



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021
OF THE CONDITION AND AFFAIRS OF THE

Shield Indemnity Incorporated

NAIC Group Code 5020 0000 NAIC Company Code 16762 Employer's ID Number 83-2537142
(Current) (Prior)

Organized under the Laws of _____ (Current) (Prior) _____, State of Domicile or Port of Entry _____ OH
Country of Domicile _____ Ohio _____ United States of America _____ OH

Incorporated/Organized 11/15/2018 Commenced Business 12/01/2018

Statutory Home Office 6185 Emerald Parkway, Dublin, OH, US 43016-3248
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2121 Airport Road
(Street and Number)
Waterford, MI, US 48327, 616-662-3900
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 2121 Airport Road, Waterford, MI, US 48327
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records _____ 2121 Airport Road
(Street and Number)
Waterford, MI, US 48327 _____, 616-662-3900
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address _____ N/A

Statutory Statement Contact Travis R Harrison, 616-662-3900
(Name) (Area Code) (Telephone Number)
accounting@ufcic.com, 616-871-2490
(E-mail Address) (FAX Number)

OFFICERS

President Richard J Klimaszewski # Vice President & Secretary Brian M Lietzke #
Executive Vice President & Chief Legal Officer Anthony A Modd Treasurer Travis R Harrison #

OTHER

DIRECTORS OR TRUSTEES
Thomas M Parker # _____ Richard J Klimaszewski # _____ Christopher J Timm # _____
Frank H Freund # _____ Anthony A Modd _____

State of _____ County of _____ SS _____

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.

Richard J Klimaszewski
President

Brian M Lietzke
Secretary

Travis R Harrison
Chief Financial Officer

Subscribed and sworn to before me this
day of

a. Is this an original filing?

b. If no,

1. State the amendment number.....
2. Date filed
3. Number of pages attached.....

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	5,645,138		5,645,138	17,654,567
2. Stocks (Schedule D):				0
2.1 Preferred stocks			0	0
2.2 Common stocks	6,430,832		6,430,832	6,483,801
3. Mortgage loans on real estate (Schedule B):				0
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				0
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$3,112,528 , Schedule E - Part 1), cash equivalents (\$6,495,987 , Schedule E - Part 2) and short-term investments (\$20,593 , Schedule DA)	9,629,108		9,629,108	3,921,523
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)			0	0
9. Receivable for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL)			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	21,705,079	0	21,705,079	28,059,891
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	47,594	0	47,594	195,813
15. Premiums and considerations:				0
15.1 Uncollected premiums and agents' balances in the course of collection			0	0
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				0
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	2,187,152
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	53,084		53,084	0
18.2 Net deferred tax asset			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	458,241	0	458,241	600,000
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other than invested assets	250,000	0	250,000	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	22,513,998	0	22,513,998	31,042,856
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	22,513,998	0	22,513,998	31,042,856
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Claims Imprest Fund	250,000		250,000	
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	250,000	0	250,000	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	5,884,342	
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	0	
4. Commissions payable, contingent commissions and other similar charges	0	
5. Other expenses (excluding taxes, licenses and fees)	261,448	271,980
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	19,364	
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	33,974	
7.2 Net deferred tax liability	70,665	7,015
8. Borrowed money \$ and interest thereon \$	0	
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$0 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health Service Act)	677,125	
10. Advance premium	0	
11. Dividends declared and unpaid:		
11.1 Stockholders	0	
11.2 Policyholders	0	
12. Ceded reinsurance premiums payable (net of ceding commissions)	0	0
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	0	0
14. Amounts withheld or retained by company for account of others	0	
15. Remittances and items not allocated	0	
16. Provision for reinsurance (including \$0 certified) (Schedule F, Part 3, Column 78)	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates	0	
18. Drafts outstanding	0	
19. Payable to parent, subsidiaries and affiliates	4,041,643	
20. Derivatives	0	0
21. Payable for securities	0	
22. Payable for securities lending	0	
23. Liability for amounts held under uninsured plans	0	
24. Capital notes \$ and interest thereon \$	0	
25. Aggregate write-ins for liabilities	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	332,113	10,935,443
27. Protected cell liabilities	0	
28. Total liabilities (Lines 26 and 27)	332,113	10,935,443
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock	2,000,000	1,200,000
31. Preferred capital stock	0	
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes	0	15,600,000
34. Gross paid in and contributed surplus	16,200,000	1,400,000
35. Unassigned funds (surplus)	3,981,884	1,907,414
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)	0	
36.2 shares preferred (value included in Line 31 \$)	0	
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	22,181,884	20,107,414
38. TOTALS (Page 2, Line 28, Col. 3)	22,513,997	31,042,857
DETAILS OF WRITE-INS		
2501.	0	
2502.	0	
2503.	0	
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	0
2901.	0	
2902.	0	
2903.	0	
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0
3201.	0	
3202.	0	
3203.	0	
3298. Summary of remaining write-ins for Line 32 from overflow page	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....	13,847,018	9,527,782
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7).....	8,441,236	6,373,706
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	582,886	0
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	3,816,089	1,778,128
5. Aggregate write-ins for underwriting deductions.....	0	0
6. Total underwriting deductions (Lines 2 through 5).....	12,840,211	8,151,834
7. Net income of protected cells.....	1,006,807	1,375,948
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7).....	1,006,807	1,375,948
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	186,183	79,586
10. Net realized capital gains or (losses) less capital gains tax of \$ 336,655 (Exhibit of Capital Gains (Losses)).....	1,266,466	15,390
11. Net investment gain (loss) (Lines 9 + 10).....	1,452,649	94,976
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$).....	0	0
13. Finance and service charges not included in premiums.....	228,000	0
14. Aggregate write-ins for miscellaneous income.....	228,000	0
15. Total other income (Lines 12 through 14).....	228,000	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	2,687,455	1,470,924
17. Dividends to policyholders.....	1,470,924	1,470,924
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	2,687,455	1,470,924
19. Federal and foreign income taxes incurred.....	171,361	232,159
20. Net income (Line 18 minus Line 19)(to Line 22).....	2,516,094	1,238,765
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	20,107,414	0
22. Net income (from Line 20).....	2,516,094	1,238,765
23. Net transfers (to) from Protected Cell accounts.....	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (79,374) (298,598).....	(298,598)	714,474
25. Change in net unrealized foreign exchange capital gain (loss).....	0	0
26. Change in net deferred income tax.....	(143,024)	(173,767)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3).....	0	0
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....	0	0
29. Change in surplus notes.....	(15,600,000)	15,600,000
30. Surplus (contributed to) withdrawn from protected cells.....	0	0
31. Cumulative effect of changes in accounting principles.....	0	(12,937)
32. Capital changes:		
32.1 Paid in.....	800,000	1,200,000
32.2 Transferred from surplus (Stock Dividend).....	0	0
32.3 Transferred to surplus.....	0	0
33. Surplus adjustments:		
33.1 Paid in.....	14,800,000	1,400,000
33.2 Transferred to capital (Stock Dividend).....	0	0
33.3 Transferred from capital.....	0	0
34. Net remittances from or (to) Home Office.....	0	0
35. Dividends to stockholders.....	0	0
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....	0	0
37. Aggregate write-ins for gains and losses in surplus.....	0	140,879
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	2,074,472	20,107,414
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	22,181,886	20,107,414
DETAILS OF WRITE-INS		
0501.	0	0
0502.	0	0
0503.	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above).....	0	0
1401. Claims Admin Fee Income.....	228,000	0
1402.	0	0
1403.	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....	228,000	0
3701. Retained Earnings - 1st year NAIC report; no prior year reported.....	0	140,879
3702.	0	0
3703.	0	0
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above).....	0	140,879

