXX	XXX		XXX
54.5 NAIC 5									XXX	XXX		XXX
54.6 NAIC 6									XXX	XXX		XXX
54.7 Totals	1,286,017	13,141,848	11,548,644	2,364,881	616,647		28,958,037	100.0	XXX	XXX	28,958,037	XXX
54.8 Line 54.7 as a % of Col. 7	4.4	45.4	39.9	8.2	2.1		100.0	XXX	XXX	XXX	100.0	XXX
54.9 Line 54.7 as a % of Line 52.7, Col. 7, Section 52	4.4	45.4	39.9	8.2	2.1		100.0	XXX	XXX	XXX	100.0	XXX
<b>55. Total Privately Placed Bonds</b>												
55.1 NAIC 1									XXX	XXX	XXX	
55.2 NAIC 2									XXX	XXX	XXX	
55.3 NAIC 3									XXX	XXX	XXX	
55.4 NAIC 4									XXX	XXX	XXX	
55.5 NAIC 5									XXX	XXX	XXX	
55.6 NAIC 6									XXX	XXX	XXX	
55.7 Totals									XXX	XXX	XXX	
55.8 Line 55.7 as a % of Col. 7									XXX	XXX	XXX	
55.9 Line 55.7 as a % of Line 52.7, Col. 7, Section 52									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 \$ .....249,681 ; NAIC 2 \$ ..... ; NAIC 3 \$ ..... ; NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE DA - VERIFICATION BETWEEN YEARS**

Short-Term Investments

	1 Total	2 Bonds	3 Other Short-term Investment Assets
1. Book/adjusted carrying value, December 31 of prior year .....	744,883	744,883	
2. Cost of short-term investments acquired .....			
3. Accrual of discount .....	5,117	5,117	
4. Unrealized valuation increase/(decrease) .....			
5. Total gain (loss) on disposals .....			
6. Deduct consideration received on disposals .....	750,000	750,000	
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) .....			
11. Deduct total nonadmitted amounts .....			
12. Statement value at end of current period (Line 10 minus Line 11)			

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

**N O N E**

Schedule DB - Part B - Verification - Futures Contracts

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY  
**SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS**

(Cash Equivalents)

	1	2	3	4
	Total	Bonds	Money Market Mutual funds	Other
1. Book/adjusted carrying value, December 31 of prior year .....	550,000		550,000	
2. Cost of cash equivalents acquired .....	569,200	248,538		320,661
3. Accrual of discount .....	1,143	1,143		
4. Unrealized valuation increase/(decrease) .....				
5. Total gain (loss) on disposals .....				
6. Deduct consideration received on disposals .....	250,000		250,000	
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- 7+8-9) .....	870,343	249,681	300,000	320,661
11. Deduct total nonadmitted amounts .....				
12. Statement value at end of current period (Line 10 minus Line 11)	870,343	249,681	300,000	320,661