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	15,357,045	13,012,218
2. Net investment income	819,184	58,666
3. Miscellaneous income	228,000	0
4. Total (Lines 1 through 3)	16,404,229	13,070,884
5. Benefit and loss related payments	14,325,578	2,169,137
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	4,428,871	4,714,988
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	674,448	110,000
10. Total (Lines 5 through 9)	19,428,897	6,994,125
11. Net cash from operations (Line 4 minus Line 10)	(3,024,668)	6,076,759
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	19,184,827	5,241,848
12.2 Stocks	7,720,644	592,960
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(71)	24
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	26,905,400	5,834,832
13. Cost of investments acquired (long-term only):		
13.1 Bonds	7,829,730	23,071,784
13.2 Stocks	6,272,907	6,343,201
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	14,102,638	29,414,985
14. Net increase (decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	12,802,763	(23,580,153)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	(15,600,000)	15,000,000
16.2 Capital and paid in surplus, less treasury stock	15,600,000	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	(4,070,511)	0
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(4,070,511)	15,000,000
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	5,707,584	(2,503,394)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	3,921,523	6,424,917
19.2 End of period (Line 18 plus Line 19.1)	9,629,107	3,921,523

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
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	0	0		0
2. Allied lines	0	0		0
3. Farmowners multiple peril	0	0		0
4. Homeowners multiple peril	0	0		0
5. Commercial multiple peril	0	0		0
6. Mortgage guaranty	0	0		0
8. Ocean marine	0	0		0
9. Inland marine	0	0		0
10. Financial guaranty	0	0		0
11.1 Medical professional liability - occurrence		0		0
11.2 Medical professional liability - claims-made		0		0
12. Earthquake	0	0		0
13. Group accident and health	0	0		0
14. Credit accident and health (group and individual)	0	0		0
15. Other accident and health	0	0		0
16. Workers' compensation	0	0		0
17.1 Other liability - occurrence	0	0		0
17.2 Other liability - claims-made	13,169,893	677,125		13,847,018
17.3 Excess workers' compensation	0	0		0
18.1 Products liability - occurrence		0		0
18.2 Products liability - claims-made		0		0
19.1, 19.2 Private passenger auto liability	0	0		0
19.3, 19.4 Commercial auto liability	0	0		0
21. Auto physical damage	0	0		0
22. Aircraft (all perils)	0	0		0
23. Fidelity	0	0		0
24. Surety	0	0		0
26. Burglary and theft	0	0		0
27. Boiler and machinery	0	0		0
28. Credit	0	0		0
29. International	0	0		0
30. Warranty	0	0		0
31. Reinsurance - nonproportional assumed property		0		0
32. Reinsurance - nonproportional assumed liability		0		0
33. Reinsurance - nonproportional assumed financial lines		0		0
34. Aggregate write-ins for other lines of business	0	0	0	0
35. TOTALS	13,169,893	677,125	0	13,847,018
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated

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					0
2. Allied lines					0
3. Farmowners multiple peril					0
4. Homeowners multiple peril					0
5. Commercial multiple peril					0
6. Mortgage guaranty					0
8. Ocean marine					0
9. Inland marine					0
10. Financial guaranty					0
11.1 Medical professional liability - occurrence					0
11.2 Medical professional liability - claims-made					0
12. Earthquake					0
13. Group accident and health					0
14. Credit accident and health (group and individual)					0
15. Other accident and health					0
16. Workers' compensation					0
17.1 Other liability - occurrence					0
17.2 Other liability - claims-made					0
17.3 Excess workers' compensation					0
18.1 Products liability - occurrence					0
18.2 Products liability - claims-made					0
19.1, 19.2 Private passenger auto liability					0
19.3, 19.4 Commercial auto liability					0
21. Auto physical damage					0
22. Aircraft (all perils)					0
23. Fidelity					0
24. Surety					0
26. Burglary and theft					0
27. Boiler and machinery					0
28. Credit					0
29. International					0
30. Warranty					0
31. Reinsurance - nonproportional assumed property					0
32. Reinsurance - nonproportional assumed liability					0
33. Reinsurance - nonproportional assumed financial lines					0
34. Aggregate write-ins for other lines of business	0	0	0	0	0
35. TOTALS	0	0	0	0	0
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Line 35 through 37)					0
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	0					0
2. Allied lines	0					0
3. Farmowners multiple peril	0					0
4. Homeowners multiple peril	0					0
5. Commercial multiple peril	0					0
6. Mortgage guaranty	0					0
8. Ocean marine	0					0
9. Inland marine	0					0
10. Financial guaranty	0					0
11.1 Medical professional liability - occurrence						0
11.2 Medical professional liability - claims-made						0
12. Earthquake	0					0
13. Group accident and health	0					0
14. Credit accident and health (group and individual)	0					0
15. Other accident and health	0					0
16. Workers' compensation	0					0
17.1 Other liability - occurrence	0					0
17.2 Other liability - claims-made	(1,245,698)	14,415,591	0	0	0	13,169,893
17.3 Excess workers' compensation	0					0
18.1 Products liability - occurrence						0
18.2 Products liability - claims-made						0
19.1, 19.2 Private passenger auto liability	0					0
19.3, 19.4 Commercial auto liability	0					0
21. Auto physical damage	0					0
22. Aircraft (all perils)	0					0
23. Fidelity	0					0
24. Surety	0					0
26. Burglary and theft	0					0
27. Boiler and machinery	0					0
28. Credit	0					0
29. International	0					0
30. Warranty	0					0
31. Reinsurance - nonproportional assumed property	XXX					0
32. Reinsurance - nonproportional assumed liability	XXX					0
33. Reinsurance - nonproportional assumed financial lines	XXX					0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0
35. TOTALS	(1,245,698)	14,415,591	0	0	0	13,169,893
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	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	0			0		0	0	0.0
2. Allied lines	0			0		0	0	0.0
3. Farmowners multiple peril	0			0		0	0	0.0
4. Homeowners multiple peril	0			0		0	0	0.0
5. Commercial multiple peril	0			0		0	0	0.0
6. Mortgage guaranty	0			0		0	0	0.0
8. Ocean marine	0			0		0	0	0.0
9. Inland marine	0			0		0	0	0.0
10. Financial guaranty	0			0		0	0	0.0
11.1 Medical professional liability - occurrence				0		0	0	0.0
11.2 Medical professional liability - claims-made				0		0	0	0.0
12. Earthquake	0			0		0	0	0.0
13. Group accident and health	0			0		0	0	0.0
14. Credit accident and health (group and individual)	0			0		0	0	0.0
15. Other accident and health	0			0		0	0	0.0
16. Workers' compensation	0			0		0	0	0.0
17.1 Other liability - occurrence	0			0		0	0	0.0
17.2 Other liability - claims-made	2,501,704	11,823,874	0	14,325,578	5,884,342	8,441,236	61.0	
17.3 Excess workers' compensation	0			0		0	0	0.0
18.1 Products liability - occurrence				0		0	0	0.0
18.2 Products liability - claims-made				0		0	0	0.0
19.1, 19.2 Private passenger auto liability	0			0		0	0	0.0
19.3, 19.4 Commercial auto liability	0			0		0	0	0.0
21. Auto physical damage	0			0		0	0	0.0
22. Aircraft (all perils)	0			0		0	0	0.0
23. Fidelity	0			0		0	0	0.0
24. Surety	0			0		0	0	0.0
26. Burglary and theft	0			0		0	0	0.0
27. Boiler and machinery	0			0		0	0	0.0
28. Credit	0			0		0	0	0.0
29. International	0			0		0	0	0.0
30. Warranty	0			0		0	0	0.0
31. Reinsurance - nonproportional assumed property	XXX			0		0	0	0.0
32. Reinsurance - nonproportional assumed liability	XXX			0		0	0	0.0
33. Reinsurance - nonproportional assumed financial lines	XXX			0		0	0	0.0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0.0
35. TOTALS	2,501,704	11,823,874	0	14,325,578	0	5,884,342	8,441,236	61.0
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	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				0				0	0
2. Allied lines				0				0	0
3. Farmowners multiple peril				0				0	0
4. Homeowners multiple peril				0				0	0
5. Commercial multiple peril				0				0	0
6. Mortgage guaranty				0				0	0
8. Ocean marine				0				0	0
9. Inland marine				0				0	0
10. Financial guaranty				0				0	0
11.1 Medical professional liability - occurrence				0				0	0
11.2 Medical professional liability - claims-made				0				0	0
12. Earthquake				0				0	0
13. Group accident and health				0				(a)	0
14. Credit accident and health (group and individual)				0				(a)	0
15. Other accident and health				0				(a)	0
16. Workers' compensation				0				0	0
17.1 Other liability - occurrence				0				0	0
17.2 Other liability - claims-made				0				0	0
17.3 Excess workers' compensation				0				0	0
18.1 Products liability - occurrence				0				0	0
18.2 Products liability - claims-made				0				0	0
19.1, 19.2 Private passenger auto liability				0				0	0
19.3, 19.4 Commercial auto liability				0				0	0
21. Auto physical damage				0				0	0
22. Aircraft (all perils)				0				0	0
23. Fidelity				0				0	0
24. Surety				0				0	0
26. Burglary and theft				0				0	0
27. Boiler and machinery				0				0	0
28. Credit				0				0	0
29. International				0				0	0
30. Warranty				0				0	0
31. Reinsurance - nonproportional assumed property	XXX			0	XXX			0	0
32. Reinsurance - nonproportional assumed liability	XXX			0	XXX			0	0
33. Reinsurance - nonproportional assumed financial lines	XXX			0	XXX			0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0
35. TOTALS	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0

(a) Including \$ for present value of life indemnity claims.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct				0
1.2 Reinsurance assumed				0
1.3 Reinsurance ceded				0
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	0	0	0	0
2. Commission and brokerage:				
2.1 Direct excluding contingent				0
2.2 Reinsurance assumed, excluding contingent		1,813,046		1,813,046
2.3 Reinsurance ceded, excluding contingent				0
2.4 Contingent - direct				0
2.5 Contingent - reinsurance assumed				0
2.6 Contingent - reinsurance ceded				0
2.7 Policy and membership fees				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)	0	1,813,046	0	1,813,046
3. Allowances to managers and agents				0
4. Advertising				0
5. Boards, bureaus and associations		34,612		34,612
6. Surveys and underwriting reports				0
7. Audit of assureds' records				0
8. Salary and related items:				
8.1 Salaries	542,338	560,292		1,102,630
8.2 Payroll taxes	19,893	20,551		40,444
9. Employee relations and welfare	20,655	21,339		41,994
10. Insurance		139,308		139,308
11. Directors' fees		25,000		25,000
12. Travel and travel items		10,770		10,770
13. Rent and rent items		198,901		198,901
14. Equipment				0
15. Cost or depreciation of EDP equipment and software		11,941		11,941
16. Printing and stationery		37,198		37,198
17. Postage, telephone and telegraph, exchange and express		7,758		7,758
18. Legal and auditing		501,415		501,415
19. Totals (Lines 3 to 18)	582,886	1,569,085	0	2,151,971
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$		19,071		19,071
20.2 Insurance department licenses and fees		27,579		27,579
20.3 Gross guaranty association assessments				0
20.4 All other (excluding federal and foreign income and real estate)				0
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0	46,650	0	46,650
21. Real estate expenses				0
22. Real estate taxes				0
23. Reimbursements by uninsured plans				0
24. Aggregate write-ins for miscellaneous expenses	0	387,308	210,165	.597,473
25. Total expenses incurred	582,886	3,816,089	210,165	(a) 4,609,140
26. Less unpaid expenses - current year		261,448		261,448
27. Add unpaid expenses - prior year	0	291,346	0	291,346
28. Amounts receivable relating to uninsured plans, prior year	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	582,886	3,845,987	210,165	4,639,038
DETAILS OF WRITE-INS				
2401. Management & Consulting		180,000		180,000
2402. Professional Fees		207,308		207,308
2403. Investment Expenses			210,165	210,165
2498. Summary of remaining write-ins for Line 24 from overflow page	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)	0	387,308	210,165	597,473

(a) Includes management fees of \$ 180,000 to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 21,381	11,887
1.1 Bonds exempt from U.S. tax	(a) 169,506	55,960
1.2 Other bonds (unaffiliated)	(a) 98,296	86,569
1.3 Bonds of affiliates	(a) .....	..
2.1 Preferred stocks (unaffiliated)	(b) .....	..
2.11 Preferred stocks of affiliates	(b) .....	..
2.2 Common stocks (unaffiliated)	215,980	218,816
2.21 Common stocks of affiliates	(c) .....	..
3. Mortgage loans	(d) .....	..
4. Real estate	(e) 16,813	23,115
5. Contract loans	(f) .....	..
6. Cash, cash equivalents and short-term investments	0	0
7. Derivative instruments	0	0
8. Other invested assets	0	0
9. Aggregate write-ins for investment income	0	0
10. Total gross investment income	521,976	396,347
11. Investment expenses	(g) 210,165	..
12. Investment taxes, licenses and fees, excluding federal income taxes	(g) 0	0
13. Interest expense	(h) .....	..
14. Depreciation on real estate and other invested assets	(i) .....	..
15. Aggregate write-ins for deductions from investment income	0	0
16. Total deductions (Lines 11 through 15)	210,165	..
17. Net investment income (Line 10 minus Line 16)	186,183	..
DETAILS OF WRITE-INS		
0901. .....	..	..
0902. .....	..	..
0903. .....	..	..
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501. .....	..	..
1502. .....	..	..
1503. .....	..	..
1598. Summary of remaining write-ins for Line 15 from overflow page	0	..
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)	0	..

(a) Includes \$ 1,182 accrual of discount less \$ 485,964 amortization of premium and less \$ 39,004 paid for accrued interest on purchases.

(b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.

(c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.

(d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.

(e) Includes \$ 0 accrual of discount less \$ 10,275 amortization of premium and less \$ 581 paid for accrued interest on purchases.

(f) Includes \$ accrual of discount less \$ amortization of premium.

(g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.

(h) Includes \$ interest on surplus notes and \$ interest on capital notes.

(i) Includes \$ 0 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	(51,821)	0	(51,821)	(112)	0
1.1 Bonds exempt from U.S. tax	(20,374)	0	(20,374)	0	0
1.2 Other bonds (unaffiliated)	(76,517)	0	(76,517)	(20,727)	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	1,751,904	0	1,751,904	(357,135)	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	(71)	0	(71)	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	1,603,122	0	1,603,122	(377,974)	0
DETAILS OF WRITE-INS			..	..	..
0901. .....	..	..	..	..	..
0902. .....	..	..	..	..	..
0903. .....	..	..	..	..	..
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
EXHIBIT OF NON-ADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 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)			
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 thru 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 thru 2503 plus 2598)(Line 25 above)			

NONE

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern**A. Accounting Practices**

The accompanying financial statements have been prepared in conformity with the NAIC Accounting Practices and Procedures Manual and the state laws of Ohio.