Schedule A - Part 1 - Real Estate Owned

**NONE**

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

**NONE**

Schedule A - Part 3 - Real Estate Disposed

**NONE**

Schedule B - Part 1 - Mortgage Loans Owned

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE D - PART 1 - SECTION 1**

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

1	2	3	4	5	6	7	8	Change in Book/Adjusted Carrying Value				Interest			Dates		20		
								9	10	11	12	13	14	15	16	17		18	19
CUSIP Identification	Description	Re-stricted Asset Code	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Par Value	Fair Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Stated Rate of	Effective Rate of	When Paid	Interest Income Due & Accrued	Interest Received During Year	Acquired	Stated Contractual Maturity Date	Payment Due at Maturity
912828-Z7-8	UNITED STATES TREASURY NOTE	SD	1.A	490,060	500,000	489,316	497,750		2,040			1.500	1.923	JJ	3,139	7,500	02/16/2022	01/31/2027	
91282C-EF-4	UNITED STATES TREASURY NOTE		1.A	9,867	10,000	9,876	9,965		27			2.500	2.788	MS	64	250	04/11/2022	03/31/2027	
91282C-EF-4	UNITED STATES TREASURY NOTE	SD	1.A	393,942	400,000	395,031	398,396		1,249			2.500	2.830	MS	2,555	10,000	05/09/2022	03/31/2027	
91282C-FU-0	UNITED STATES TREASURY NOTE	SD	1.A	49,449	50,000	50,555	49,784		111			4.125	4.373	AO	353	2,063	11/03/2022	10/31/2027	
0019999999	Subtotal - issuer credit obligations - U.S. government obligations (exempt from RBC)			943,319	960,000	944,778	955,895		3,428			XXX	XXX	XXX	6,111	19,813	XXX	XXX	
546417-DU-7	LOUISIANA ST		1.C FE	3,178,175	3,500,000	3,266,037	3,262,324		64,072			1.604	3.740	JD	4,678	56,140	09/05/2024	06/01/2029	
0049999999	Subtotal - issuer credit obligations - municipal bonds - general obligations (direct and guaranteed)			3,178,175	3,500,000	3,266,037	3,262,324		64,072			XXX	XXX	XXX	4,678	56,140	XXX	XXX	
100216-GJ-3	BOSSIER CITY LA UTILITIES REVE		1.C FE	405,760	400,000	330,256	403,398		(546)			2.500	2.341	AO	2,500	10,000	06/28/2021	10/01/2035	
100216-GK-0	BOSSIER CITY LA UTILITIES REVE		1.C FE	810,800	800,000	652,982	806,387		(1,022)			2.600	2.450	AO	5,200	20,800	06/29/2021	10/01/2036	
114876-HA-6	BROUSSARD LA SALES & USE TAX		1.C FE	695,000	695,000	600,348	695,000					2.380	2.380	MM	2,757	16,541	06/28/2021	05/01/2033	
270618-GR-6	E BATON ROUGE PARISH LA SWIR CO		1.D FE	843,201	855,000	788,489	848,840		1,438			1.693	1.877	FA	6,031	14,475	12/17/2021	02/01/2030	
270618-GU-9	E BATON ROUGE PARISH LA SWIR CO		1.D FE	417,875	500,000	435,255	429,041		8,393			1.993	4.342	FA	4,152	9,965	08/28/2024	02/01/2033	
506498-B4-5	LAFAYETTE LA UTILITIES REVENUE		1.E FE	2,012,600	2,000,000	1,899,016	2,005,426		(1,847)			2.000	1.901	MM	6,667	40,000	12/29/2021	11/01/2028	
506624-TU-9	LAFAYETTE PARISH LA SCH BRD SA		1.B FE	1,000,000	1,000,000	662,521	1,000,000					2.830	2.830	AO	7,075	28,300	09/18/2020	04/01/2048	
54627D-KW-0	LOUISIANA ST HSG CORP SF MTGE		1.A FE	151,520	150,000	151,229	150,648		(681)			4.650	4.164	JD	581	6,975	09/12/2024	02/01/2026	
54627R-AM-2	LOUISIANA ST LOCAL GOVT ENVRNM		1.A FE	2,412,473	2,479,000	2,462,428	2,419,045		6,543			4.145	4.839	FA	42,814	102,755	12/10/2024	02/01/2033	
54627R-AR-1	LOUISIANA ST LOCAL GOVT ENVRNM		1.A FE	97,824	97,038	97,747	97,710		(299)			5.081	4.832	JD	411	4,931	12/03/2024	06/01/2031	