	SSAP #	F/S Page	F/S Line #	2021	2020
NET INCOME					
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 2,516,094	\$ 1,238,765
(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	\$ 2,516,094	\$ 1,238,765
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 22,181,884	\$ 20,107,414
(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	\$ 22,181,884	\$ 20,107,414

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

The preparation of statutory financial statements requires management to make certain estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the statutory financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums are earned in full when the policies/bonds are written. Expenses incurred in connection with acquiring new business are expensed to operations as incurred. Net investment income earned consists of interest less investment related expense.

Interest is recognized on accrual basis. Net realized capital gains/losses are recognized on a specific identification basis when securities are sold, redeemed or otherwise disposed.

Expenses incurred in the connection with acquiring new insurance business, including such items as marketing or referral fees, are charged to underwriting expenses as incurred.

Short-term investments are stated at amortized value using the scientific method excluding Money Market Mutual Funds classified as "All Other", which are carried at fair value. Bonds not backed by other loans are stated at amortized value using the scientific method. Non-investment grade bonds are stated at the lower of amortized cost or fair value. Common stocks – unaffiliated, are carried at fair value. Mortgage loans with first liens are carried at the unpaid balance of the loan. Short-term investments are securities with an original maturity greater than 3 months, but less than 1 year, are stated at cost.

Bonds are valued in accordance with the valuations prescribed by the NAIC. Bonds with an NAIC designation of 1 or 2 are valued and reported at amortized costs. Bonds with an NAIC designation of 3 through 6 are carried at the lower of amortized cost or fair value, with the difference reflected in unassigned surplus.

Investment income is recognized when earned. Realized investment gains and losses are determined on the basis of specific identification. The scientific interest method is used for amortization of premiums or discounts. Unrealized gains and losses, net of taxes, on investments are included in unassigned surplus.

The Company does utilize anticipated investment income as a factor in premium deficiency calculations.

D. Going Concern

There are no going concern issues at this time.

NOTE 2 Accounting Changes and Corrections of Errors

Not Applicable

NOTE 3 Business Combinations and Goodwill**A. Statutory Purchase Method**

Not Applicable

B. Statutory Merger

Not Applicable

C. Impairment Loss

Not Applicable

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

Not Applicable

NOTE 4 Discontinued Operations**A. Discontinued Operation Disposed of or Classified as Held for Sale**

Not Applicable

B. Change in Plan of Sale of Discontinued Operation

Not Applicable

C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal

Not Applicable

D. Equity Interest Retained in the Discontinued Operation After Disposal

Not Applicable

NOTES TO FINANCIAL STATEMENTS

NOTE 5 Investments**A. Mortgage Loans, including Mezzanine Real Estate Loans**

- (1) The Company held no mortgages as of 12/31/2021 or 12/31/2020
- (2) Not applicable
- (3) Not applicable
- (4) Not applicable

B. Debt Restructuring
Not Applicable**C. Reverse Mortgages**
Not Applicable**D. Loan-Backed Securities**
Not Applicable

- (1) Not applicable
- (2) Not applicable
- (3) Not applicable
- (4)

a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ 893
2. 12 Months or Longer	\$ 45

b) The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$ 110,248
2. 12 Months or Longer	\$ 3,345

- (5) 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. Low Income Housing tax Credits (LIHTC)**
Not Applicable**L. Restricted Assets**1. **Restricted Assets (Including Pledged)**

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted					6	7		
	Current Year								
	1	2	3	4	5				
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account 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	\$ 150,957				\$ 150,957	\$ 149,974	\$ 983		
k. On deposit with other regulatory bodies					\$ -	\$ -	\$ -		
l. Pledged collateral to FHLB (including assets backing funding agreements)					\$ -	\$ -	\$ -		
m. Pledged as collateral not captured in other categories					\$ -	\$ -	\$ -		
n. Other restricted assets					\$ -	\$ -	\$ -		
o. Total Restricted Assets	\$ 150,957	\$ -	\$ -	\$ -	\$ 150,957	\$ 149,974	\$ 983		

NOTES TO FINANCIAL STATEMENTS

(a) Subset of Column 1
 (b) Subset of Column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
			10 Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	11 Admitted Restricted to Total Admitted Assets (d)
Restricted Asset Category	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)		
a. Subject to contractual obligation for which liability is not shown		\$ -	0.000%	0.000%
b. Collateral held under security lending agreements		\$ -	0.000%	0.000%
c. Subject to repurchase agreements		\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements		\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements		\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase agreements		\$ -	0.000%	0.000%
g. Placed under option contracts		\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		\$ -	0.000%	0.000%
i. FHLB capital stock		\$ -	0.000%	0.000%
j. On deposit with states		\$ 150,957	0.671%	0.671%
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)		\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories		\$ -	0.000%	0.000%
n. Other restricted assets		\$ -	0.000%	0.000%
o. Total Restricted Assets	\$ -	\$ 150,957	0.671%	0.671%

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

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

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

Not Applicable

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

Not Applicable

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

Not Applicable

M. Working Capital Finance Investments

Not Applicable

N. Offsetting and Netting of Assets and Liabilities

Not Applicable

O. 5GI Securities

Not Applicable

P. Short Sales

Not Applicable

Q. Prepayment Penalty and Acceleration Fees

Not Applicable

	<u>General Account</u>	<u>Protected Cell</u>
1. Number of CUSIPs	2	
2. Aggregate Amount of Investment Income	\$ 7,245	

R. Reporting Entity's Share of Cash Pool by Asset Type

Not Applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

A. Not Applicable

B. Not Applicable

NOTE 7 Investment Income

A. The company does not admit accrued investment income over 90 days past due.

B. Not Applicable

NOTE 8 Derivative Instruments

A. Derivatives under SSAP No. 86—Derivatives

Not Applicable

B. Derivatives under SSAP No. 108—Derivative Hedging Variable Annuity Guarantees

Not Applicable

NOTE 9 Income Taxes

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated

NOTES TO FINANCIAL STATEMENTS

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			12/31/2020			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			\$ -	\$ 143,025	\$ -	\$ 143,025	\$ (143,025)	\$ -	\$ (143,025)
(b) Statutory Valuation Allowance Adjustment			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ -	\$ -	\$ -	\$ 143,025	\$ -	\$ 143,025	\$ (143,025)	\$ -	\$ (143,025)
(d) Deferred Tax Assets Nonadmitted			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ -	\$ -	\$ -	\$ 143,025	\$ -	\$ 143,025	\$ (143,025)	\$ -	\$ (143,025)
(f) Deferred Tax Liabilities			\$ 70,665	\$ 70,665	\$ 150,040	\$ -	\$ 150,040	\$ (150,040)	\$ 70,665
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ -	\$ (70,665)	\$ (70,665)	\$ (7,015)	\$ -	\$ (7,015)	\$ 7,015	\$ (70,665)	\$ (63,650)

2.

	As of End of Current Period			12/31/2020			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)			\$ -	\$ 143,025	\$ -	\$ 143,025	\$ (143,025)	\$ -	\$ (143,025)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.			\$ -	\$ 143,025	\$ -	\$ 143,025	\$ (143,025)	\$ -	\$ (143,025)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX		XXX	XXX	\$ -	XXX	XXX	\$ -
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.			\$ (70,665)	\$ (70,665)	\$ (150,040)	\$ -	\$ 150,040	\$ (70,665)	\$ 79,375
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ -	\$ (70,665)	\$ (70,665)	\$ (7,015)	\$ -	\$ (7,015)	\$ 7,015	\$ (70,665)	\$ (63,650)

3.

		<u>2021</u>	<u>2020</u>
a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.		2025.815%	200.000%
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.		\$ 22,181,884	\$ 20,107,414

4.

	As of End of Current Period		12/31/2020		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ -	\$ -	\$ 143,025	\$ -	\$ (143,025)	\$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies				0.000%	0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ -	\$ -	\$ 143,025	\$ -	\$ (143,025)	\$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies				0.000%	0.000%	0.000%

b. Do the Company's tax-planning strategies include the use of reinsurance? Yes [] No [X]

B. DTLs Not Recognized - Not Applicable

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

1. Current Income Tax
 - (a) Federal
 - (b) Foreign
 - (c) Subtotal
 - (d) Federal income tax on net capital gains
 - (e) Utilization of capital loss carry-forwards

(1) As of End of Current Period	12/31/2020	(3) (Col. 1 - 2) Change
\$ 461,916	\$ 232,159	\$ 229,757
\$ 461,916	\$ 232,159	\$ 229,757
\$ 3,232	\$ (3,232)	\$ -
\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

(f) Other	\$ 46,101	\$ -	\$ 46,101
(g) Federal and foreign income taxes incurred	\$ 508,017	\$ 235,391	\$ 272,626
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ 114,586	\$ (114,586)	
(2) Unearned premium reserve	\$ 28,439	\$ (28,439)	
(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 (including items <5% of total ordinary tax assets)	\$ -	\$ -	
(99) Subtotal	\$ -	\$ 143,025	\$ (143,025)
(b) Statutory valuation allowance adjustment	\$ -	\$ -	
(c) Nonadmitted	\$ -	\$ -	
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ -	\$ 143,025	\$ (143,025)
(e) Capital:			
(1) Investments	\$ -	\$ -	
(2) Net capital loss carry-forward	\$ -	\$ -	
(3) Real estate	\$ -	\$ -	
(4) Other (including items <5% of total ordinary tax assets)	\$ -	\$ -	
(99) Subtotal	\$ -	\$ -	
(f) Statutory valuation allowance adjustment	\$ -	\$ -	
(g) Nonadmitted	\$ -	\$ -	
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ -	\$ -	
(i) Admitted deferred tax assets (2d + 2h)	\$ -	\$ 143,025	\$ (143,025)
3. Deferred Tax Liabilities:			
(a) Ordinary:			
(1) Investments	\$ 70,665	\$ 150,040	\$ (79,375)
(2) Fixed Assets	\$ -	\$ -	
(3) Deferred and uncollected premium	\$ -	\$ -	
(4) Policyholder reserves	\$ -	\$ -	
(5) Other (including items <5% of total ordinary tax liabilities)	\$ -	\$ -	
(99) Subtotal	\$ 70,665	\$ 150,040	\$ (79,375)
(b) Capital:			
(1) Investments	\$ -	\$ -	
(2) Real estate	\$ -	\$ -	
(3) Other (including items <5% of total capital tax liabilities)	\$ -	\$ -	
(99) Subtotal	\$ -	\$ -	
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 70,665	\$ 150,040	\$ (79,375)
4. Net deferred tax assets/liabilities (2i - 3c)	\$ (70,665)	\$ (7,015)	\$ (63,650)

D. Among the more significant book to tax adjustments were the following:

Provision at Statutory Rate

	2021	Tax Rate
\$ 635,063		21.00%
\$ (16,197)		-0.54%
\$ (20,201)		-0.67%
\$ 5,460		0.18%
\$ 816		0.03%
\$ (143,025)		-4.73%
\$ -		0.00%
\$ -		0.00%
\$ 46,101		1.52%
\$ -		0.00%
Totals	\$ 508,017	16.80%

E. As of December 31, 2021 and December 31, 2020, the Company had no unused operating loss carryforwards available to offset future taxable income.

F. Not Applicable

G. Not Applicable

H. Repatriation Transition Tax (RTT)
Not Applicable

I. Alternative Minimum Tax (AMT) Credit
Not Applicable

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

A. Nature of Relationships

The Company was previously part of a holding company system with Shield Holdings LLC as the ultimate parent. Shield Holdings, LLC shares common ownership with Delta Defense, LLC.

For 2021, the Company had Administrative Services Agreement and Employee Lease Agreements in place between the Company and Delta Defense, LLC where duties such as record keeping, information technology support and maintenance, accounting data management, claims data management and 24/7 critical response call center support were all provided to the Company.

On September 7th 2021 the Company filed a Form A to enter into a business combination with Universal Fire & Casualty Insurance Company (UFCIC) of Indiana. As part of this Form A filing, the Company re-domiciled to Ohio as a licensed surplus lines insurer. On November 15, 2021 and December 28th, 2021, the Form A's were approved by Ohio and Indiana, respectively.

As a result of this business combination a newly formed insurance holding company, Universal Shield Insurance Group became the ultimate parent of Universal Fire & Casualty Insurance Company (UFCIC). Also, as part of this combination, Shield Indemnity Incorporated was contributed down into UFCIC as a wholly owned subsidiary on 12/31/2021.

NOTES TO FINANCIAL STATEMENTS

B. Detail of Transactions Greater than 1/2% of Admitted Assets

The Company incurred management fees to Delta Defense LLC of \$180,000 and \$160,000 for the period ended December 31, 2021 and 2020 respectively.

In 2021, Company leased space from Delta Ventures LLC, an affiliate for \$5,500 per month. Total lease expense paid to Delta Ventures LLC was \$93,170 and \$0 for the period ended December 31, 2021 and 2020, respectively.

Prior to the business combination the Company had a temporary claims servicing agreement with Universal Fire & Casualty Insurance Company where it was paid \$228,000 for 2021 for claims administration services. This was recorded as aggregate write in income. These services were only for the periods of November and December of 2021. Effective 1/1/2022 all claims' employees of Shield Indemnity Incorporated became Universal Fire & Casualty Insurance Company employees.

Prior to the business combination the Company had a 100% quota share reinsurance agreement with Universal Fire & Casualty Insurance Company that went effective on 10/15/2020. Effective 10/31/2021, this agreement was commuted and \$9,414,525 was transferred over from Shield Indemnity Incorporated for the reserves at that time. There was no gain or loss recorded on this commutation.

Also, in conjunction with this transaction the Company entered into a novation agreement with Universal Fire & Casualty Insurance Company where \$1,882,163 was transferred over for the remaining reserves on the contractual liability policies in place from 2018 through 10/14/2021. There was no gain or loss recorded on this novation.

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

Not Applicable

D. Amount Due to or From Related Parties

At December 31, 2021 the Company had \$0 and \$458,240 due from Universal Shield Insurance Group & Universal Fire & Casualty Insurance Company, respectively. \$4,041,643 was due to USCCA as a premium refund and \$600,000 was due from Shield Holdings LLC as of December 31, 2020

E. Guarantees or Undertakings for Related Parties

Not Applicable

F. Management, Service Contracts, Cost Sharing Arrangements

All items are disclosed in item A above

G. Nature of Relationships that Could Affect Operations

All items are disclosed in item A above

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. Writedown for Impairments of Investments in Affiliates

Not Applicable

K. Foreign Insurance Subsidiary Valued using CARVM

Not Applicable

L. Downstream Holding Company Valued Using Look-Through Method

Not Applicable

M. All SCA Investments

Not Applicable

N. Investment in Insurance SCAs

Not Applicable

NOTE 11 Debt

Not Applicable

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

A. Defined Benefit Plan

Not Applicable

B. Investment Policies and Strategies

Not Applicable

C. Fair Value of Plan Assets

Not Applicable

D. Basis Used to Determine Expected Long-Term Rate-of-Return

Not Applicable

E. Defined Contribution Plan

The Company participated in a defined contributions plan offered to Shield employees through the service agreement with Delta Defense disclosed in Note 10. The Company's expense related to those contributions was \$24,931 and \$19,138 for 2021 and 2020, respectively.