54628C-MK-5	LOUISIANA ST LOCAL GOVT ENVRNM		1.E FE	183,896	200,000	199,595	199,532		5,540			1.447	4.317	FA	1,206	2,894	01/19/2023	02/01/2026	
54628C-WD-0	LOUISIANA ST LOCAL GOVT ENVRNM		1.E FE	994,170	1,000,000	873,923	996,538		563			1.945	2.009	AO	4,863	19,450	08/10/2021	10/01/2031	
54628C-WJ-7	LOUISIANA ST LOCAL GOVT ENVRNM		1.E FE	1,975,440	2,000,000	1,569,320	1,981,528		1,474			2.475	2.574	AO	12,375	49,500	09/22/2021	10/01/2036	
546462-EL-2	LOUISIANA ST ENERGY & PWIR AUTH		1.C FE	300,000	300,000	279,584	300,000					1.982	1.982	JD	496	5,946	08/19/2021	06/01/2029	
546475-TU-8	LOUISIANA ST GAS & FUELS TAX R		1.D FE	128,330	150,000	134,750	131,496		3,010			1.898	4.528	MM	475	2,847	12/11/2024	05/01/2031	
546475-TV-6	LOUISIANA ST GAS & FUELS TAX R		1.D FE	4,825,612	4,765,000	4,199,836	4,799,978		(5,161)			1.998	1.874	MM	15,867	95,205	12/30/2020	05/01/2032	
546475-VN-1	LOUISIANA ST GAS & FUELS TAX R		1.C FE	355,196	400,000	357,216	360,864		4,479			2.601	4.163	MM	1,734	10,404	09/23/2024	05/01/2033	
546475-VP-6	LOUISIANA ST GAS & FUELS TAX R		1.C FE	486,576	600,000	527,558	506,897		8,813			2.701	5.001	MM	2,701	16,206	08/10/2023	05/01/2034	
546486-BW-0	LOUISIANA ST HIGHWAY IMPT REVE		1.C FE	232,760	250,000	246,819	245,743		9,043			0.897	4.723	JD	100	2,243	07/18/2024	06/15/2026	
546486-BY-6	LOUISIANA ST HIGHWAY IMPT REVE		1.C FE	1,324,245	1,500,000	1,423,671	1,387,746		42,266			1.320	4.577	JD	880	19,800	06/21/2024	06/15/2028	
647753-MC-3	NEW ORLEANS LA WTR REVENUE		2.A FE	766,377	900,000	861,331	840,750		28,811			1.259	4.901	JD	944	11,331	04/19/2023	12/01/2027	
79358N-DD-2	SAINT TAMMANY PARISH LA SALES	SD	1.B FE	500,000	500,000	477,310	500,000					1.671	1.671	JD	696	8,355	12/02/2020	06/01/2028	
875682-GL-4	TANGIPAHOA PARISH LA WTR DISTR		1.C FE	103,759	100,000	92,672	102,050		(393)			2.440	2.000	JD	203	2,440	06/28/2021	12/01/2030	
881182-BK-4	TERREBONNE LA LEVEE & CONSV DI		1.E FE	1,644,611	1,605,000	1,526,771	1,621,406		(4,607)			2.188	1.878	JD	2,926	35,117	09/28/2020	06/01/2029	
881182-BR-9	TERREBONNE LA LEVEE & CONSV DI		1.E FE	522,545	500,000	426,418	511,198		(2,385)			2.788	2.252	JD	1,162	13,940	01/04/2021	06/01/2035	
0059999999	Subtotal - issuer credit obligations - municipal bonds - special revenue			23,190,568	23,746,038	21,277,044	23,341,221		103,431			XXX	XXX	XXX	124,816	550,419	XXX	XXX	
025816-DY-2	AMERICAN EXPRESS CO		1.F FE	252,603	250,000	257,527	252,224		(379)			5.085	4.842	JJ	5,332	6,356	03/07/2025	01/30/2031	
06051G-HQ-5	BANK OF AMERICA CORP		1.G FE	144,852	150,000	149,195	145,833		981			3.974	4.952	FA	2,384	2,981	03/13/2025	02/07/2030	
0089999999	Subtotal - issuer credit obligations - corporate bonds (unaffiliated)			397,455	400,000	406,723	398,057		602			XXX	XXX	XXX	7,717	9,337	XXX	XXX	
0489999999	Total - issuer credit obligations (unaffiliated)			27,709,517	28,606,038	25,894,581	27,957,497		171,532			XXX	XXX	XXX	143,321	635,709	XXX	XXX	
0499999999	Total - issuer credit obligations (affiliated)											XXX	XXX	XXX			XXX	XXX	
0509999999	Total - issuer credit obligations			27,709,517	28,606,038	25,894,581	27,957,497		171,532			XXX	XXX	XXX	143,321	635,709	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

Line Number	1A	1A ..\$ .....	3,623,299	1B ..\$ .....	1,500,000	1C ..\$ .....	8,070,409	1D ..\$ .....	6,209,355	1E ..\$ .....	7,315,627	1F ..\$ .....	252,224	1G ..\$ .....	145,833
	1B	2A ..\$ .....	840,750	2B ..\$ .....		2C ..\$ .....									
	1C	3A ..\$ .....		3B ..\$ .....		3C ..\$ .....									
	1D	4A ..\$ .....		4B ..\$ .....		4C ..\$ .....									
	1E	5A ..\$ .....		5B ..\$ .....		5C ..\$ .....									
	1F	6 ..\$ .....													

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE D - PART 1 - SECTION 2**

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

1	2	3	4	5	6	7	8	Change in Book/Adjusted Carrying Value				Interest			Dates		20	21		
								9	10	11	12	13	14	15	16	17			18	19
CUSIP Identification	Description	Re-stricted Asset Code	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Par Value	Fair Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Stated Rate of	Effective Rate of	When Paid	Interest Income Due & Accrued	Interest Received During Year	Acquired	Stated Contractual Maturity Date	Payment Due at Maturity	Origin-ation Ballon Pay-ment %
44935C-AD-3	HYUNDAI AUTO RECEIVABLES TRUST 25-A A3		1.A FE	149,978	150,000	151,082	149,985		7			4.320	4.327	MON	288	4,914	03/04/2025	10/15/2029		
89237N-AD-9	TOYOTA AUTO RECEIVABLES OWNER 24-B A3		1.A FE	604,770	596,406	602,656	600,874		(3,924)			5.330	4.391	MON	1,413	23,841	03/19/2025	01/16/2029		
1119999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - other financial asset-backed securities - self-liquidating (unaffiliated)			754,748	746,406	753,738	750,860		(3,916)			XXX	XXX	XXX	1,701	28,755	XXX	XXX		XXX
1209999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating			754,748	746,406	753,738	750,860		(3,916)			XXX	XXX	XXX	1,701	28,755	XXX	XXX		XXX
1409999999	Subtotal - asset-backed securities - financial asset-backed securities - not self-liquidating											XXX	XXX	XXX			XXX	XXX		XXX
1609999999	Subtotal - asset-backed securities - non-financial asset-backed securities - practical expedient											XXX	XXX	XXX			XXX	XXX		XXX
1809999999	Subtotal - asset-backed securities - non-financial asset-backed securities - full analysis											XXX	XXX	XXX			XXX	XXX		XXX
1889999999	Total - asset-backed securities (unaffiliated)			754,748	746,406	753,738	750,860		(3,916)			XXX	XXX	XXX	1,701	28,755	XXX	XXX		XXX
1899999999	Total - asset-backed securities (affiliated)											XXX	XXX	XXX			XXX	XXX		XXX
1909999999	Total - asset-backed securities			754,748	746,406	753,738	750,860		(3,916)			XXX	XXX	XXX	1,701	28,755	XXX	XXX		XXX
2009999999	Total long term bonds - issuer credit obligations and asset-backed securities			28,464,264	29,352,444	26,648,319	28,708,356		167,616			XXX	XXX	XXX	145,022	664,464	XXX	XXX		XXX

1. Line Book/Adjusted Carrying Value by NAIC Designation Category Footnote:  
 Number  
 1A 1A ..\$ .....750,860 1B ..\$ ..... 1C ..\$ ..... 1D ..\$ ..... 1E ..\$ ..... 1F ..\$ ..... 1G ..\$ .....  
 1B 2A ..\$ ..... 2B ..\$ ..... 2C ..\$ .....  
 1C 3A ..\$ ..... 3B ..\$ ..... 3C ..\$ .....  
 1D 4A ..\$ ..... 4B ..\$ ..... 4C ..\$ .....  
 1E 5A ..\$ ..... 5B ..\$ ..... 5C ..\$ .....  
 1F 6 ..\$ .....

E11

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 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE D - PART 3**

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

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends
025816-DY-2	AMERICAN EXPRESS CO	03/07/2025	HSBC SECURITIES (USA) INC.		252,603	250,000	1,413
060516-HQ-5	BANK OF AMERICA CORP	03/13/2025	MARKETAXESS		144,852	150,000	613
0089999999	Subtotal - issuer credit obligations - corporate bonds (unaffiliated)				397,455	400,000	2,025
0489999999	Total - issuer credit obligations (unaffiliated)				397,455	400,000	2,025
0499999999	Total - issuer credit obligations (affiliated)						
0509999997	Total - issuer credit obligations - Part 3				397,455	400,000	2,025
0509999998	Total - issuer credit obligations - Part 5						
0509999999	Total - issuer credit obligations				397,455	400,000	2,025
44935C-AD-3	HYUNDAI AUTO RECEIVABLES TRUST 25-A A3	03/04/2025	BARCLAYS CAPITAL INC.		149,978	150,000	
89237N-AD-9	TOYOTA AUTO RECEIVABLES OWNER 24-B A3	03/19/2025	SG AMERICAS SECURITIES LLC		608,414	600,000	444
1119999999	Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - other financial asset-backed securities - self-liquidating (unaffiliated)				758,392	750,000	444
1889999999	Total - asset-backed securities (unaffiliated)				758,392	750,000	444
1899999999	Total - asset-backed securities (affiliated)						
1909999997	Total - asset-backed securities - Part 3				758,392	750,000	444
1909999998	Total - asset-backed securities - Part 5						
1909999999	Total - asset-backed securities				758,392	750,000	444
2009999999	Total - issuer credit obligations and asset-backed securities				1,155,846	1,150,000	2,469
4509999997	Total - preferred stocks - Part 3					XXX	
4509999998	Total - preferred stocks - Part 5					XXX	
4509999999	Total - preferred stocks					XXX	
5989999997	Total - common stocks - Part 3					XXX	
5989999998	Total - common stocks - Part 5					XXX	
5989999999	Total - common stocks					XXX	
5999999999	Total - preferred and common stocks					XXX	
6009999999	Totals				1,155,846	XXX	2,469