F. Multiemployer Plans

Not Applicable

G. Consolidated/Holding Company Plans

Not Applicable

H. Postemployment Benefits and Compensated Absences

Not Applicable

NOTES TO FINANCIAL STATEMENTS

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 shares of Class A no par value common stock issued and outstanding.

B. Dividend Rate of Preferred Stock

Not Applicable

C. Dividend Restriction

The maximum amount of dividends which can be paid by State of Indiana insurance companies to shareholders without providing 30 days prior notice to the Commissioner of Insurance is limited to the greater of 10% of insurer's surplus, as regards to policyholders as of December 31, of the preceding year, or 100% of the net income excluding realized capital gains, of the preceding year.

Though dividends may be paid in 2022 the Company has no plans to do so at this time; additionally restrictions by other states in which the Company is authorized to transact business limit the ability to declare and issue dividends without prior DOI approval.

D. Dividends Paid

Not Applicable

E. Amount of Ordinary Dividends that May be Paid

See Note 13C

F. Restrictions on Unassigned Funds

Not Applicable

G. Mutual Surplus Advances

Not Applicable

H. Company stock Held for Special Purposes

Not Applicable

I. Changes in Special Surplus Funds

Not Applicable

J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$ 336,500

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

The Company had issued a \$15,000,000 surplus note on February 13, 2020 and a \$600,000 surplus note on December 31, 2020. As part of the Form A business combination disclosed in Note 10A, both of those surplus notes were repaid and converted to paid in capital.

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

Not Applicable

M. Impact of Restatements Due on Prior Quasi Reorganizations

Not Applicable

NOTE 14 Liabilities, Contingencies and Assessments

Not Applicable

NOTE 15 Leases

Not Applicable

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

Not Applicable

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

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

Not Applicable

NOTE 20 Fair Value Measurements

A. Inputs Used for Assets and Liabilities Measured at Fair Value

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Other MM Mutual Fund				\$ 6,495,986	\$ 6,495,986
SVO Identified Funds				\$ 1,335,059	\$ 1,335,059
Indust. & Misc.				\$ 4,046,357	\$ 4,046,357
Mutual Funds				\$ 2,384,475	\$ 2,384,475
Total assets at fair value/NAV	\$ -	\$ -	\$ -	\$ 14,261,877	\$ 14,261,877

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
b. Liabilities at fair value					
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy

Description	Beginning Balance at 01/01/2021	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlem-ents	Ending Balance at 12/31/2021
a. Assets										
Total Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Description	Beginning Balance at 01/01/2021	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlem-ents	Ending Balance at 12/31/2021
b. Liabilities										
Total Liabilities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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.

Not Applicable

D. Not Practicable to Estimate Fair Value

Not Applicable

NOTE 21 Other Items

A. Unusual or Infrequent Items

Not Applicable

B. Troubled Debt Restructuring: Debtors

Not Applicable

C. Other Disclosures

Not Applicable

D. Business Interruption Insurance Recoveries

Not Applicable

E. State Transferable and Non-transferable Tax Credits

Not Applicable

F. Subprime Mortgage Related Risk Exposure

Not Applicable

G. Insurance-Linked Securities (ILS) Contracts

Not Applicable

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

Not Applicable

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:

Not Applicable

Type II – Nonrecognized Subsequent Events:

Not Applicable

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables

Not Applicable

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					\$ -	\$ -
b. All Other					\$ -	\$ -
c. Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Direct Unearned Premium Reserve						

(2)

	Direct	Assumed	Ceded	Net
a. Contingent Commission				\$ -
b. Sliding Scale Adjustments				\$ -

NOTES TO FINANCIAL STATEMENTS

c. Other Profit Commission Arrangements	\$	-	\$	-	\$	-
d. TOTAL	\$	-	\$	-	\$	-
(3)						
Protected Cell Name	Covered Exposure	Ultimate Exposure Amt.	Fair Value of Assets as of Statement Date	Initial Contract Date of Securitization Instrument	Maturity Date of Securitized Instrument	
TOTAL	XXX	\$ - -	\$ - -	XXX	XXX	

D. Uncollectible Reinsurance
Not Applicable

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

F. Retroactive Reinsurance
Not Applicable

G. Reinsurance Accounted for as a Deposit
Not Applicable

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

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

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation
(1) Not Applicable
(2) The amount of unexhausted limit as of the reporting date.
Not Applicable

K. Reinsurance Credit
Not Applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not Applicable

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Net loss and loss adjustments expense reserves for property and casualty insurance as of December 31, 2020 were \$5,844,342. As of December 31, 2021 \$5,325,016 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are \$0 as of December 31, 2021.

There has been (\$559,324) in (favorable) prior year development since December 31, 2020.

See Note 10b for details on a commutation and novation that occurred as part of the Form A to transfer all existing reserves to Universal Fire & Casualty Insurance Company

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	12/31/2021	
3. Was anticipated investment income utilized in the calculation?	Yes []	No [X]

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
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? Ohio

1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [X] No []

2.2 If yes, date of change: 12/31/2021

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

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.

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).

3.4 By what department or departments?
 Ohio 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 [] No [X]
 4.12 renewals? Yes [] No [X]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
 4.21 sales of new business? Yes [] No [X]
 4.22 renewals? Yes [] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
 If yes, complete and file the merger history data file with the NAIC. Yes [] No [X]

5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

6.2 If yes, give full information:

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]

7.2 If yes,
 7.21 State the percentage of foreign control; %
 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1 Nationality	2 Type of Entity
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
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 location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 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 reporting entity? 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 [] N/A [X]
 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
 BDO USA, LLP 200 Ottawa Ave. NW, Suite 300, Grand Rapids, MI 49503
 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?
 Peter Scoutis, Merlinos & Associates, Inc.
 3274 Medlock Bridge Rd
 Norcross, GA 30092
 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 [X]
 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 2021 OF THE Shield Indemnity Incorporated
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 with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers.....	\$
20.12 To stockholders not officers.....	\$
20.13 Trustees, supreme or grand (Fraternal Only)	\$

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers.....	\$
20.22 To stockholders not officers.....	\$
20.23 Trustees, supreme or grand (Fraternal Only)	\$

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]

21.2 If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others.....	\$
21.22 Borrowed from others.....	\$
21.23 Leased from others	\$
21.24 Other	\$

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment \$	
22.22 Amount paid as expenses	\$
22.23 Other amounts paid	\$

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$

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 2021 OF THE Shield Indemnity Incorporated
GENERAL INTERROGATORIES

25.02 If no, give full and complete information relating thereto

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

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$	0
25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$	0
25.093 Total payable for securities lending reported on the liability page. \$	0

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [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 \$	150,957
26.29 On deposit with other regulatory bodies \$	
26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$	
26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$	
26.32 Other \$	

26.3 For category (26.26) provide the following:

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

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.