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE D - PART 4**

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

1	2	3	4	5	6	7	8	9	Change In Book/Adjusted Carrying Value					15	16	17	18	19	20	
									10	11	12	13	14							
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Con- sideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other- Than- Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Value (10+11-12)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	
128506-JV-5	CALCASIEU PARISH LA SCH DIST #	.02/15/2025	MATURITY 100.0000		325,000	325,000	322,930	324,949		51		51		325,000				3,575	02/15/2025	
546417-DU-6	LOUISIANA ST	.06/01/2025	VARIOUS		1,754,150	1,760,000	1,740,640	1,755,451		4,549		4,549		1,760,000		(5,850)	(5,850)	6,132	06/01/2025	
0049999999. Subtotal - issuer credit obligations - municipal bonds - general obligations (direct and guaranteed)					2,079,150	2,085,000	2,063,570	2,080,400		4,601		4,601		2,085,000		(5,850)	(5,850)	9,707	XXX	
54627R-AR-1	LOUISIANA ST LOCAL GOVT ENVRM	.12/01/2025	SINKING FUND REDEMPTION 100.0000		28,359	28,359	28,589	28,394		(35)		(35)		28,359				1,154	06/01/2031	
54628C-MK-5	LOUISIANA ST LOCAL GOVT ENVRM	.07/25/2025	MARKETAXESS STIFEL NICOLAUS & COMPANY INCORPORATED		590,058	600,000	551,688	581,974		9,460		9,460		591,433		(1,375)	(1,375)	8,610	02/01/2026	
546475-TS-3	LOUISIANA ST GAS & FUELS TAX R	.10/29/2025	J.P. MORGAN SECURITIES		1,322,756	1,425,000	1,446,546	1,436,521		(2,154)		(2,154)		1,434,367		(111,611)	(111,611)	22,708	05/01/2029	
54651R-CT-4	LOUISIANA ST UNCLAIMED PROPERT	.10/29/2025	LLC		478,834	510,000	462,325	466,078		9,388		9,388		475,466		3,368	3,368	9,159	09/01/2028	
54651R-CW-7	LOUISIANA ST UNCLAIMED PROPERT	.10/29/2025	PIPER SANDLER & CO.		1,153,945	1,300,000	1,115,699	1,123,878		19,359		19,359		1,143,237		10,708	10,708	28,430	09/01/2031	
546540-RE-7	LOUISIANA ST UNIV & AGRIC & ME	.10/29/2025	WELLS FARGO SECURITIES LLC		171,133	175,000	175,000	175,000						175,000		(3,868)	(3,868)	6,045	07/01/2027	
0059999999. Subtotal - issuer credit obligations - municipal bonds - special revenue					3,745,086	4,038,359	3,779,847	3,811,845		36,018		36,018		3,847,863		(102,778)	(102,778)	76,107	XXX	
0489999999. Total - issuer credit obligations (unaffiliated)					5,824,236	6,123,359	5,843,418	5,892,245		40,619		40,619		5,932,863		(108,628)	(108,628)	85,814	XXX	
0499999999. Total - issuer credit obligations (affiliated)																			XXX	
0509999997. Total - issuer credit obligations - Part 4					5,824,236	6,123,359	5,843,418	5,892,245		40,619		40,619		5,932,863		(108,628)	(108,628)	85,814	XXX	
0509999998. Total - issuer credit obligations - Part 5																			XXX	
0509999999. Total - issuer credit obligations					5,824,236	6,123,359	5,843,418	5,892,245		40,619		40,619		5,932,863		(108,628)	(108,628)	85,814	XXX	
89237N-AD-9	TOYOTA AUTO RECEIVABLES OWNER 24-B A3	.12/15/2025	MBS PAYDOWN 100.0000		3,594	3,594	3,644			(22)		(22)		3,594				144	01/16/2029	
1119999999. Subtotal - asset-backed securities - financial asset-backed securities - self-liquidating - other financial asset-backed securities - self-liquidating (unaffiliated)					3,594	3,594	3,644			(22)		(22)		3,594					144	XXX
1889999999. Total - asset-backed securities (unaffiliated)					3,594	3,594	3,644			(22)		(22)		3,594					144	XXX
1899999999. Total - asset-backed securities (affiliated)																				XXX
1909999997. Total - asset-backed securities - Part 4					3,594	3,594	3,644			(22)		(22)		3,594					144	XXX
1909999998. Total - asset-backed securities - Part 5																				XXX
1909999999. Total - asset-backed securities					3,594	3,594	3,644			(22)		(22)		3,594					144	XXX
2009999999. Total - issuer credit obligations and asset-backed securities					5,827,830	6,126,953	5,847,062	5,892,245		40,597		40,597		5,936,457		(108,628)	(108,628)	85,957	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					5,827,830	6,126,953	5,847,062	5,892,245		40,597		40,597		5,936,457		(108,628)	(108,628)	85,957	XXX	