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

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? .. Yes [] No [X]

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108	Yes [] No []
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
Wells Fargo Advisor	15 South Main St, Greenville SC 29601

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
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. 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
Wells Fargo Advisor	U.....

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
19616	Wells Fargo Advisor	88KRVSOEKUGQZJ3DKW	SEC	DS.....

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

30.2 If yes, complete the following schedule:

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
GENERAL INTERROGATORIES

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	5,645,138	5,632,542	(12,596)
31.2 Preferred stocks .....	.0	.0	0
31.3 Totals	5,645,138	5,632,542	(12,596)

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

SVO - Clearwater Analytics

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 [] 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 [] 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 [] 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 []

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

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

Has the reporting entity self-designated PLGI securities?

Yes [] No []

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 []

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 []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
GENERAL INTERROGATORIES

OTHER

38.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$34,612

38.2 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
Supportive Insurance Services LLC	21,148

39.1 Amount of payments for legal expenses, if any?\$456,573

39.2 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
Squire Patton Boggs	341,614

40.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?\$3,963

40.2 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
Ohio Department of Insurance	3,250

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [] No [X]	
1.2	If yes, indicate premium earned on U. S. business only.	\$	
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$	
1.31	Reason for excluding		
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$	
1.5	Indicate total incurred claims on all Medicare Supplement Insurance.	\$	0
1.6	Individual policies:	Most current three years: 1.61 Total premium earned \$ 0 1.62 Total incurred claims \$ 0 1.63 Number of covered lives 0	
		All years prior to most current three years 1.64 Total premium earned \$ 0 1.65 Total incurred claims \$ 0 1.66 Number of covered lives 0	
1.7	Group policies:	Most current three years: 1.71 Total premium earned \$ 0 1.72 Total incurred claims \$ 0 1.73 Number of covered lives 0	
		All years prior to most current three years 1.74 Total premium earned \$ 0 1.75 Total incurred claims \$ 0 1.76 Number of covered lives 0	
2.	Health Test:	1 Current Year 2 Prior Year	
2.1	Premium Numerator		
2.2	Premium Denominator	13,847,018	9,527,782
2.3	Premium Ratio (2.1/2.2)0.000	.0.000
2.4	Reserve Numerator0	.0
2.5	Reserve Denominator0	6,561,467
2.6	Reserve Ratio (2.4/2.5)0.000	.0.000
3.1	Did the reporting entity issue participating policies during the calendar year?	Yes [] No [X]	
3.2	If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year: 3.21 Participating policies \$		
	3.22 Non-participating policies \$		
4.	For mutual reporting Entities and Reciprocal Exchanges Only:		
4.1	Does the reporting entity issue assessable policies?	Yes [] No [X]	
4.2	Does the reporting entity issue non-assessable policies?	Yes [] No [X]	
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders?	%	
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.	\$	
5.	For Reciprocal Exchanges Only:		
5.1	Does the Exchange appoint local agents?	Yes [] No [X]	
5.2	If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation Yes [] No [] N/A [X] 5.22 As a direct expense of the exchange Yes [] No [] N/A [X]		
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?		
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?	Yes [] No [X]	
5.5	If yes, give full information		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
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 WC contracts.

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 reviews loss exposures with its independent actuary as needed.

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 does not write property coverage.

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 unreinsured catastrophic loss.
The Company does not write property coverage.

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 ratio cap, an aggregate limit or any similar provisions)? Yes [] No [X]

7.2 If yes, indicate the number of reinsurance contracts containing such provisions:

7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)? Yes [] No [X]

8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [] No [X]

8.2 If yes, give full information
.....

9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancelable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [] No [X]

9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [] No [X]

9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4 Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [] No [X]

9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or, Yes [X] No []
(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 [X] No [] N/A []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
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): \$ 2,000,000

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.

14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [] No [X]

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
.....

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [] No [X]

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No [X]

14.5 If the answer to 14.4 is no, please explain:
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]

15.2 If yes, give full information
.....

16.1 Does the reporting entity write any warranty business? Yes [] No [X]
If yes, disclose the following information for each of the following types of warranty coverage:

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

* Disclose type of coverage:
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

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	\$

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 [X] No []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
FIVE-YEAR HISTORICAL DATA

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

	1 2021	2 2020	3 2019	4 2018	5 2017
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. 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)	13,169,893	6,970,575	0	0	0
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
6. Total (Line 35)	13,169,893	6,970,575	0	0	0
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. 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)	13,169,893	6,970,575	0	0	0
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
12. Total (Line 35)	13,169,893	6,970,575	0	0	0
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	1,006,807	1,375,948	0	0	0
14. Net investment gain or (loss) (Line 11)	1,452,649	94,976	0	0	0
15. Total other income (Line 15)	228,000	0	0	0	0
16. Dividends to policyholders (Line 17)	0	0	0	0	0
17. Federal and foreign income taxes incurred (Line 19)	171,361	232,159	0	0	0
18. Net income (Line 20)	2,516,094	1,238,765	0	0	0
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	22,513,998	31,042,856	0	0	0
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	0	0	0	0	0
20.2 Deferred and not yet due (Line 15.2)	0	0	0	0	0
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26)	332,113	10,935,443	0	0	0
22. Losses (Page 3, Line 1)		5,884,342	0	0	0
23. Loss adjustment expenses (Page 3, Line 3)		0	0	0	0
24. Unearned premiums (Page 3, Line 9)		677,125	0	0	0
25. Capital paid up (Page 3, Lines 30 & 31)	2,000,000	1,200,000	0	0	0
26. Surplus as regards policyholders (Page 3, Line 37)	22,181,884	20,107,414	0	0	0
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	(3,024,668)	6,076,759	0	0	0
Risk-Based Capital Analysis					
28. Total adjusted capital	22,181,884	20,107,414	0	0	0
29. Authorized control level risk-based capital	1,094,961	1,610,656	0	0	0
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3 x100.0					
30. Bonds (Line 1)	26.0	62.9	0.0	0.0	0.0
31. Stocks (Lines 2.1 & 2.2)	29.6	23.1	0.0	0.0	0.0
32. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 & 4.3)	0.0	0.0	0.0	0.0	0.0
34. Cash, cash equivalents and short-term investments (Line 5)	44.4	14.0	0.0	0.0	0.0
35. Contract loans (Line 6)	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7)	0.0	0.0	0.0	0.0	0.0
37. Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.0
38. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
39. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0	0.0	0.0
40. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)		0	0	0	0
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)	0	0	0	0	0
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	0	0	0	0	0
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47	0	0	0	0	0
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.0	0.0	0.0	0.0	0.0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2021	2 2020	3 2019	4 2018	5 2017
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	(298,598)	714,474	0	0	0
52. Dividends to stockholders (Line 35)	0	0	0	0	0
53. Change in surplus as regards policyholders for the year (Line 38)	2,074,472	20,107,414	0	0	0
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. 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)	14,325,578	2,169,237	0	0	0
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
59. Total (Line 35)	14,325,578	2,169,237	0	0	0
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. 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)	14,325,578	2,169,237	0	0	0
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
65. Total (Line 35)	14,325,578	2,169,237	0	0	0
Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)	61.0	66.9	0.0	0.0	0.0
68. Loss expenses incurred (Line 3)	4.2	0.0	0.0	0.0	0.0
69. Other underwriting expenses incurred (Line 4)	27.6	18.7	0.0	0.0	0.0
70. Net underwriting gain (loss) (Line 8)	7.3	14.4	0.0	0.0	0.0
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	27.2	25.5	0.0	0.0	0.0
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	65.2	66.9	0.0	0.0	0.0
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	59.4	34.7	0.0	0.0	0.0
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)	(558)	1,844	0	0	0
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	(2.8)	0.0	0.0	0.0	0.0
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(378)	0	0	0	0
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	0.0	0.0	0.0	0.0	0.0

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

Yes No

If no, please explain:

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0	
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0	
5. 2015	0	0	0	0	0	0	0	0	0	0	0	0	
6. 2016	0	0	0	0	0	0	0	0	0	0	0	0	
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0	
8. 2018	24	0	24	10	0	0	0	0	0	0	0	10	
9. 2019	3,746	0	3,746	2,435	0	0	0	0	0	0	0	2,435	
10. 2020	9,528	0	9,528	6,193	0	0	0	0	0	0	0	6,193	
11. 2021	13,847	0	13,847	9,001	0	0	0	583	0	0	0	9,584	
12. Totals	XXX	XXX	XXX	17,639	0	0	0	583	0	0	0	18,222	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0			
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2013	0	0	0	0	0	0	0	0	0	0	0	0	0			
4. 2014	0	0	0	0	0	0	0	0	0	0	0	0	0			
5. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0			
6. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0			
7. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0			
8. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0			
9. 2019	0	0	0	0	0	0	0	0	0	0	0	0	0			
10. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0			
11. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0			
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2012	0	0	0	0.0	0.0	0.0	0	0	0	0	0
3. 2013	0	0	0	0.0	0.0	0.0	0	0	0	0	0
4. 2014	0	0	0	0.0	0.0	0.0	0	0	0	0	0
5. 2015	0	0	0	0.0	0.0	0.0	0	0	0	0	0
6. 2016	0	0	0	0.0	0.0	0.0	0	0	0	0	0
7. 2017	0	0	0	0.0	0.0	0.0	0	0	0	0	0
8. 2018	10	0	10	41.7	0.0	41.7	0	0	0	0	0
9. 2019	2,435	0	2,435	65.0	0.0	65.0	0	0	0	0	0
10. 2020	6,193	0	6,193	65.0	0.0	65.0	0	0	0	0	0
11. 2021	9,584	0	9,584	69.2	0.0	69.2	0	0	0	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	14	10	10	10	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,813	2,976	2,435	(541)	(378)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,210	6,193	(17)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,001	XXX	XXX
											12. Totals	(558) (378)

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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021		
1. Prior	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2. 2012	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3. 2013	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0	XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	0	10	10	10	XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,133	1,619	2,435	XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,684	6,193	XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,001	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)										2021
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	2021	
1. Prior	0	0	0	0	0	0	0	0	0	0	0
2. 2012	0	0	0	0	0	0	0	0	0	0	0
3. 2013	XXX	0	0	0	0	0	0	0	0	0	0
4. 2014	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2015	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2016	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2017	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	14	0	0	0	0
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,680	1,174	0	0
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,913	0	0
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. District of Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	L							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	L	(1,245,698)	(1,245,698)	0	2,501,704	(1,503,879)	0	
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	N							
45. Utah	UT	N							
46. Vermont	VT	N							
47. Virginia	VA	N							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate other alien ..	OT	XXX	0	0	0	0	0	0	0
59. Totals		XXX	(1,245,698)	(1,245,698)	0	2,501,704	(1,503,879)	0	0
DETAILS OF WRITE-INS									
58001.		XXX							
58002.		XXX							
58003.		XXX							
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX	0	0	0	0	0	0	0

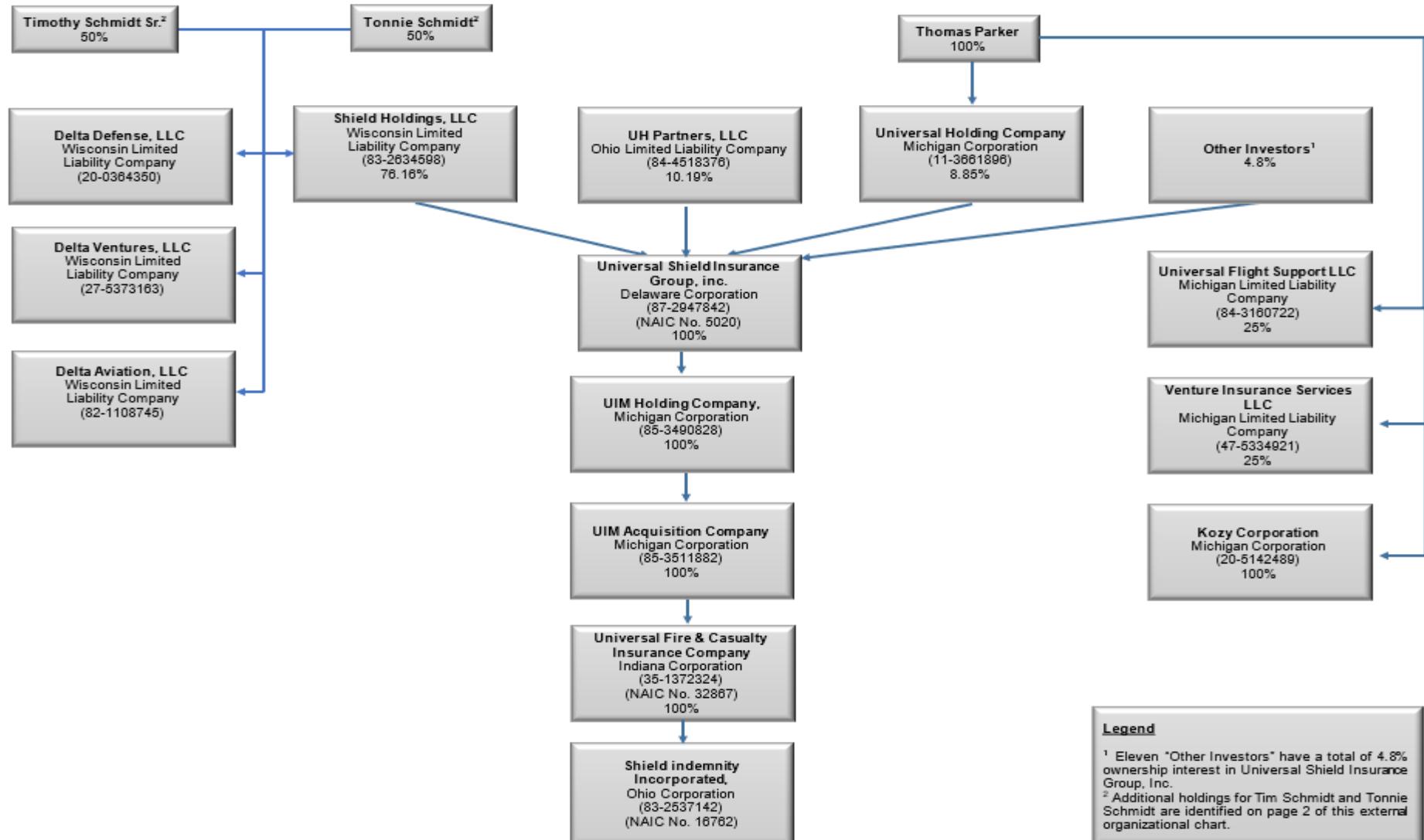
(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 2 R - Registered - Non-domiciled RRGs..... 0
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)..... 0 Q - Qualified - Qualified or accredited reinsurer..... 0
 D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile..... 0 N - None of the above - Not allowed to write business in the state 55

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

Premium is recorded in the states in which the policy is executed.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Shield Indemnity Incorporated
OVERFLOW PAGE FOR WRITE-INS

NONE