FN5

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**

Schedule DA - Part 1 - Short-Term Investments Owned

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**SCHEDULE E - PART 1 - CASH**

1	2	3	4	5	6	7
Depository	Re- stricted Asset Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
BANK OF TEXAS ..... DALLAS, TX .....					1,977,575	.XXX.
CITIBANK ..... NEW YORK, NY .....					479,779	.XXX.
RENASANT BANK ..... TUPELO, MS .....					4,661	.XXX.
STOCK YARDS BANK AND TRUST ..... LOUISVILLE, KY .....	SD				74,018	.XXX.
TRUIST ..... CHARLOTTE, NC .....					314,645	.XXX.
WELLS FARGO BANK, N.A. .... SAN FRANCISCO, CA .....					2,964,080	.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			5,814,759	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			5,814,759	XXX
0499999. Cash in company's office	XXX	XXX	XXX	XXX		XXX
.....						
.....						
.....						
.....						
.....						
0599999 Total - cash	XXX	XXX			5,814,759	XXX

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

1. January.....	8,671,401	4. April.....	9,005,581	7. July.....	6,566,899	10. October.....	8,580,096
2. February...	6,470,901	5. May.....	9,784,835	8. August.....	5,214,259	11. November...	5,661,788
3. March	8,443,422	6. June	11,252,439	9. September	5,375,202	12. December	5,814,759

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

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

Show Investments Owned December 31 of Current Year

1 CUSIP	2 Description	3 Re- stricted Asset Code	4 Date Acquired	5 Stated Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
	TREASURY BILL		11/18/2025	3.850	01/13/2026	249,681		1,143
0019999999	Subtotal - issuer credit obligations - U.S. government obligations (exempt from RBC)					249,681		1,143
0489999999	Total - issuer credit obligations (unaffiliated)					249,681		1,143
0499999999	Total - issuer credit obligations (affiliated)							
0509999999	Total - issuer credit obligations					249,681		1,143
	SYB MONEY MARKET FUND	C	12/30/2025	0.000		70,661		68,406
	SYB MONEY MARKET FUND	SD	12/30/2025	0.000		250,000		
8109999999	Subtotal - sweep accounts					320,661		68,406
31846V-41-9	FIRST AM TREAS OBLI-INS INV	SD	08/31/2023	0.000		300,000		
8209999999	Subtotal - exempt money market mutual funds - as identified by the SVO					300,000		
8589999999	Total cash equivalents (unaffiliated)					870,343		69,549
8599999999	Total cash equivalents (affiliated)							
8609999999	Total cash equivalents					870,343		69,549

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

Line Number	1A ..\$	1B ..\$	1C ..\$	1D ..\$	1E ..\$	1F ..\$	1G ..\$
1A	249,681						
1B							
1C							
1D							
1E							
1F							

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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE OLD AMERICAN INDEMNITY COMPANY

**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	ST For the benefit and protection of all policyholders and creditors	200,000	200,000		
11. Georgia	GA	ICO For the protection of policyholders or others entitled to the proceeds of the policies	84,497	83,944		
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY	0 For the benefit and protection of all policyholders and creditors	1,017,750	997,064		
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	ICO For the benefit and protection of all policyholders and creditors	363,683	361,642		
33. New York	NY					
34. North Carolina	NC	ST For the benefit and protection of all policyholders and creditors	300,000	300,000		
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC	ICO For the benefit and protection of all policyholders and creditors	230,000	219,562		
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate alien and other	OT	XXX				
59. Subtotal	XXX	XXX	2,195,930	2,162,212		
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				